



City of
PALM COAST

Community Development Department
Building Services Division

160 Lake Avenue
Palm Coast, FL 32164
386-986-3780

NOTICE OF COMMENCEMENT

PERMIT NUM 2026020573

TAX FOLIO NUM 29-12-31-5567-00000-0DD0

STATE OF FLORIDA
COUNTY OF FLAGLER

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY AND, IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

ADDRESS: 2 CASCADES WAY UNIT U PALM COAST FL

LEGAL DESCRIPTION OF PROPERTY SEMINOLE TRACE MB 44 PG 80 TRACT 100' (1.37 AC) COMMON AREA/RECREATION AREA/OPEN SPACE (PLAT DEDICATION TO THE SEMINOLE TRACE COMMUNITY ASSN INC)
DESCRIPTION OF IMPROVEMENT ENTRANCE SIGN-Seminole TRACE 216' FT ENTRY SIGN

OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR IMPROVEMENT

NAME KL SEMINOLE TRACE LLC INTEREST IN PROPERTY owner
ADDRESS 105 NE 1st Street Delray Beach FL 33444
NAME AND ADDRESS OF FEE SIMPLE
TITLEHOLDER - (IF OTHER THAN OWNER)

CONTRACTOR NAME Robert Tanaka Masiku - Signature Privacy Walls of FL Inc. PHONE 727-967-4044
ADDRESS 4653 Linnet Street New Port Richey FL 34652

SURETY NAME PHONE
ADDRESS BOND AMOUNT

LENDER NAME PHONE
ADDRESS

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA STATUTES

NAME PHONE
ADDRESS

IN ADDITION TO HIM/HERSELF, OWNER DESIGNATES THE FOLLOWING PERSON(S) TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES

NAME PHONE
ADDRESS

EXPIRATION DATE OF NOTICE OF COMMENCEMENT

THE EXPIRATION DATE IS 1 YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED HERE:

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

SIGNATURE OF OWNER OR LESSEE, OR OWNER'S OR LESSEE'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

Authorized Signatory

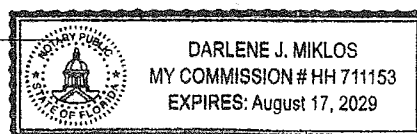
SIGNATORY'S TITLE / OFFICE

STATE OF FLORIDA COUNTY OF FLAGLER

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME, BY MEANS OF ☒ PHYSICAL PRESENCE OR ☐ ONLINE NOTARIZATION,

THIS 26th DAY OF May, 2026, BY James P. Harvey
YEAR NAME OF AFFIANT

PERSONALLY KNOWN ☒ OR PRODUCED IDENTIFICATION



SIGNATURE OF NOTARY PUBLIC STATE OF FLORIDA

PRINT, TYPE OR STAMPED COMMISSIONED NAME OF NOTARY PUBLIC

