

Notice of Contest of Lien
(713.22(2) FS)

TO: _____

ADDRESS: _____

You are notified that the undersigned contests the Claim of Lien filed by you on _____, 20____, and recorded in Official Records Book _____, Page _____, of the public records of Wakulla County, Florida, and that the time within which you may file suit to enforce your lien is limited to 60 days from the date of service of this notice.

Dated this _____ day of _____, 20_____.

Signature: _____

Printed Name: _____

State of Florida
County of Wakulla

The foregoing instrument was acknowledged before me by means of ___ physical presence or ___ online notarization this ___ day of _____, 20____, by _____, who is personally known to me or has produced _____ as identification.

(Seal)

Notary Public/Deputy Clerk

Printed Name

I, Greg James, Clerk of Circuit and County Court, do hereby certify that I have on this ___ day of _____, 20____, mailed a copy of this NOTICE OF CONTEST OF LIEN to the above-named individual by certified mail, return receipt request.

By: _____, Deputy Clerk