

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

State of Florida
County of Wakulla

TO: _____

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

Print Name

State of Florida **County of Wakulla**

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or has produced _____ as identification and who did/did not take an oath.

Signature of Notary/Deputy Clerk

Printed Name

State of Florida **County of Wakulla**

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

By: _____, Deputy Clerk