

74617-240503

RELEASE OF STOP NOTICE

TO: CITY OF LOS ANGELES

200 N SPRING ST RM 355


LOS ANGELES

You are hereby notified that the undersigned claimant releases that certain Stop Notice dated 08/13/24 , in the amount of 4,728.14 against CITY OF LOS ANGELES as owner or public body and ACCESS PACIFIC as prime contractor in connection with the work of improvement known as 557 S CLARENCE ST ATP1 Boyle Heights WO: E700238F in the City of LOS ANGELES County of LOS ANGELES State of California.

Date 08/24/24

Name of Claimant Robertson's

By



Authorized Agent

VERIFICATION

I, the undersigned, state: I am the Agent of the claimant named in the foregoing Release; I have read said Release of Stop Notice and know the contents thereof, and I certify that the same is true of my own knowledge.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 08/24/24 , at Corona, California.


(Signature of Claimant or Authorized Agent)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Riverside } ss.

On 08/28/2024 before me, Tina Hawkins, Notary Public, personally appeared Tiffany Lambo, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.


Signature



OPTIONAL INFORMATION

Date of Document _____

Type or Title of Document _____

Number of Pages in Document _____

Document in a Foreign Language _____

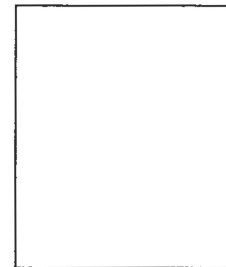
Type of Satisfactory Evidence:

- ☐ Personally Known with Paper Identification
☐ Paper Identification
☐ Credible Witness(es)

Capacity of Signer:

- ☐ Trustee
☐ Power of Attorney
☐ CEO / CFO / COO
☐ President / Vice-President / Secretary / Treasurer
☐ Other: _____

Thumbprint of Signer



☐ Check here if no thumbprint or fingerprint is available.

Other Information: _____
