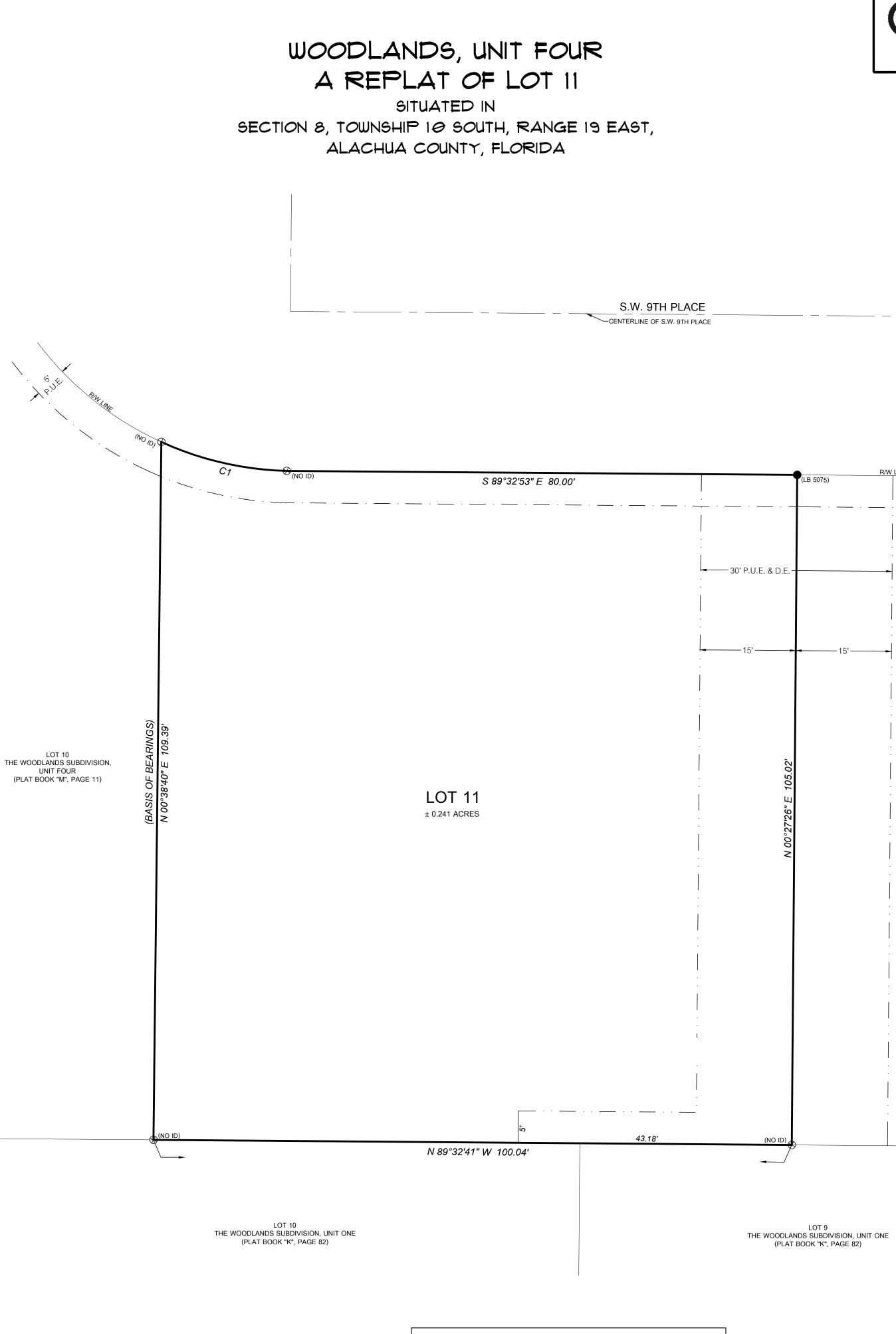


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ALL PLATTED UTILITY EASEMENTS ARE ALSO EASEMENTS FOR THE CONSTRUCTION, INSTALLATION, MAINTENANCE, AND OPERATION OF CABLE TELEVISION SERVICES; PROVIDED, HOWEVER, NO SUCH CONSTRUCTION, INSTALLATION, MAINTENANCE, AND OPERATION OF CABLE TELEVISION SERVICES SHALL INTERFERE WITH THE FACILITIES AND SERVICES OF AN ELECTRIC, TELEPHONE, GAS, OR OTHER PUBLIC UTILITY. IN THE EVENT A CABLE TELEVISION COMPANY DAMAGES THE FACILITIES OF A PUBLIC UTILITY, IT SHALL BE SOLELY RESPONSIBLE FOR THE DAMAGES.



CURVE DATA TABLE						
CURVE	LENGTH	RADIUS	DELTA	TANGENT	CHORD	CHORD BEARING
C1	20.31'	50.00'	23°16'16"	10.30'	20.17'	N 76°59'46" W



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LOT 12 THE WOODLANDS SUBDIVISION,

UNIT FOUR (PLAT BOOK "M", PAGE 11)

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GR	APHIC	SCALE
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OWNER'S CERTIFICATION		
	LANDS TO BE S	BY CERTIFY THEY ARE THE OWNERS OF THE LANDS SURVEYED AND PLATTED TO BE KNOWN AS "THE ".
VITNESS TO BOTH	BY: STE	VEN R. SUMMERS
	BY:	
/ITNESS TO BOTH		ZABETH A. SUMMERS
ACKNOWLEDGEMENT (STA	ATE OF FL	ORIDA, COUNTY OF ALACHUA)
HEREBY CERTIFY THAT ON THIS DAY PERSON	NALLY APPEARE	ED BEFORE ME, STEVEN R. SUMMERS , KNOWN TO DGED THAT SHE EXECUTED THIS INSTRUMENT AS
ITNESS MY HAND AND OFFICIAL SEAL THIS .	DAY OF	A.D. 2021
OTARY PUBLIC-STATE OF FLORIDA		
OMMISSION EXPIRES:		
OMMISSION EXPIRES:		
OMMISSION EXPIRES: OMMISSION NO.: ACKNOWLEDGEMENT (STA HEREBY CERTIFY THAT ON THIS DAY PERSOI O ME TO BE THE PERSON HEREIN DESCRIBE	NALLY APPEARE	LORIDA, COUNTY OF ALACHUA) ED BEFORE ME, ELIZABETH A. SUMMERS, KNOWN WLEDGED THAT HE EXECUTED THIS INSTRUMENT AS
OMMISSION EXPIRES: OMMISSION NO.: ACKNOWLEDGEMENT (STA HEREBY CERTIFY THAT ON THIS DAY PERSOI O ME TO BE THE PERSON HEREIN DESCRIBE IS OWN FREE ACT AND DEED.	NALLY APPEARE ED AND ACKNOV	ED BEFORE ME, ELIZABETH A. SUMMERS, KNOWN WLEDGED THAT HE EXECUTED THIS INSTRUMENT AS
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CERTIFICATE OF APPROVAL BY PROFESSIONAL SURVEYOR & MAPPER IT IS HEREBY CERTIFIED, THAT THIS PLAT HAS BEEN REVIEWED FOR CONFORMITY WITH THE PLATTING REQUIREMENTS PURSUANT TO SECTION 177, PART 1, FLORIDA STATUTES AND THAT THIS PLAT COMPLIES WITH THE TECHNICAL REQUIREMENTS OF SAID CHAPTER, ALSO THAT THIS PLAT CONFORMS TO THE REQUIREMENTS OF ALACHUA COUNTY ORDINANCES AND REGULATIONS.

ALACHUA COUNTY SURVEYOR MATTHEW DANIEL PICKEL DATE _____ PROFESSIONAL SURVEYOR AND MAPPER FLORIDA REGISTRATION NUMBER: LS 6125.

SURVEYOR'S CERTIFICATION

I DO HEREBY CERTIFY THAT THIS PLAT ENTITLED THE WOODLANDS SUBDIVISION, UNIT FOUR, A REPLAT OF LOT 11, WAS PREPARED UNDER MY RESPONSIBLE DIRECTION AND SUPERVISION, AND THAT THIS PLAT COMPLIES WITH ALL REQUIREMENTS AS SET FORTH IN CHAPTER 177, PART 1 OF THE FLORIDA STATUTES.

DATE