

RESOLUTION NO. 2021- 529

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, ACCEPTING A BILL OF SALE AND SCHEDULE OF VALUES, FINAL RELEASE OF LIEN AND WARRANTY ASSOCIATED WITH THE WATER SYSTEM TO SERVE ST. AUGUSTINE CANCER TREATMENT FACILITY LOCATED OFF US HIGHWAY 1 SOUTH.

RECITALS

WHEREAS, Augustine Holdings, LLC, a Florida limited liability company, has executed and presented to the County a Bill of Sale and Schedule of Values, attached hereto as Exhibit "A" incorporated by reference and made a part hereof, conveying all personal property associated with the water system to serve St. Augustine Cancer Treatment Facility located off US Highway 1 South; and

WHEREAS, ACS Utilities, LLC, a Florida limited liability company, has executed and presented to the County a Final Release of Lien and a Warranty for work performed at St. Augustine Cancer Treatment Facility, attached hereto as Exhibits "B" and "C", incorporated by reference and made a part hereof; and

WHEREAS, St. Johns County Utility Department has reviewed and approved the documents mentioned above, as stated in a memo attached hereto as Exhibit "D", incorporated by reference and made a part hereof.

NOW, THEREFORE BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, as follows:

Section 1. The above recitals are incorporated by reference into the body of this Resolution and such recitals are adopted as findings of fact.

Section 2. The above described Bill of Sale and Schedule of Values, Final Release of Lien, and Warranty, attached and incorporated hereto, are hereby accepted by the Board of County Commissioners.

Section 3. To the extent that there are typographical, scrivener or administrative errors that do not change the tone, tenor, or concept of this Resolution, then this Resolution may be revised without subsequent approval by the Board of County Commissioners.

Section 4. The Clerk of the Court is instructed to record the original Final Release of Lien and file the Warranty and Bill of Sale in the Public Records of St. Johns County, Florida.


PASSED AND ADOPTED this 21 day of December, 2021.

**BOARD OF COUNTY COMMISSIONERS
ST. JOHNS COUNTY, FLORIDA**

By: 
Henry Dean, Chair

ATTEST: Brandon J. Patty, Clerk of
the Circuit Court & Comptroller

RENDITION DATE 12.22.2021


Deputy Clerk





BILL OF SALE
UTILITY IMPROVEMENTS
for

ST. AUGUSTINE CANCER TREATMENT FACILITY
121 Whitehall Drive, St. Augustine, Florida 32086

Augustine Holdings, LLC, a Florida limited liability company, whose address is 7015 A.C. Skinner Parkway, Suite 1, Jacksonville, FL 32256, (the "Seller") for and in consideration of the sum of Ten and No/100 Dollars (\$10) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, hereby grants, bargains, sells, transfers and delivers to **ST. JOHNS. COUNTY, FLORIDA**, a political subdivision of the State of Florida, the following personal property:

"SEE EXHIBIT A SCHEDULE OF VALUES FOR ST. AUGUSTINE CANCER TREATMENT FACILITY"

The Seller does, for itself and its successors and assigns, covenant to and with St. Johns County and its successors and assigns, that it is lawful owner of said personal property; that the personal property is free of all encumbrances; that it has good rights to sell the same; and that it will warrant and defend the sale of the personal property against the lawful claims and demands of all persons.

IN WITNESS WHEREOF, the Seller has caused this instrument to be duly executed and delivered by its duly authorized office on this 29 of June, 2021.

WITNESS:

[Signature]
Witness Signature

Ryan R. Merrell
Print Witness Name

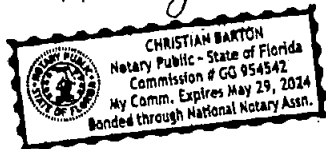
OWNER:

[Signature]
Owner's Signature

Thomas Davis
Print Owner's Name

STATE OF FLORIDA
COUNTY OF Duval

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 29th day of June, 2021, by Thomas Davis as owner/manager for Augustine Holdings, LLC.



[Signature]
Notary Public
My Commission Expires: May 29 2024

Personally Known or Produced Identification
Type of Identification Produced

Exhibit "A" to Bill of Sale



St. Johns County Utility Department
 Asset Management
 Schedule of Values

Project Name: St. Augustine Cancer Treatment Center
 Contractor: Utility Contractor: ACS Utilities, LLC
 Developer: _____

	UNIT	QUANTITY	UNIT COST	TOTAL COST
Water Mains (Size, Type & Pipe Class)				
	LF		\$ -	\$ -
	LF		\$ -	\$ -
	LF		\$ -	\$ -
	LF		\$ -	\$ -
	LF		\$ -	\$ -
Water Valves (Size and Type)				
8X3 TAPPING SLEEVE	Ea	1	\$ 1,203.75	\$ 1,203.75
3" GATE VALVE	Ea	1	\$ 2,150.00	\$ 2,150.00
	Ea		\$ -	\$ -
	Ea		\$ -	\$ -
	Ea		\$ -	\$ -
Hydrants Assembly (Size and Type)				
	Ea		\$ -	\$ -
			\$ -	\$ -
			\$ -	\$ -
Sevices (Size and Type)				
3X2 REDUCER	Ea	1	\$ 50.00	\$ 50.00
3" 90	Ea	1	\$ 23.00	\$ 23.00
2" METER BOX	Ea	1	\$ 266.00	\$ 266.00
			\$ -	\$ -
Total Water System Cost				\$ 3,692.75



FINAL RELEASE OF LIEN

UTILITY IMPROVEMENTS

The undersigned lienor, in consideration of the sum \$3,692.75 hereby waives and releases its lien and right to claim a lien for Water and Sewer labor, services or materials furnished through 06-21-2021 to St Augustine Holdings, LLC. to the following described property:

“SEE EXHIBIT A SCHEDULE OF VALUES FOR St Augustine Cancer Treatment Center”

The waiver and release does not cover any retention or labor, services, or materials furnished after the date specified.

IN WITNESS WHEREOF, the Lienor has caused this instrument to be duly executed and delivered by its duly authorized office on this 07 of 12, 2021

WITNESS:

Heather Crews

Witness Signature

HEATHER CREWS

Print Witness Name

OWNER:

Anna Marie Aman

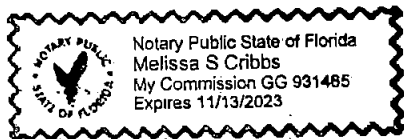
Lienor's Signature

ANNA MARIE AMAN

Print Lienor's Name

STATE OF FLORIDA
COUNTY OF DUVAL

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 12 day of JULY, 2021, by ANNA MARIE AMAN as MANAGING MEMBER for ACS UTILITIES, LLC



Melissa Cribbs

Notary Public MELISSA CRIBBS GG 931465

My Commission Expires: 11-13-2023

Personally Known or Produced Identification
Type of Identification Produced

Exhibit "A" to Final Release of Lien



St. Johns County Utility Department
 Asset Management
 Schedule of Values

Project Name: St. Augustine Cancer Treatment Center
 Contractor: Utility Contractor: ACS Utilities, LLC
 Developer: _____

	UNIT	QUANTITY	UNIT COST	TOTAL COST
Water Mains (Size, Type & Pipe Class)				
	LF		\$ -	\$ -
	LF		\$ -	\$ -
	LF		\$ -	\$ -
	LF		\$ -	\$ -
	LF		\$ -	\$ -
Water Valves (Size and Type)				
8X3 TAPPING SLEEVE	Ea	1	\$ 1,203.75	\$ 1,203.75
3" GATE VALVE	Ea	1	\$ 2,150.00	\$ 2,150.00
	Ea		\$ -	\$ -
	Ea		\$ -	\$ -
	Ea		\$ -	\$ -
Hydrants Assembly (Size and Type)				
	Ea		\$ -	\$ -
			\$ -	\$ -
			\$ -	\$ -
Sevices (Size and Type)				
3X2 REDUCER	Ea	1	\$ 50.00	\$ 50.00
3" 90	Ea	1	\$ 23.00	\$ 23.00
2" METER BOX	Ea	1	\$ 266.00	\$ 266.00
			\$ -	\$ -
Total Water System Cost			\$	3,692.75



WARRANTY
UTILITY IMPROVEMENTS

Date: 06/21/2021
Project Title: St. Augustine
Cancer Facility

FROM: ACS Utilities LLC
3907 Edgewood Drive
Jacksonville Fl 32254

St. Johns County, Florida

TO: St. Johns County Utility Department
Post Office Box 3006
St. Augustine, Florida 32085

The undersigned warrants all its work performed in connection with the above project to be free from all defects in material and workmanship for a period of (1) year from the date of acceptance of the project by St. Johns County and agrees to remedy all defects arising with that period at its expense.

The term defects shall not be construed as embracing damage arising from misuse, negligence, Acts of God, normal wear and tear or failure to follow operating instructions.

Contractor:

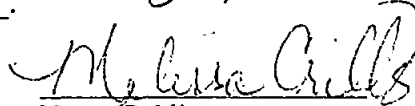


Contractor's Signature

Anna Marie Aman
Print Contractor's Name

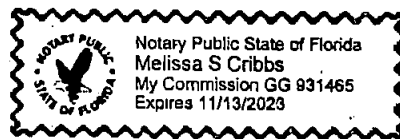
STATE OF FLORIDA
COUNTY OF Duval

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 21st day of June, 2021, by Anna Marie Aman as Managing Member for ACS Utilities, LLC.



Notary Public
My Commission Expires: _____

Personally Known or Produced Identification
Type of Identification Produced





St. Johns County Board of County Commissioners

Utility Department

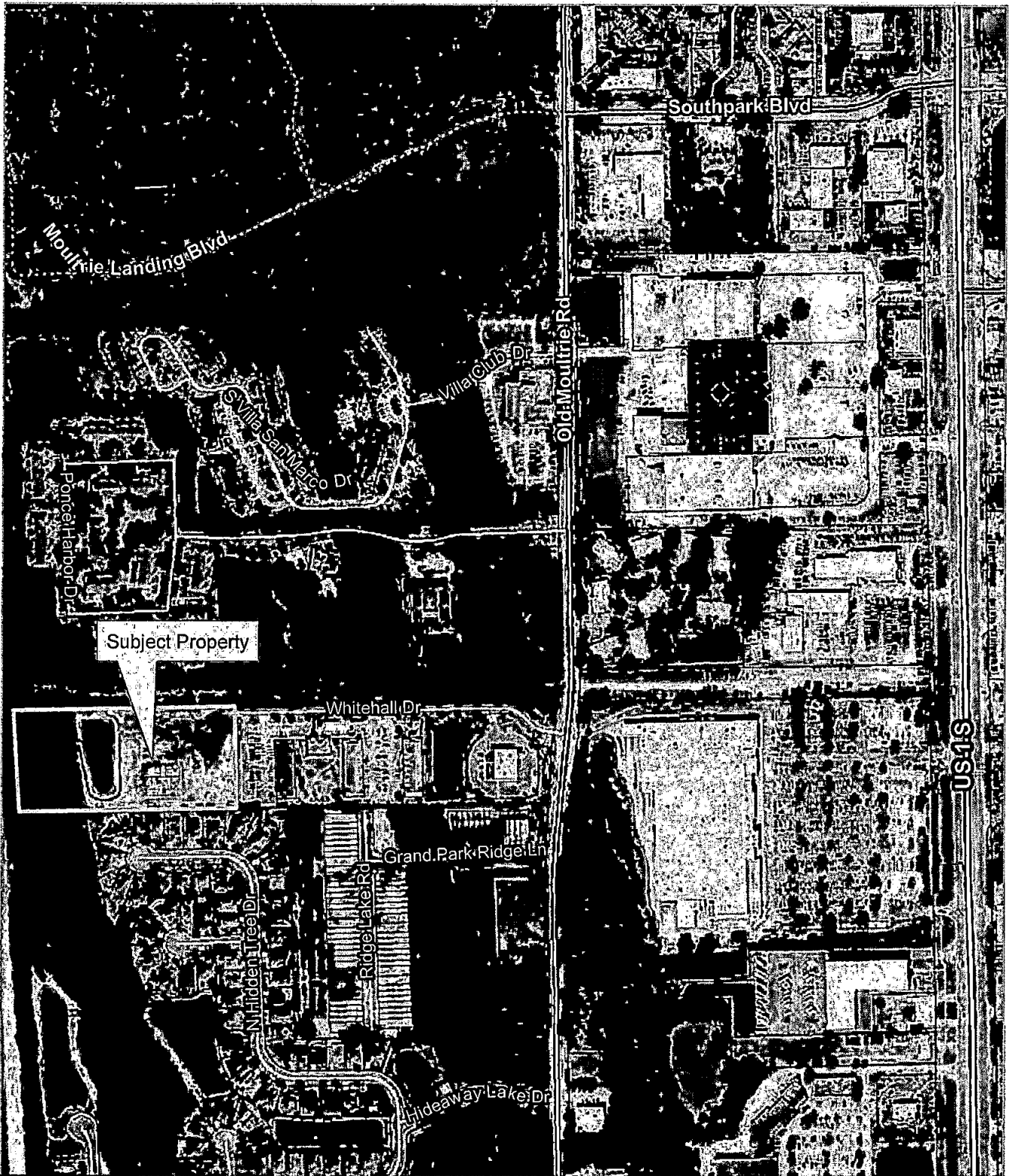
INTEROFFICE MEMORANDUM

TO: Debbie Taylor, Real Estate Manager
FROM: Melissa Caraway, Utility Review Coordinator
SUBJECT: St. Augustine Cancer Treatment Facility
DATE: November 16, 2021

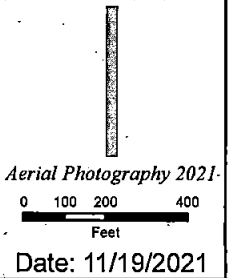
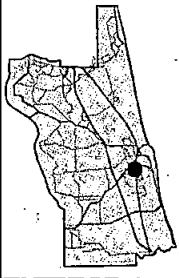
Please present the Bill of Sale, Schedule of Values, Release of Lien, and Warranty to the Board of County Commissioners (BCC) for final approval and acceptance of St. Augustine Cancer Treatment Facility.

After acceptance by BCC, please provide the Utility Department with a copy of the executed resolution for our files.

Your support and cooperation as always are greatly appreciated.



Subject Property



Bill of Sale and schedule
of values, Final Release of
Lien & Warranty

St. Augustine Cancer
Treatment Facility

Land Management
Systems
Real Estate
Division
(904) 209-0782

Disclaimer:
This map is for reference use only.
Data provided are derived from multiple
sources with varying levels of accuracy.
The St. Johns County Real Estate
Division disclaims all responsibility
for the accuracy or completeness
of the data shown hereon.

