

## NOTICE OF COMMENCEMENT

Permit No. 000046688, 000046689

Tax Folio No. 35-35-16-02556-003

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description of property): COMM NW COR OF SW1/4 OF NW1/4...  
a) Street (job) Address: 3239 NW York Dr., Lake City, FL 32005
2. General description of improvement(s): Installation of exterior signage
3. Owner or Lessee information (Lessee as owner only if contracted for improvements)
  - a. Name and address: NOTAMI HOSPITALS OF FL INC, TAX DEPT, PO BOX 1504, NASHVILLE, TN 37202
  - b. Interest in property: Fee Simple
  - c. Name and address of fee simple titleholder (if other than owner):
4. Contractor Information
  - a. Name and address: Thomas Sign & Awning Co., Inc 4590 118th Ave N, Clearwater FL 33762
  - b. Phone number: 727-573-7757 Fax No. (Opt.)
5. Surety Information
  - a. Name and address: N/A
  - b. Amount of bond \$
  - c. Phone number: Fax No. (Opt.)
6. Lender
  - a. Name and address: N/A
  - b. Phone number:
7. Persons within the State of Florida designated by Owner upon who notices or other documents may be served as provided by Section 713.13(l)(a)7., Florida Statutes:
  - a. Name and address: N/A
  - b. Phone number:
8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:
  - a. Name and address: N/A
  - b. Phone number:

Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified)

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have - read the foregoing and that the facts in it are true to the best of my knowledge and belief.

J Adams  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager  
Signatory's Title/Officer: Chief Executive Officer

State of Florida  
County of Columbia

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ on line notarization, this 7 day of June, 2022, by Jill Adams.

Personally Known ☒ OR ☐ Produced Identification

Type of Identification Produced

Charlotte R. Devaney  
Signature of Notary  
Public - State of Florida

Print, Type, or Stamp  
Commissioned Name of Notary Public

