

NOTICE OF COMMENCEMENT

(PREPARE IN DUPLICATE)

Permit No. _____ Tax Folio No. 00-00-00-12370-000 (40922)
State of FL County of Columbia

To whom it may concern:

The undersigned hereby informs you that improvements will be made to certain real property, and in accordance with Section 713 of the Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT.

Legal description of property being improved: W.D.W. Beg at A PT 184 FT W 3 412.6 FT S of NE COR of Block K, Run S 321.5 FT to N line of Park Ave, Run Nwly Along N R/W line 310.89 FT, N 505 FT, E 178 FT, S 278 FT, E 120 FT to POB Being Part of Blocks K & M OEB 636-548 770-1173, 774-2347, 795-137
Address of property being improved: _____

540 SW St. Johns St. Lake City, FL 32025

General description of improvements: Roof Replacement

Owner Raymond H & Susan B Lewis

Address 540 SW St. Johns St. Lake City, FL 32025

Owner's interest in site of the improvement _____

Fee Simple Titleholder (if other than owner) _____

Name _____

Address _____

Contractor Honest Abe Roofing

Address 8936 Western Way Ste 10 Jacksonville, FL 32256

Phone No. 904-341-7663 Fax No. _____

Surety (if any) _____

Address _____ Amount of bond \$ _____

Phone No. _____ Fax No. _____

Name and address of any person making a loan for the construction of the improvements.

Name _____

Address _____

Phone No. _____ Fax No. _____

Name of person within the State of Florida, other than himself, designated by owner upon whom notices or other documents may be served:

Name _____

Address _____

Phone No. _____ Fax No. _____

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.06 (2) (b), Florida Statutes. (Fill in at Owner's option):

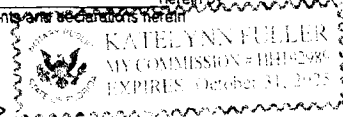
Name _____

Address _____

Phone No. _____ Fax No. _____

Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): _____

THIS SPACE FOR RECORDER'S USE ONLY

OWNER
Signed: Susan Lewis DATE 11/16/22
Before me this 16 day of Nov 2022 in the
County of Duval, State of Florida, has personally appeared
Susan Lewis here in by
himself herself and affirms that all statements and declarations herein
are true and accurate

Notary Public at Large, State of _____ County of _____
My commission expires: _____
Personally Known _____ or
Produced Identification _____