

Prepared By - Return To:

Justin Manley
445 W State Rd 430 STE 1039 Attenuate Springs, FL 32714

PERMIT NUMBER: _____ **NOTICE OF COMMENCEMENT**

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 a. Tax Parcel No. Required: 18-35-16-02172-004 b. Full Legal Description Required:

Comm at NE COR OF SE 1/4 OF SE 1/4, RUN W 888.85 FT FOR POBS 575.08 FT, W 253.79 FT, N 515.08 FT, E 253.79 FT TO POB * COMM SE COR OF SEC. W 1351.22 FT SW COR OF SE 1/4 OF SE 1/4, N 704.89 FT FOR POB, CONT N 031.53 FT TO NW COR SE 1/4 OF SE 1/4, E 246.89 FT S 615.08 FT E 253.79 FT N 515.08 FT, E 246.89 FT S 757.01 FT SW 368.10 FT, N 302.23

c. Physical Address, Required if available 199 NW Jean Ct Lake City, FL 34055

2. GENERAL DESCRIPTION OF IMPROVEMENT: Shower to shower

3. OWNER / LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a. Name and address: Daniel and Emeline Mirabal
199 NW Jean Ct. Lake City, FL 34055

b. Interest in property: _____

c. Name and address of fee simple titleholder (If other than owner): _____

4. CONTRACTOR'S: a. Name: Joshua Denbier w/ Re-Bath

b. Address: 445 W State Rd 430 STE 1039 Attenuate Springs, FL 32714 c. Phone: 904-209-9679

5. SURETY (if applicable, a copy of the payment bond is attached): a. Name _____

b. Address: _____

c. Phone number: _____ d. Amount of bond: \$ _____

6. LENDER'S NAME: a. _____

b. Lender's Address: _____ c. Phone: _____

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)a/7., Florida Statutes

a. Name and address: _____

b. Phone numbers of designated persons: _____

8. a. In addition to himself or herself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

9. b. Phone number of person or entity designated by owner: _____

Expiration date of notice of commencement: _____, 20____.

(The Expiration date will be 1 year from the date of the Recording unless otherwise 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.

[Signature]
(Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager)

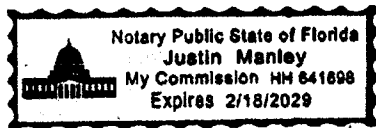
Daniel Mirabal
(Print Name and Provide Signatory's Title/Office)

State of Florida, County of Columbia

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this

April day of 2026 by Daniel Mirabal
(name of acknowledged)

Personally Known or Produced Identification Type of Identification Produced Military ID



[Signature]
(Signature of Notary Public)
(Print, Type, or Stamp Commissioned Name of Notary Public)