Inst. Number: 202112019358 Book: 1448 Page: 390 Page 1 of 1 Date: 9/24/2021 Time: 1:57 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

NOTICE OF COMMENCEMENT	Clerk's Office Starmp
Tax Parcel Identification Number:	
03-45-17-07570-116 (28177)	
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is prov	ints will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
a) Street (job) Address: 144 SE WILDERNESS DR, LA	ZANNE 9/D UNIT 5. ORB 571-539, 573-097, 747-2148 798-2209, 837-1798, 837-1800, WD 1052 2076. KE CITY FL 32025
2. General description of improvements: REMOVE AND F	REPLACE 12 WINDOWS, SIZE FOR SIZE
3. Owner Information or Lessee information if the Lessee a) Name and address: POPE ALLEN & REVERLY POPE BE	VERLY 144 SE WILDFRNESS DR, LAKE CITY FL 32025
<ul> <li>b) Name and address of fee simple titleholder</li> <li>c) Interest in property owner</li> </ul>	(If other than owner) na
Contractor Information     Name and address: GEORGE INEACY 1720 NW	
b) Telephone No.: 3524030371	THAVI FINO OCALATE (STATE)
5. Surety Information (if applicable, a copy of the payme a) Name and address: NA	
b) Amount of Bond: c) Telephone No.:	
6. Lender	
b) Phone No.	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
h) Telephone No.:	
Section 713.13(I)(b), Florida Statutes: a) Name: b) Telephone No.:	
9. Expiration date of Notice of Commencement (the expiration date will be 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 I, 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	
STATE OF FLORIDA	71/2
COUNTY OF COLUMBIA 10 Signature of Own	ner or Lessee, of Owner's or Lessee's Authorized Office/Director/Partner/Manager
Į.	Sciency Tope  Finted Name and Signatory's Title/Office
·	x —
The foregoing instrument was acknowledged before me,	by means of physical presence or online notarization, a Florida Notary,
this day of September, 200	(Name of Person) (Type of Authority)
for West-Shove Home (name of party on behalf of whom instrument was e	who is personally known OR produced identification Type ID
Notary Signature Klassif Classification of the Control of the Cont	KELSEY LOUISE CLARK (Nots y Stand) COMMISSION # GG 271780  EXPIRES: October 28, 2022  Bonded Thru Notary Public Underwriters