Inst. Number: 202312021611 Book: 1502 Page: 2740 Page 1 of 1 Date: 11/15/2023 Time: 3:46 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 Stamp
Tax Parcel Identification Number:	
11-4S-16-02905-206	
of the Fiorida Statutes, the following information is pro-	
a) Street (lob) Address: 253 SW Huntington	UNTINGTON AT WOODCREST S/D. 819-2235, 844-2026, WD 1052-897, WD 1323-2337 o Glen, Lake City, FL 32024
2. General description of improvements: Reroof	
Owner Information or Lessee Information if the Lesse Name and address: Patricia R Hale Ja	ee contracted for the Improvements: Imie Prinz 253 SW Huntington Glen, Lake City, FL 32024 If other than owner)
c) Interest in property Owners	
4. Contractor Information a) Name and address: Roofing Done Right	3485 Vinyard Cir, Deltona, FL 32738 mmichael@rdright.com
b) Telephone No.: 407-833-6201 5. Surety Information (if applicable, a copy of the paym	
	ent bond is studened).
b) Amount of Bond:	
c) Telephone No.:	
6. Lender	
b) Phone No.	
713.13(1)(a)7 Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
Section 713.13(I)(b), Florida Statutes:	the following person to receive a copy of the Lienor's Notice as provided in OF
	
 Expiration date of Notice of Commencement (the exits specified): 	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF SPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, PUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE INOTICE OF COMMENCEMENT.
STATE OF FLORIDA	The Kely
COUNTY OF COLUMBIA 10//	wher or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
<u> </u>	atricia Hale
Pe	rinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, a Florida Notary, this E S 5 tay of E November 20 23 by:
•	
(Name of Person) (Type of Aur	thority) for (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	
Notary Signature Viluphage	Notary Stamp or Seal: Notary Stamp or Seal: Notary Stamp or Seal: Notary Public, State of Florid Commission No. HH 448835 My Comm. Exp. Sept. 28, 202