NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	10-20442204524 Date 24/2044 Time 4 17 DM
M-45-17-08300-053	DC P DeWitt Cason Columbia County Page 1 of 1 8 1269 P 401
THE UNDERSIGNED hereby gives notice that improvement Florida Statutes, the following information is provided in ti	is will be made to certain real property, and in accordance with Section 713.13 of the his NOTICE OF COMMENCEMENT.
1. Description of property (legal description):	43 Woodhaven SID unit 2
a) Street (Job) Address: 18 5E C 2. General description of improvements: 18 7E 100 F	43 woodhaven SD unit 2 uster way lake city 12 32055
at service and an improvements	"THE GOT"
3. Owner Information a) Name and address: 6 HOVY Roll	16 Juner 181 SE Custer like Lake City BOUS
b) Name and address of fee simple titleholder (ii	16.1 mer 181 SE Custer libray lake City B2005
o) Interest in property 4 Contractor Information	
a) Name and address: Don Kood	Construction 2030 SE Baya Dr 7101 72 Fax No. (Opt.) 3820-758-7272
5 Surety Information	73 Fax No. (Opt) 5 8C0 758 1747
a) Name and address:	
c) Telephone No.:	Fax No. (Opt.)
G. Lender a) Name and address:	
b) Phone No.	
	by owner upon whom notices or other documents may be served:
b) Telephone No.:	Fax No. (Opt.)
713 13(I)(b), Fiorida Statutes: a) Name and address'	erson to receive a copy of the Lienor's Notice as provided in Section Fax No (Opt.)
9. Expiration date of Notice of Commencement (the expira	tion date is one year from the date of recording unless a different date
is specified):	
IMPROPER PAYMENTS UNDER CHAPTER 718, PART I, SECT IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMPINSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONTYOUR NOTICE OF COMMENCEMENT.	THE RAFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED FROM 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR MENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST SULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
STATE OF FLORIDA	Slennt Gilmer
COUNTY OF COLUMBIA 10.	Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
	Glenn D Gilmer
	Printed Name
The foregoing instrument was acknowledged before me , a Flor	ida Notary, this 31 day of January 2014, by.
Glenn Gilmer as	(type of authority, e.g. officer, trustee, attorney
fact) for	(name of party on bohalf of whom instrument was executed).
Personally KnownOR Produced IdentificationType	3 BEVERLY REED
Notary Signature Severly Kee	Notary Stamp or Seal:
	ites. Under penalties of perjury, I declare that I have read the foregoing and that
the facts stated in it are true to the best of my knowl	eage and pelier.
	Jehn J. Juline
	Signature of Natural Person Signing (in line #10 above.)