Inst: 202412020101 Date: 09/17/2024 Time: 11:31AM Page 1 of 2 B: 1523 P: 1922, James M Swisher Jr, Clerk of Court Tax Parcel Identification Number: Columbia, County, By: VC Deputy Clerk 00-00-00-00714-000 THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT. 1. Description of property (legal description): a) Street (job) Address: 913 5 a) Street (job) Address: 913 SW SANTA FE DR FT WHITE, FL 2. General description of improvements: REPLACE DECK, RENOVATE KITCHEN AND 32038 3. Owner Information or Lessee Information if the Lessee contracted for the Improvements: a) Name and address: BRUCKLOCK PARTINERS LLC 171 MAIN ST b) Name and address of fee simple titleholder (if other than owner) c) Interest in property_ 4. Contractor Information a) Name and address: JEFF LONGANECKER 7615 SW 8TH AVE GAINESVILLE, FL. 32C07 b) Telephone No.: 352-226-0703 5. Surety Information (if applicable, a copy of the payment bond is attached): a) Name and address: __ b) Amount of Bond: c) Telephone No.: 6. Lender a) Name and address: b) Phone No. _ 7. Person 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) Telephone No.: '8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in 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 COUNTY OF COLUMBIA Signature of Owner or Lesse Owner's or Lessee's Authorized Office/Director/Partner/Manager The foregoing instrument was acknowledged before me, by means of _____physical presence or Jonline notarization, a Florida Notary, (Name of Person) (Type of Authority) who is personally known OR produced identification

Clark's Office Stamp

NOTICE OF COMMENCEMENT

(name of party on behalf of whom instrument was executed)

Notary Signature _

(Notary Stamp or Seal)

SEE ATTACHED

Updated 12/2023

Type ID

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

State of California County of Santa Clara))
On <u>08/31/2024</u> before me, <u>†</u>	forer provinc Landra Rarot (Notary Pull Here Insert Name and Title of the Officer
	omes Bryckner -
	Name(\$) of Signer(\$)
subscribed to the within instrument and ac	actory evidence to be the person(s) whose name(s) is/gre cknowledged to me that he/s/le/th/ey executed the same in at by his/hg/r/th/eir signature(s) on the instrument the person(s), n(s) acted, executed the instrument.
Honar Pravinchandra Barot	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
Comm. #2424604 Notary Public - California Santa Clara County My Comm. Expires Oct. 31, 2026	WITNESS my hand and official seal.
	Heavot
*	Signature Signature of Notary Public
	Signature of Notary Public OPTIONAL ogenation can deter alteration of the document or
Though-this-section-is-optional, completing fraudulent reattachment Description of Attached Document	Signature of Notary Public — OPTIONAL — — — — — — — — — — — — — — — — — — —
Though-this-section-is-optional, completing fraudulent reattachment	Signature of Notary Public — OPTIONAL — — — — — — — — — — — — — — — — — — —
Though-this-section-is-optional, completing fraudulent reattachment Description of Attached Document Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s)	Signature of Notary Public OPTIONAL Ing this information can deter alteration of the document or of this form to an unintended document. Af Common (RMEnt) Number of Pages:
Though-this-section-is-optional, completing fraudulent reattachment Description of Attached Document Title or Type of Document: Notice Document Date: OR 131 Jan Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s)	Signature of Notary Public OPTIONAL ng this information can deter alteration of the document or of this form to an unintended document. Af Common (Rement) Number of Pages:
Though-this-section-is-optional, completing fraudulent reattachment Description of Attached Document Title or Type of Document: Notice Document Date: OR 131 / Location Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General	Signature of Notary Public OPTIONAL Ing-this information can deter alteration of the document or of this form to an unintended document. OF Common Cement Number of Pages: Signer's Name: Corporate Officer — Title(s): Partner — □ Limited □ General
Though-this-section-is-optional, completing fraudulent reattachment Description of Attached Document Title or Type of Document: Notice Document Date: OR 131 / Loc Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact	Signature of Notary Public OPTIONAL Ing-this information can deter alteration of the document or of this form to an unintended document. OF Common Cement Number of Pages: Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact
Though-this-section-is-optional, completing fraudulent reattachment Description of Attached Document Title or Type of Document: Notice Document Date: OR 131 / Location Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General	Signature of Notary Public OPTIONAL Ing-this information can deter alteration of the document or of this form to an unintended document. OF Common Cement Number of Pages: Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact