Inst. Number: 202312016998 Book: 1498 Page: 1546 Page 1 of 1 Date: 9/11/2023 Time: 10:23 AM 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:	
20	
29.55.17.09448.000	
of the Florida Statutes, the following information is pro	- 0
1. Description of property (legal description): 20	7.55.17.09448.000
a) Street (job) Address: 2000 300 2. General description of improvements: Shirt	are Re-more City FC 32024
a) Name and address: Way + Vic	re contracted for the improvements: CR 349 LGKO City
b) Name and address of fee simple titleholde c) Interest in property	r (if other than pwner)
4. Contractor Information	
a) Name and address: Paul McDaniel b) Telephone No.: 386-752-4072	2230 SE Baye Or, LAke City, FL 32025
5. Surety Information (if applicable, a copy of the paym	ent bond is attached):
a) Name and address: b) Amount of Bond:	
c) Telephone No.:	
6. Lender	
by Phone No.	
7. Person within the State of Florida designated by Owi	ner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:	
b) Telephone No.:	
8. In addition to himself of herself, Owner designates t Section 713.13(I)(b), Florida Statutes:	he following person to receive a copy of the Lienor's Notice as provided in
a) Name:	OF
b) Telephone No.:	
9. Expiration date of Notice of Commencement (the exis specified):90_Days	piration date will be $f 1$ year from the date of recording unless a different date
	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
COMMENCEMENT ARE CONSIDERED IMPRO	PER PAYMENTS UNDER CHAPTER 713, PART SECTION 713 13
FLORIDA STATUTES, AND CAN RESULT IN YO	JUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A
INSPECTION. IF YOU INTEND TO OBTAIN FIN	Orded and posted on the Job Site Before the First Ancing, consult your lender or an attorney before
COMMENCING WORK OR RECORDING YOU	R NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	r
COUNTY OF COLUMBIA 10.X	1 mat RMals
Signature of O	wner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
_	Mart Monards
Р	rinted Name and Signatory's Title/Office
	11 0 1 22
The foregoing instrument was acknowledged before m	ie, a Florida Notary, this day of
Mart hichard as Owner	for
(Name of Person) (Type of Au	
Personally Known OR Produced Identification	Туре
On Frouted Identification	1 Alve
Alabani Sharaka () Sharaka (\$*************************************
Notary Signatule	Notary Stamp or Seal: Notary Public State of Florid
(- /	My Commission His 129248