Inst. Number: 202312023969 Book: 1505 Page: 11 Page 1 of 1 Date: 12/20/2023 Time: 1:52 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
04-78-17-09889-014	
THE UNDERSIGNED hereby gives notice that improvement of the Fiorida Statutes, the following information is proven	ents will be made to certain real property, and in accordance with Section 713.13 vided in this <b>NOTICE OF COMMENCEMENT</b> .
	OF SE14 OF SIVILA RUN E 447 79 FT FOR POB CONT E 447 90 FT IN 1002 42 FT IW 412 50 FT IS 1005 11 FT TO POB (AKA PARCEL #14 TRINKNER FARK-
2. General description of improvements: Installation of Ing	ground Fiberglass Pool and screen room footers
Owner Information or Lessee Information if the Lesse     a) Name and address: Diane Darling 693 S	e contracted for the improvements: BW Barney St. High Springs, FL 32643
b) Name and address of fee simple titleholder	(if other than owner)
4. Contractor Information	
a) Name and address: Thomas Jones	800 N Thompson St. Starke, FL 32091
b) Telephone No 904-388-9777  5 Surety Information (if applicable, a copy of the payments)	ent bond is attached).
a) Name and address:	
c) Telephone No.	
6 Lender	
b) Phone No	
7. Person within the State of Florida designated by Own 713 13(1)(a)7., Florida Statutes	er upon whom notices or other documents may be served as provided by Section
b) Telephone No.	
Section 713.13(I)(b), Florida Statutes	ne 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 expires 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 RECO	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A DRDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE INOTICE OF COMMENCEMENT.
STATE OF FLORIDA	Mus Day
COUNTY OF COLUMBIA 10 Signature of Ow	vner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	DIANE DARLING  Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, by means of physical presence or online notarization, a Florida Notary,
this 26 day of October 20 2	(Name of Person) as Owner (Type of Authority)
for a	who is personally known OR produced identification
for	executed)  Type ID
1 1 - 1 - 1	
Notary Signature J. Juil 14	J. Emiliano Chappeli  Notary Stamp or Seal)  Notary Public  State of Florida  Comm# HH108650

Expires 3/24/2025