Inst. Number: 202412023435 Book: 1526 Page: 2043 Page 1 of 1 Date: 11/4/2024 Time: 3:17 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

OTICE OF COMMENCEMENT	Clerk's Office Stamp
Reparcel Identification Number:	
	ements will be made to certain real property, and in accordance with Section 713.13 provided in this NOTICE OF COMMENCEMENT.
. Description of property (legal description): 30	lightalls Rd, Lake City
. General description of improvements: TYXCE	1
(i) Name and address of fee shiple me.	essee contracted for the improvements: Rd, Lake City older (if other than owner) N/A
4. Contractor Information	Odles 505 Goldkist BLVD, Live Oak
b) Telephone No.: 206-3091-900. Sourcety Information (if applicable, a copy of the particular and the parti	DO
a) Name and address: N/A	payment bond is account by
c) Telephone No.:	
6. Lender	
b) Phone No. NA	y Owner upon whom notices or other documents may be served as provided by Section
7. Person within the State of Florida designated by 713.13(1)(a)7., Florida Statutes:	y Owner apon massacra
a) Name and address: M/X	
b) Telephone No.: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	de Netico as provided in
8. In addition to himself or herself, Owner design	nates the following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	OF
a) Name: N/A	
b) reception:	(the expiration date will be 1 year from the date of recording unless a different date
·ifinal)·	
FLORIDA STATUTES, AND CAN RESULT	S MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF MPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A SE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST IN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE IT YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	A S M. B Olita
COLUMBIA	10. 10. Owner of Owner or Lessee's Authorized Office/Director/Partner/Manager
Signatu	- The state of the
ELYSE FOWLER	9 11 Pallela Homan ner
ELYSE FOWLER NOTARY PUBLIC STATE OF FLORIDA NO. HH 489717 MY COMMISSION EXPIRES FEB. 06, 2028	Sally Billiter Homeowner Printed Name and Signatory's Title/Office
NOTARY PUBLIC STATE OF FLORIDA NO. HH 489717 MY COMMISSION EXPIRES FEB. 06, 2028	
NOTARY PUBLIC STATE OF FLORIDA NO. HH 489717	pefore me, by means of physical presence or online notarization, a Florida Notary,
NOTARY PUBLIC STATE OF FLORIDA NO. HH 489717 MY COMMISSION EXPIRES FEB. 06, 2028	pefore me, by means of physical presence or online notarization, a Florida Notary, 20 24 by: Sally Billiter as Homeowner (Name of Person) (Type of Authority) who is personally known OR produced identification

(Notary Stamp or Seal)