NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

21-45-16-03687-104

Clerk's Office Stamp

Inst: 202312016232 Date: 08/25/2023 Time: 12:11PM Page 1 of 1 B: 1497 P: 2428, James M Swisher Jr, Clerk of Court Columbia, County, By: VC Deputy Clerk

| of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT . |
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| 1. Description of property (legal description): |
| a) Street (inh) Address: Storace building |
| 2. General description of improvements: 225 SW Pinchwest Dr. Lake City FL 32024 |
| 3. Owner Information or Lessee information if the Lessee contracted for the improvements: |
| a) Name and address: 140MAS CRAG 225 SW Pinchurst Dr. Late City PL 32024 |
| b) Name and address of fee simple titleholder (if other than owner) |
| c) Interest in property <u>Owner</u> |
| a) Name and address: TROMAS CRAIC 225 SW Pinehurst Dr. Lake City, FL 32024 |
| b) Telephone No.: 357-414 2334 |
| 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:OF |
| 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. |
| |
| COUNTY OF COLUMBIA 10. Thomas Craig |
| Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager |
| HOMAS CRAIG |
| Printed Name and Signatory's Title/Office |
| Trince Name and Signatory's Title/Office |
| The foregoing instrument was acknowledged before me, a Florida Notary, this 22 day of Quest, 20_23 by: |
| - Company of the state of the s |
| Thurs craig as self for NIA |
| (Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed) |
| Personally Known OR Produced Identification / Type FUDL |
| |
| Notary Signature Notary Stamp or Seal: Notary Signature Notary Public - State of Florida Notary Stamp or Seal: Notary Public - State of Florida Commission & GG 952236 My Comm. Expires 01-28-2024 Bonded Through Notary Public Underwriters |
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