NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
28-3S-16-02372-243	
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.	
Description of property (legal description):     One will be a served on the server of the serv	
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: DONNA LEVINE AND VIRGINIA GALBRATH 4 FLETCHER DR. MARSFIELD, MA. 02050  b) Name and address of fee simple titleholder (if other than owner)	
c) Interest in property OWNERS	(It otter man owner)
Contractor Information     Name and address:  AC JOHNSON ROOFING IN	NC. DBA GULF COAST METAL ROOFING P.O. BOX 367 NEWBERRY, FL. 32669
b) Telephone No.: 352-472-4943  5. Surety Information (if applicable, a copy of the paym	ent hand is attached).
a) Name and address:	7.
b) Amount of Bond:	
6. Lender	
<ul> <li>b) Phone No</li></ul>	ner 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.	
STATE OF FLORIDA	Day Leuro
COUNTY OF COLUMBIA 10.	wher or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Notary Public State of Florida  Dawna R Warren  My Commission HH 438156	DONNA LEVINE  rinted Name and Signatory's Title/Office
Expires 8/27/2027	10 th 11
The foregoing instrument was acknowledged before me, a Florida Notary, this 9 th day of the believe by:	
(Name of Person) (Type of Au	
Personally KnownOR Produced IdentificationType _FL Drivers Cic.	
Notary Signature / 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	Mrew Notary Stamp or Seal: