Inst. Number: 202112018033 Book: 1446 Page: 1936 Page 1 of 1 Date: 9/8/2021 Time: 8:40 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:	
30-35-16-01399-001	
of the Florida Statutes, the following information is pro	
1. Description of property (legal description):	·35.16.02399.001 Aprole PD Lake City FC 32055
a) Street (job) Address: SUO NOO  2. General description of improvements:	Morche my Lake CHY FC 32055
3. Owner Information or Lessee information if the Lesse a) Name and address: <u>CALCOL HC</u> b) Name and address of fee simple titleholder c) Interest in property <u>CWYLEY</u>	se contracted for the improvements:  SUCH SULONIUM NOEGLE POLLAR CHY 37005  r (if other than owner)
Contractor Information     a) Name and address: Paul McDaniel	COOR DE DANS DA LANS CINS EL COORE
b) Telephone No.: 386-752-4072	2230 SE Baya Dr. LAke City, FL 32025
5. Surety Information (if applicable, a copy of the paym	ent bond is attached):
a) Name and address:	
c) Telephone No.:	
6. Lender	
b) Phone No.	
<ol> <li>Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes:</li> </ol>	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
	The state of the s
	he 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.:	OF
9. Expiration date of Notice of Commencement (the exist specified):90-Days	piration date will be 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 I, SECTION 713.13,
FI.ORIDA STATUTES, AND CAN RESULT IN YO	OUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A
	ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST
COMMENCING WORK OR RECORDING YOUR	ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA	
COUNTY OF COLUMBIA 10X	Multru
	wner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
V	GRAID HUM
<b>∕</b> <sub>P</sub>	rinted Name and Signatory's Title/Office
	miled indine and dignatory a fried office
The foregoing instrument was acknowledged before m	e a Florida Notary, this 7 day of Soft 20 by
Crossolal Harris	30,70
SHOULD as Owner	for
(Name of Person) (Type of Au	thority) (name of party on behalf of whom instrument was executed)
Personally KnownOR Produced Identification	Туре
( A ( X) (	**************************************
Notary Signature	Notary Stamp or Seal: Notary Public State of Florida
	Christy Gehr  Christy Gehr  My Compulsaion High 129220