Inst. Number: 202312015378 Book: 1496 Page: 2791 Page 1 of 1 Date: 8/15/2023 Time: 10:14 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:	
15-45-16-02994-010 (13663)	
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): Com a) Street (job) Address: 3730 Sw S 2. General description of improvements: PLACING	M 434.1 FT & of NW 1/4 FOR POB, RUN & 225 FT, S& 48 DEG SR 247 I ZU G METAL ON PURLINS OVER EXISTING SHINGLES
c) Interest in property Owner 3. Contractor Information	(if other than owner) 3730 SW SR ZY7 CAKE City, [-]
a) Name and address: True Force Roofing 2426 NW	68 Ct Ste B, Gainesville, FL 32653
b) Telephone No.: 352) 639-7663 5. Surety information (if applicable, a copy of the payments)	ent bond is attached):
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:	ner upon whom notices or other documents may be served as provided by Egyston
b) Telephone No.:	
Section 713.13(l)(b), Florida Statutes:	ie following person to receive a copy of the Lienor's Notice as provided $\hat{\mathbf{m}}$
a) Name.	OF
b) Telephone No.:	AND
5. 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 IMPROF FLORIDA STATUTES, AND CAN RESULT IN YOU 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 NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	Melvin R. Musato Sa ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Signature of Owi	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
P	Melvin Musante rinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me,	, by means of physical presence or online notarization, a Florida Notary,
this 14 day of August, 20 23	3 by: Melvin Musante as Owner (Name of Person) (Type of Authority)
for	who is personally known OR produced identification
theme or party on behalf of whom instrument was ex	Type 10 DC # M253-1016-81-33(-1
1/1 11 11	
Notary Signature Kelsey Haveloc	(Notary Stamp or Seal) Commission # HH 345151 Expires January 2, 2027