Inst. Number: 202312007465 Book: 1489 Page: 792 Page 1 of 1 Date: 4/28/2023 Time: 2:17 PM 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
Fax Parcel Identification Number:	
23-45.16-03099-222	
THE UNDERSIGNED hereby gives notice that improvement	ents will be made to certain real property, and in accordance with Section 713.13
of the Florida Statutes, the following information is pro-	vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description):	3.45.16.03 taga .222
2. General description of Improvements:	of al
3. Owner Information or Lessee information if the Lesse a) Name and address: 1000000 COn	e contracted for the improvements:
b) Name and address of fee simple titleholder c) Interest in property	r (ir other than owner)
4. Contractor Information	
a) Name and address: Paul McDaniel b) Telephone No.: 386-752-4072	2230 SE Baye Dr. LAke City, FL 32025
5. Surety Information (if applicable, a copy of the paym	ent bond is attached):
a) Name and address: b) Amount of Bond:	No to the second
c) Telephone No.:	
6. Lender	
b) Phone No	
 Person within the State of Florida designated by Owr 713,13(1)(a)7., Florida Statutes: 	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
8. In addition to himself or herself, Owner designates the Section 713.13(l)(b), Florida Statutes:	ne following person to receive a copy of the Lienor's Notice as provided in
	OF
b) Telephone No.:	
9. Expiration date of Notice of Commencement (the expire 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 FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC	PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA	. <i>f.[]</i>
COUNTY OF COLUMBIA 10	
Signature of Ow	/ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
·	Meda Canova
Pr	rinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, a Florida Notary, this 28 day of April 2023, by:
REDUCIAL CONONCIES Owner	
(Name of Person) (Type of Au	
Personally Known OR Produced Identification	Type
Notary Signature	Notary Stamp or Seal: Notary Public State of Florid Christy Gehr