NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst: 202112023017 Date: 11/12/2021 Time: 11:05AM
Page 1 of 1 B: 1452 P: 736, James M Swisher Jr, Clerk of Court
Columbia, County, By: VC
Denuty Clerk

	Debuty Clerk
THE UNDERSIGNED hereby gives notice that improvement 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): Sethin	n 31, Township & South, Range Ko East
a) Street (job) Address: Hunter Rd. 2. General description of improvements: Alexy	
Owner Information or Lessee Information if the Lessee a) Name and address:	e contracted for the improvements:
b) Name and address of fee simple titleholder c) Interest in property ODHON	(if other than owner)
	Abraction 1459 SW Grandview Dr. Sto *109
5. Surety Information (if applicable; a copy of the payme a) Name and address:	nt bond is attached):
b) Amount of Bond:	
6. Lender	
a) Name and address://A. b) Phone No//A	
7. Person within the State of Florida designated by Owne 713.13(1)(a)7., Florida Statutes: a) Name and address:	er upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
B. In addition to himself or herself, Owner designates the Section 713.13(I)(b), Florida Statutes:	following person to receive a copy of the Lienor's Notice as provided in
	OF
a) Name:	•
). Expiration date of Notice of Commencement (the expirits specified):	ration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROPI FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOI	BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, R PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE IOJICE OF COMMENCEMENT.
TATE OF FLORIDA OUNTY OF COLUMBIA Signature of Owner	ar or Lessee, or Owner's or yessee's Authorized Office/Director/Partner/Manager
Print	ted Name and Signatory's Title/Office
ne foregoing instrument was acknowledged before me, a Affice N	for Holly Castagna.
, , , , , , , , , , , , , , , , , , , ,	
otary Signature August 1	Type CALLEY E. DEKLE Notary Stamp or Seal: Notary Public
	Notary Stamp or Seal: Notary Public State of Florida Comm# HH192639

Expires 10/31/2025