Inst. Number: 201412007383 Book: 1274 Page: 1984 Date: 5/16/2014 Time: 9:30:58 AM Page 1 of 1 P.DeWitt Gason Clerk of Courts, Columbia County, Florida

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NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	Inst 201412007383 Date:5/16/2014 Time:9 30 AM DC P DeWitt Gason,Columbia County Page 1 of 1 B 1274 P 1984
Florida Statutes, the following information is provided in the	s will be made to certain real property, and in accordance with Section 713.13 of the his NOTICE OF COMMENCEMENT.
1. Description of property (legal description): 0 4 a) Street (job) Address: 444 SW FM 2. General description of improvements: Re2007 N	S-14-02866-115 erald st. take CHY, FL 32024
c) interest in property DWIV	on Pocock 444 SWEMERALDS J. Lake (174, FL 3202 other than owner)
5. Surety Information	Construction 22305E Paya Or70101 73 Fex No. (Opt.) 3820-755.7272
b) Amount of Bond: c) Telephone No.: 6. Lender	Fax No. (Opt.)
b) Phone No. 7. Identity of person within the State of Florida designated	by owner upon whom notices or other documents may be served.
b) Telephone No.:	Fax No. (Opt.)
713.13(I)(b), Florida Statutes:	rson to receive a copy of the Lienor's Notice as provided in Section Fax No. (Opt.)
b) Telephone No.:	Fax No. (Opt.)
Expiration date of Notice of Commencement (the expiration is specified).	ion date is one year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OW IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTI IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMM	NER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED ON 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR MENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST OULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	Signature of Owner's Authorized Office/Director/Partner/Manager
	Sharon L. Pocuck Printed Name
The foregoing instrument was acknowledged before me , a Flori	
fact) for	(type of authority, e.g. officer, trustee, attorney (name of party on behalf of whom instrument was executed).
	ALCOHOL: A CONTROL OF THE PARTY
Personally Known OR Produced Identification Type Notary Signature Clevery	Notary Stamp or Seal* Notary Stamp or Seal* Notary Stamp or Seal* Notary Stamp or Seal*
11. Verification pursuant to Section-92.525, Florida Statut the facts stated in it are true to the best of my knowled	tes. Under penalties of perjury, I declare that I have read the foregoing and that edge and belief.
	Signature of Natural Person Signing (In line #10 above.)