NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst: 202412017063 Date: 08/09/2024 Time: 1:26PM

Page 1 of 1 B: 1520 P: 2473, James M Swisher Jr, Clerk of Court

Commission # HH 385545 Expires August 8, 2027

00460-002	Columbia, County, By: AH Deputy Clerk	
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is prov	ents will be made to certain real property, a vided in this NOTICE OF COMMENCEMENT.	nd in accordance with Section 713.13
1. Description of property (legal description): 14 - 56	5-15-00460-002 /11.63 A	CYES.
a) Street (job) Address: 4120 SW Carp 2. General description of improvements: Ye roof	entered Lakelity fr 32024	
Owner Information or Lessee information if the Lessee		
a) Name and address: JOS CON NOW b) Name and address of fee simple titleholder c) Interest in property 4. Contractor Information a) Name and address: Hary David (b) Telephone No.: 380 305 891	90 (If other than owner) 4120 SW Ca Anderson 2875 Sw Pine 2	<u> </u>
5. Surety Information (if applicable, a copy of the payme a) Name and address:		
b) Amount of Bond: NA		
c) Telephone No.:		
a) Name and address: NA		
b) Phone No. N A 7. Person within the State of Florida designated by Owne	er upon whom notices or other documents	may be served as provided by Section
713.13(1)(a)7., Florida Statutes:		
a) Name and address: NA b) Telephone No.: NA		
oy receptions non 14 (A		
8. In addition to himself or herself, Owner designates the	e following person to receive a copy of the	Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	OF	
a) Name: NA A b) Telephone No.: NA	Or	
Expiration date of Notice of Commencement (the exp is specified):		
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROPELORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOINSPECTION. IF YOU INTEND TO OBTAIN FINATION COMMENCING WORK OR RECORDING YOUR	PER PAYMENTS UNDER CHAPTER 7: JR PAYING TWICE FOR IMPROVEM PRDED AND POSTED ON THE JOB SI INCING, CONSULT YOUR LENDER O	13, PART I, SECTION 713.13, ENTS TO YOUR PROPERTY; A TE BEFORE THE FIRST
STATE OF FLORIDA	1.704	
COUNTY OF COLUMBIA 10. A	ner of Lessee, or Owner's or Lessee's Autho	rized Office/Director/Partner/Manager
P	On Seph V Wa D Printed 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 25th day of July 20 21	by: Joseph Vargo (Name of Person)	
	(Name of Person)	as(Type of Authority)
for(name of party on behalf of whom instrument was ex-	who is personally known	OR produced identification
(traine or party of benan or whom instrument was ex	Type ID_	and the first state of the first of the firs
V1		and the same of th
Notary Signature All Mandal Mall	(Notary Stamp or Seal)	LAMANDA MOTE Commission # HH 385545