

## **Electronically Certified Official Record**

## **DOCUMENT INFORMATION**

Agency Name: Columbia County Clerk of the Circuit Court and

Comptroller

Clerk of the Circuit Court: The Honorable James M. Swisher, Jr.

**Date Issued:** 9/6/2024 12:45:13 PM

Unique Reference Number: BAA-DAAB-BCACD-CACEBCABJCDE-DIFDJG-E

Instrument Number: 202412019234

Requesting Party Code: 3001

Requesting Party

7E33C6DD-8DAC-D9F9-089B-32E3311E1D53-SF

## **CERTIFICATION**

Pursuant to Sections 90.955(1) and 90.902(1), Florida Statutes, and Federal Rules of Evidence 901(a), 901(b)(7), and 902(1), the attached document is electronically certified by The Honorable James M. Swisher, Jr., Columbia County Clerk of the Circuit Court and Comptroller, to be a true and correct copy of an official record or document authorized by law to be recorded or filed and actually recorded or filed in the office of the Columbia County Clerk of the Circuit Court and Comptroller. The document may have redactions as required by law.

## **HOW TO VERIFY THIS DOCUMENT**

This document contains a Unique Reference Number for identification purposes and a tamper-evident seal to indicate if the document has been tampered with. To view the tamper-evident seal and verify the certifier's digital signature, open this document with Adobe Reader software. You can also verify this document by scanning the QR code or visiting <a href="https://verify.clerkecertify.com/verifyImage">https://verify.clerkecertify.com/verifyImage</a>.

\*\*The web address shown above contains an embedded link to the verification page for this particular document.



Inst. Number: 202412019234 Book: 1522 Page: 2485 Page 1 of 1 Date: 9/5/2024 Time: 1:09 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

DocuSign Envelope ID: 49C97AC3-60C6-4D1F-BD2D-F976682BB07F

NOTICE OF COMMENCEMENT	Clerk's Office Stamp	
Tax Parcel Identification Number:		
22-4S-16-03090-307		
22-43-10-03090-307		
THE UNDERSIGNED hereby gives notice that improvem of the Florida Statutes, the following information is pro	vided in this NOTICE OF COMMENCEME	ENT.
1. Description of property (legal description): LOT7 BLAIN a) Street (job) Address: 160 SW MASON LN	IE ESTATES PHASE 3. WD 1259-528, DC 1341-1009, PB 1	341-1873, PR 1341-1877, CT 1385-2621, WD 1394-962,
2. General description of improvements: RE-ROOF	, LAKE OIT	
3. Owner Information or Lessee information if the Lesse a) Name and address: HARTMAN JAMES 16 b) Name and address of fee simple titleholder c) Interest in property	<u>50 SOUTHWEST MASON LN LAKE C</u>	ITY, FL 32024
Contractor Information     a) Name and address: RICHARD DORMAN/RO	OFING PROS USA II	6650 SOUTH PINE AVE OCALA, FL 34480
b) Telephone No.: 352-581-7333		
5. Surety Information (if applicable, a copy of the payment bond is attached):  a) Name and address:  b) Amount of Bond:		
c) Telephone No.:		
6. Lender		
a) Name and address: b) Phone No.		
7. Person within the State of Florida designated by Owr 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:	ner upon whom notices or other docum	ents may be served as provided by Section
o, relephone (18)		
8. In addition to himself or herself, Owner designates the Section 713.13(I)(b), Florida Statutes:  a) Name:	ne following person to receive a copy of OF	·
b) Telephone No.:		
Expiration date of Notice of Commencement (the expire specified):	piration date will be 1 year from the da	te of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAI COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC INSPECTION. IF YOU INTEND TO OBTAIN FIN. COMMENCING WORK OR RECORDING YOUR STATE OF FLORIDA	PER PAYMENTS UNDER CHAPTE UR PAYING TWICE FOR IMPROV ORDED AND POSTED ON THE JO ANCING, CONSULT YOUR LENDE	R 713, PART I, SECTION 713.13, EMENTS TO YOUR PROPERTY; A B SITE BEFORE THE FIRST
COUNTY OF COLUMBIA 100 ENTER 10.	300000000000000000000000000000000000000	
COUNTY OF COLUMBIA 10.L CHRISTOPHER M. LORENTZ Signature of OV NOTARY PUBLIC STATE OF FLORIDA	vner or Lessee, or Owner's or Lessee's A	uthorized Office/Director/Partner/Manager
	James Hartman	Homeowner
My Commission Expires 10/25/2027 - ONLINE NOTARY	Printed Name and Signatory's Title/Offic	ce
The foregoing instrument was acknowledged before me	e, by means of physical presence o	r X online notarization, a Florida Notary,
this 5 day of September , 2024		as
for	(Name of Person) who is personally known	(Type of Authority)  OR produced identification X
(name of party on behalf of whom instrument was	executed)	
DocuSigned by:	Туре	ID_FL DL
Notary Signature Christopher Corentz	(Notary Stamp or Seal)	Updated 12/202
AC40892189DD42C		Sparted 12/202

