NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
18-4S-17-08467-004	
of the Florida Statutes, the following information is pre-	nents will be made to certain real property, and in accordance with Section 713.13 by by ided in this NOTICE OF COMMENCEMENT.  CENTURY ESTATES, 567-747, WD 1373-1813
Description of property (legal description): LOT 3     a) Street (job) Address: 215 BRODERIC     General description of improvements: REPLACE V	K DR LAKE CITY EL 32025
Owner Information or Lessee information if the Less     a) Name and address: BETSY TOUCHT     b) Name and address of fee simple titlehold	ee contracted for the improvements: ON 215 SW BRODERICK DR LAKE CITY FL 32025 er (if other than owner) NA
4. Contractor Information BRIAN WALL-WIND	OW WORLD OF OCALA 35 SW 57TH AVE OCALA FL 34474
h) Talanhona No · 352-090-2244	
5. Surety Information (if applicable, a copy of the pays  a) Name and address: NA	nent bond is attached):
c) Telephone No.:	
6. Lender NA Name and address:	
b) Phone No	vner 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.:	
	OF
b) Telephone No.:	
is specified): NA	expiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPR FLORIDA STATUTES, AND CAN RESULT IN Y NOTICE OF COMMENCEMENT MUST BE RI INSPECTION. IF YOU INTEND TO OBTAIN F COMMENCING WORK OR RECORDING YO	ADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, OUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE UR NOTICE OF COMMENCEMENT.
COUNTY OF COLUMBIA 10. Signature of	Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before	me, a Florida Notary, this day of DEC 20 by:
BETSY TOUCHTON as OWNER (Name of Person) (Type of	Authority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	TOWN TO SELECT THE SEL
Notary Signature fully f	Yes Notary States

