Inst. Number: 202412008709 Book: 1513 Page: 914 Page 1 of 1 Date: 4/29/2024 Time: 12:00 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

| Permit No.: | Tax Folio No.: 36-4S-16-03370-000 |
|--|---|
| | NOTICE OF COMMENCEMENT |
| STATE OFFL | |
| COUNTY OF Columbia | |
| THE UNDERSIGNED hereby gives notice that imp Statutes, the following information is provided in the | rovement will be made to certain real property, and in accordance with Chapter 713, Florida is Notice of Commencement. |
| I. Description of property: (legal description of pro | pierty, and street address if available) OCK F SOUTHWOOD ACRES S/D UNIT 2. WD 1037-656, WD 1333-1107, WI |
| 242 SW Sunnydale Gln 1360-2476, | FJ 1413-247, VVD 1415-1090. |
| 2. General description of improvement: | in dows and Doors |
| a. Name and address: <u>Carissa Adams</u> 24 | esses contracted for the improvement: 42 SW Sunnydale Gln Lake City, FL 32024 different from Owner listed above): same |
| • | |
| 4. a. Contractor: (name and address) The Home b. Contractor's Phone number: 407-378-66 | Depot 2455 Paces Ferry Rd. C11 Atlanta, GA 33039 82 |
| Surety (if applicable, a copy of the payment bouch a. Name and address: b. Phonenumber: c. Amount of bond \$ | l is attached): |
| 6. a. Lender: (name and address) | |
| b. Lender's Priorie number: | |
| 113.13(1)(x)1., Florida Statutes: | owner upon whom notices or other documents may be served as provided by Section |
| | |
| | tesofto receive a copy of the Lienor's Notice |
| | opiration date is 1 year from the date of recording unless a different date is specified) |
| IN YOUR PAYING TWICE FOR IMPROVEMENT POSTED ON THE JOB SITE BEFORE THE FIRST | E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT DER CHAPTER 713, PART I, SECTION 713.13, PLORIDA STATUTES, AND CAN RESULT S TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND INSPECTION, IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ICING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. |
| Carissa Adams -Owner | • |
| (Signatory's Title/Office) | |
| The foregoing instrument was acknowledged beforem Carissa Adams (name of | person) as owner Apr 24 (year) by |
| atterney in fact) for self | have of purtyon behalf of whom instrument was executed). |
| MIKE SHAHEEN Notary Public - State of Florida Commission # HH. 491367 My Comm. Expires Feb 11, 2028 | Signature of Notary Public - State of Florida Print, Type, or Stamp Commissioned Name of Notary Public Commission Number Personally Knownor Produced IdentificationX Type of Identification Produced DL |