Permit Number:	_
Folio/Parcel ID #:	- -
Prepared by:	
Return to:	
NOTICE OF COMMI	ENCEMENT
State of Florida, County of Jackson	
The undersigned hereby gives notice that improvement will be	
with Chapter 713, Florida Statutes, the following information is	
 Description of property (legal description of the property, a 14170 US-441 Lake City, FL 32024 	
2. General description of improvement	
Management	
Owner information or Lessee information if the Lessee control of the Lessee control	
Name	
AddressInterest in Property	
Name and address of fee simple titleholder (if different from	om Owner listed above)
Name	
Address	
4. Contractor	
Name Texas Republic Signs	Telephone Number_ <u>832-727-5415</u>
Address 2211 Pech Rd Houston, TX 77055 5. Surety (if applicable, a copy of the payment bond is attached	11
Name	Telephone Number
Address	Amount of Bond \$
6. Lender	
Name	Telephone Number
Address	I was the adams and a sum of the
7. Persons within the State of Florida designated by Owner served as provided by §713.13(1)(a)7, Florida Statutes.	upon whom notices or other documents may be
Name	Telephone Number
Address	
8. In addition to himself or herself, Owner designates the fo	llowing to receive a copy of the Lienor's Notice
as provided in §713.13(1)(b), Florida Statutes.	
Name	Telephone Number
Address9. Expiration date of notice of commencement (the expiration	n date will be 1 year from the date of recording
unless a different date is specified)	ridate will be if year from the date of recording
	MANY AND THE COLOR OF THE COLOR
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER T	HE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE
CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SEC YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NO	TICE OF COMMENCEMENT MUST BE RECORDED AND
POSTED ON THE JOB SITE BEFORE THE FIRST INSRECTION. IF YOU INT	END TO OBTAIN FINANCING, CONSULT WITH YOUR
LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORD	ING YOUR NOTICE OF COMMENCEMENT.
Signalure of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager	Signatory's Title Office
signal are drowner of Lessee, or Owner's or Lessee a Authorized Officer/Director/Partner/Manager	Signatory's Triplication
State of Florida, County of Jackson	
The foregoing instrument was acknowledged before me by mea notarization, this 24 day of Fcornary , 20 23 b	
notarization, this 24 day of Horning, 2023 b	у
WINDLAND WILLIAM TIMMONS	
hotarization, this 24 day of Homany, 2023 b	
17, 20 / 12	- mmous
(Alabasi Saal)	Notary Public Signature
(Notary Seal)	ASE Notary I unite Signature
Personally Knownor Produced la vication	<u> </u>
Type of Identification	THE STATE OF THE S
MIN BLIC, STATE	Notary Public Signature
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