NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

35-4\$-16-03282-007

Clerk's Office Stamp

Inst: 202112013436 Date: 07/08/2021 Time: 8:33AM

Page 1 of 1 B: 1441 P: 1973, James M Swisher Jr, Clerk of Court Columbia, County, By: VC Deputy Clerk

Conmission # GG 132685

Expires August 30, 2021 Bended Thru Trey Fain Insurance 800-385-7019

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description):
a) Street (job) Address: 1638 SW King St Lake City, FL 32024
2. General description of improvements: additional fiving space
3. Owner information or Lessee information if the Lessee contracted for the improvements: a) Nizme and address: Nemy and Julia Keene 1638 SW King at Lake City FL 32024 BCHy Koon A provided in the Lessee information if the Lessee contracted for the improvements: a) Nizme and address: Nemy and Julia Keene 1638 SW King at Lake City FL 32024 BCHy Koon A provided in the Lessee information if the Lessee contracted for the improvements: a) Nizme and address: Nemy and Julia Keene 1638 SW King at Lake City FL 32024 BCHy Koon A provided in the Lessee information if the Lessee contracted for the improvements:
b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property 4. Contractor Information
a) Name and address: Sara Gresham 398 SE Kestrel Rd Branford FL 32008
b) Telephone No.: 388-365-8685
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address:
a) Name and address: b) Amount of Bond:
c) Telephone No.:
6. Lender
a) Name and address:
b) Phone No
 Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
a) Name and address:
b) Telephone No.:
a) Name:OF
9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified):
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA 10. D. Thy & Koon
COUNTY OF COLUMBIA 10. AM X 1000V
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage
Signature of Owner of Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage Bett J Kooy Printed Name and Signatory's Title/Office
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage Beth T Koon Printed Name and Signatory's Title/Office The foregoing instrument was acknowledged before me, a Florida Notary, this 20 day of June 2021 by
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage
Signature of Owher or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage Beth T Koon Printed Name and Signatory's Title/Office The foregoing instrument was acknowledged before me, a Florida Notary, this 20 day of June 2021 by Signature of Owher or Lessee's Authorized Office/Director/Partner/Manage Beth T Koon Printed Name and Signatory's Title/Office The foregoing instrument was acknowledged before me, a Florida Notary, this 20 day of June 2021 by [Name of Person] Type of Authority] Iname of party on behalf of whom Instrument was executed
Signature of Owner of Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage Beth T Kooy Printed Name and Signatory's Title/Office The foregoing instrument was acknowledged before me, a Florida Notary, this 20 day of June 2021 by