Inst. Number: 202412003890 Book: 1508 Page: 2693 Page 1 of 1 Date: 2/26/2024 Time: 1:00 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
25-3S-16-02277-002	
of the Florida Statutes, the following information is pro	
1. Description of property (legal description): 25-	3S-16-02277-002
a) Street (job) Address: 238 NVV BASC 2. General description of improvements: Re-Roof	OM NORRIS DR, LAKE CITY, FL 32055
Owner Information or Lessee information if the Lesse     a) Name and address: Casa Isabel LLC	ee contracted for the improvements: 861 NW BLACKBERRY CIR, LAKE CITY, FL 32055
<ul> <li>b) Name and address of fee simple titleholder</li> <li>c) Interest in property OWNEr</li> </ul>	r (if other than owner)
4. Coulombian	- O I LOSE NIN O I Cit. 445 200 I-II- Cit. CI 22055
	n Company, Inc.   295 NW Commons Loop Ste. 115-262, Lake City, FL 32055
b) Telephone No.: <u>(386) 754-7367</u> 5. Surety Information (if applicable, a copy of the paym	ent hand is attached):
	circ point is accountage.
b) Amount of Bond:	
c) Telephone No.:	
b) Phone No	
713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
a) Name and address:	
b) Telephone No.:	
8. In addition to himself or herself, Owner designates the	he following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	
	OF
b) Telephone No.:	
•	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF IPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, PUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE R NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	Yolanda awela
Signature of Ou	voer or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
\	Volan da Aro Cho / Authorized Member
<del>k</del>	rinted Name and Signatory's Title/Office
F	inited (Maine and Signatory's Tracy Office
The foregoing instrument was acknowledged before me	e, a Florida Notary, this 23rd day of February 20 24, by:
Yolanda Arocho as Authorize	ed Member for Casa Isabel LLC
(Name of Person) (Type of Au	
Personally Known OR Produced Identification	Type Driver's License
Notary Signature Manay & Mi	Nancy C Miller Notary Stamp or Seal:  Notary Stamp or Seal:  Nancy C Miller My Commission HH 32106: Expires 10/11/2026