Inst. Number: 202512005894 Book: 1535 Page: 2704 Page 1 of 1 Date: 3/20/2025 Time: 8:57 AM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
16-55-17-09267-005	
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): 6 - 5 a) Street (job) Address: 234 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	hurchwill Way LAVE (ity PL 3202)
b) Name and address of fee simple titleholder c) Interest in property Ownel 4. Contractor Information a) Name and address: Olenant Ro b) Telephone No.: 904) 423-0819 5. Surety Information (if applicable, a copy of the payma) Name and address:	ofing & Constitution 4590 BR 218 Middleburg Fr 32068
c) Telephone No.:	
6. Lender a) Name and address:	
 b) Phone No	ner upon whom notices or other documents may be served as provided by Section
	ne 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.:	
Expiration date of Notice of Commencement (the exis specified):	plration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAI COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE RECO INSPECTION. IF YOU INTEND TO OBTAIN FIN. COMMENCING WORK OR RECORDING YOUR STATE OF FLORIDA COUNTY OF COLUMBIA Brandon Korey Notary Public State of Florida Comm# HH114715	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR 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
	e, by means of physical presence or online notarization, a Florida Notary,
this 12 day of Mov(4 20 2	S by: Sheman as O (Type of Authority)
for 6 cm	who is personally known OR produced identification
(name of party on behalf of whom instrument was executed) Type ID FLD2 5500 - 436-62-16-1-0	
71	
Notary Signature	(Notary Stamp or Seal)