Inst. Number: 202212009184 Book: 1466 Page: 1024 Page 1 of 1 Date: 5/10/2022 Time: 2:51 PM 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: | |
| 22.45.16.03090.305 | |
| THE UNDERSIGNED hereby gives notice that improvem | ents 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): 22.48.110.03690.305 a) Street (Job) Address: 232.510 Mason Lo Lake CHY FL 37024 | |
| a) Street (lob) Address: 232 510 W 2. General description of Improvements: W440 | Dason La Lake CHY FL 37024 |
| • | |
| 3. Owner Information or Lessee information if the Lessee contracted for the improvements: a) Name and address: KODELT MCCOOL 2323W MOSON LO LAKE CITY FL | |
| b) Name and address of fee simple titleholds | ruff other than owner) |
| c) Interest in property QUONES 4. Contractor Information | |
| a) Name and address: Paul McDaniel | 2230 SE Baya Or. LAke City, FL 32025 |
| b) Telephone No.: 386-782-4072 5. Surety Information (if applicable, a copy of the paym | ent bond is attached): |
| a) Name and address: | <u>'</u> |
| b) Amount of Bond: c) Telephone No.: | |
| | |
| a) Name and address:b) Phone No | |
| Person within the State of Florida designated by Ow | ner 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.: | 3131 |
| 8 In addition to himself or herself. Owner designator t | the following person to receive a copy of the Lienor's Notice as provided in |
| Section 713.13(1)(b), Florida Statutes: | The following person to receive a copy of the Lienor's Notice as provided in |
| a) Name: | OF |
| b) Telephone No.: | 1 19 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| 9. Expiration date of Notice of Commencement (the ex | apiration date will be 1 year from the date of recording unless a different date |
| is specified): —90 Days | 90000 |
| | NDE 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 ATTORMEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. | |
| STATE OF FLORIDA | told -A-011.01 1 |
| COUNTY OF COLUMBIA 10 | Takent Woold |
| Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager | |
| | Kithert McCool |
| · · · · · · · · · · · · · · · · · · · | Printed Name and Signatory's Title/Office |
| | 10 00 00 |
| The foregoing instrument was acknowledged before n | ne, a Florida Notary, this 10 day of 1100 day of 20 20 by: |
| KDOCH MCCOOL as Owner | for |
| (Name of Person) (Type of A | |
| Personally KnownOR Produced Identification | ' |
| Personally Known OR Produced Identification | ТУРЕ |
| Notary Signature | ************************************** |
| Horary Signature | Notary Stamp or Seal: Notary Pullifo State of Florida |