Inst. Number: 202212017702 Book: 1475 Page: 358 Page 1 of 1 Date: 9/12/2022 Time: 8:43 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:	
of the Florida Statutes, the following information is pro	ents will be made to certain real property, and in accordance with Section 713.13 wided in this NOTICE OF COMMENCEMENT. OCK A FOREST COUNTRY SECOND ADDITION. 661-488, 762-2099, 887-1217, 982-545, QC 989-643,
1. Description of property (legal description): a) Street (job) Address: 340 SW Short Le	989-645, DC 1201- 1379, WD 1284-669, WD 1352- 1251.
2. General description of improvements: roof replace	
Owner Information or Lessee information if the Lessee a) Name and address: Gabriel Gonzalez - 340 SV	ee contracted for the improvements: W Short Leaf Dr. Lake City FL, 32024
c) Interest in property	r (if other than owner)
4. Contractor Information	Construction – 2929 Edison Ave. Jacksonville, FL 32254
b) Telephone No.: 904-751-6112	
5. Surety Information (if applicable, a copy of the payment). Name and address:	
b) Amount of Bond:	
c) Telephone No.:	
6. Lender a) Name and address:	
b) Phone No.	
713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713.13(I)(b), Florida Statutes: a) Name:	he following person to receive a copy of the Lienor's Notice as provided in OFOF
b) Telephone No.:	
9. Expiration date of Notice of Commencement (the expiration date):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROI FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	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 DRDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE IN NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA	Dalue & D
Signature o	Menor Bosses ar Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Gabriel Gonzalez
Pri	inted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, a Florida Notary, this 6 day of September 20 22 by:
Gabriel Gonzalez as own	ver for Gabriel Gonzalez.
(Name of Person) (Type of Aut	,
Personally KnownOR Profiteed Identification	Type DC Susan J. Livingston
Notary Signature	Notary Stamp or Seal State of Florida
111	Comm# HH096179 Expires 2/22/2025