Inst. Number: 202412012726 Book: 1516 Page: 2683 Page 1 of 1 Date: 6/14/2024 Time: 10:48 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	
ax Parcel Identification Number:		
19-45-16-03236-113(15982)		
of the Florida Statutes, the following information is prov		
1. Description of property (legal description): Lot 1.  a) Street (job) Address: 864 - 154  2. General description of improvements: Roof	3 Kelliche estates \$10.758-1245,774-891, 838 6, WD 1092-1555 182 SW Kelliche GLIV Lab Be placement	5-954, ce City
3. Owner Information or Lessee information if the Lesse a) Name and address: アヘルド ( b) Name and address of fee simple titleholder c) Interest in property •	e contracted for the improvements: Christing C Wartzok 182 SW Kelliche GLM (if other than owner)	`
a) Name and address: LNRCA Robot Policy Robot Policy Robot Policy Robot Policy Robot Policy Robot Robot Policy Robot Robot Robot Policy Robot Ro		32055
5. Lender a) Name and address:		
b) Phone No. 7. Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:	er upon whom notices or other documents may be served as provided by Section	
3. In addition to himself or herself, Owner designates th Section 713.13(I)(b), Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in	
a) Name:b) Telephone No.:		
Expiration date of Notice of Commencement (the expires specified):	piration date will be 1 year from the date of recording unless a different date	
COMMENCEMENT ARE CONSIDERED IMPROF FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	PE 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 DROED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.	
COUNTY OF COLUMBIA 10	Christina Wartot	
	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  Chushina Wartzok  nted Name and Signatory's Title/Office	
he foregoing instrument was acknowledged before me	12	
Chrosting Unitzo Kas (Name of Person) (Type of Aut	10r Judy Kay Chapman.	-
ersonally KnownOR Produced Identification	Type PLDL	
otary Signature Judy Kay Ch	Notary Stamp or Seal:  Notary Public - State of Commission # HH 4:  Wy Comm. Expires Jan Bonded through National No	of Florida 61870 11, 2028

