NOTICE OF COMMENCEMENT	Clerk's Office Stamp	
Tax Parcel Identification Number:		
02-65-17-09633-203		
of the Florida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.	
1. Description of property (legal description): Sub- a) Street (job) Address: 214 SEBO		
Street (Job) Address:      General description of improvements:      MC-11	8V4 51W42	
Owner Information or Lessee information if the Less     Name and address: The Life State of the simple titleholde     Name and address of fee simple titleholde	ee contracted for the improvements:  Or Laxe City 32025  If (If other than owner) N/A	
c) Interest in property SQL.  4. Contractor Information	Anderson   2875 SW Pinemount Rd Lake City Fl 3200	ni
1 No	414	7
14 1.1	annt hard is attached).	
a) Name and address: NA b) Amount of Bond: NA	HEIL DONO IS GENERALLY.	
c) Telephone No.: No.		
b) Phone No. No.	is a manufactured as provided by Section	
7 Person within the State of Florida designated by Ow	mer upon whom notices or other documents may be served as provided by Section	
713.13(1)(a)7., Florida Statutes:		
b) Telephone No.: MA		
Lead Level Council Council designates	the following person to receive a copy of the Lienor's Notice as provided in	
8. In addition to himself of haself, Owner Section 713.13(i)(b), Florida Statutes:		
, M/A	OF	
b) Telephone No.:		
Expiration date of Notice of Commencement (the e is specified):	opiration date will be 1 year from the date of recording unless a different date	
WARNING TO OWNER: ANY PAYMENTS MACCOMMENCEMENT ARE CONSIDERED IMPRIED FLORIDA STATUTES, AND CAN RESULT IN Y	ADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, OUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE JR NOTICE OF COMMENCEMENT.	
STATE OF FLORIDA	Solan Remo	
COUNTY OF COLUMBIA 10:: Signature of C	Owner's or Lessee's Authorized Office/Director/Partner/Manager	
	Printed Name and Signatory's Title/Office	
The foregoing instrument was acknowledged before	me, by means ofphysical presence oronline notarization, a Florida Notary,	
this byth day of October 20	25 by:as	
for THON Bever  (name of party on pehalf of whom instrument wa	who is personally known OR produced identification	
. 19	Type ID	
Notary Signature Rumande Jut	(Notary Stamp or Seal)  LAMANDA MOTE Commission # Hit 385545 Expires August 8, 2027	