NOTICE OF COMMÈNCEMENT
Tax Parcel Identification Number 22-45-03090-117 (14745) County Clerk's Office Stamp or Seal
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.  LOT DESCRIPTION: FINAL LOWS 941-1147, DED 1092-1584, FT 1128-2322  1. Description of property (legal description): FT 1144-2445, QT 1252-1384, QC 1255-1358, QT 1258-243  a) Street (Job) Address: WWW INCOMESSING WAY LAKE CUB SWD 1258-50, WA  2. General description of improvements: PLANAR AND REPARCE 13 WINDOWS 1278-593  3. Owner Information
a) Name and address: Kelmeth N and Mary T Williams Calle City Ft 32624  b) Name and address of fee simple titleholder (if other than owner) ha
4. Contractor Information a) Name and address: MUMILLE WINDOWS AND SUNTOOMS b) Telephone No.: 904-742-3693 Fax No. (Opt.)  5. Surety Information
a) Name and address: b) Amount of Bond: c) Telephone No.: Fax No. (Opt.)
b) Phone No.  7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served.
a) Name and address:  b) Telephone No.:  Fax No. (Opt.)
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b),  Florida Statutes:  a) Name and address:  b) Telephone No.:  Fax No. (Opt.)
Pax No. (Upt.)
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified):
WARNING TO OWNER: ANY PAYMENTS MADE 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 ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.  STATE OF FLORIDA COUNTY OF COLUMBIA  10.  Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  Print Name  Aday of OCT  AND HILLIAN 20 22 by:
Lenneth Williams  (type phabthority, e.g. officer, trustee, attorney
fact) for (name of party on behalf of whom distributed was executed)
Personally Known OR Produced Identification Type The Lieuve Tomasino
Notary Signature Notary Stamp or Seal: Notary Stamp or Seal:
11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read that the facts stated in it are true to the best of my knowledge and belief.  (Physical Presence)  Signature of Natural Person Signing (in line #10 above.)