Inst. Number: 201312008930 Book: 1256 Page: 900 Date: 6/12/2013 Time: 3:16:12 PM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT		Clerk's Office Stamp
Tax Parcel Identification Number:		A
20-35-16-022060	01	Inst:201312008930 Date:6/12/2013 Time:3:16 PM DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1256 P:900
THE UNDERSIGNED hereby gives notice that impr Florida Statutes, the following information is prov	ovements will b	ne made to certain real property, and in accordance with Section 713.13 of the TICE OF COMMENCEMENT.
1. Description of property (legal description):	TO 1 F	AIRE BLD BOOM
a) Street (job) Address: 479 N	U/ BROOM	KLUEL, L. C. St. 32055
2. General description of improvements: 181	OH-JF	0/-
3. Owner Information a) Name and address: WESTE b) Name and address of fee simple title	1147	than owner)
4. Contractor Information		
a) Name and address: A. J. C. b) Telephone No. 904 1533-	UBLLS	ROOFING G (GOVE TRUCTION) Fax No. (Opt.) (904) 551-4283
3. 301 my mormation		
		Fax No. (Opt.)
6. Lender		
a) Name and address:		
a) Name and address:		ner upon whom notices or other documents may be served:
h) Telephone No.		Fax No. (Opt.)
8. In addition to himself owner designates the fol	llowing parent	o receive a copy of the Lienor's Notice as provided in Section
7 3.13(1)(b) Florida Statutes:		
a) Name and address:		AND AND ADDRESS OF THE PARTY OF
h) Telephone No.		Fax No. (Opt.)
 Expiration date of Notice of Commencement (tiles specified): 	he expiration da	ate is one year from the date of recording unless a different date
IMPROPER PAYMENTS UNDER CHAPTER 713, PAI	RT L SECTION 7	FTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERE 13.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR
IMPROVEMENTS TO YOUR PROPERTY; A NOTICE	OF COMMENCE	MENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST
INSPECTION. IF YOU INTEND TO OBTAIN FINANCI	NG, CONSULT Y	OUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDIN
YOUR NOTICE OF COMMENCEMENT.		
STATE OF FLORIDA COUNTY OF COLUMBIA		200011/-
SOCIAL OF COLDINGIA	10Sign	nature of Owner or Owner's Authorized Office/Director/Partner/Manager
		bles & Hours
	Prin	nted Name
he foregoing instrument was acknowledged before r	na - a Elarida Nat	1516
MESIEN HUNTER		(type of authority, e.g. officer, trustee, attorney
actifor WESIGN NUNTE	-U,	(name of party on behalf of whom instrument was executed).
ersonally Known OR Produced Identification _	Түре	
9.11		
lotary Signature <u> </u>	00-	Notary Stamp or Seal: LAURIE HODSON MY COMMISSION # EE 214728
1. Verification pursuant to Section 92.525, Flore	ida Statutes. Ur	AND nder penalties of perjury,
the facts stated in it are true to the best of n	iy knowledge a	and belief
		haman
		Signature of Natural Person Signing (in line #10 above.)