NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
10-45-16-02853-280	
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.	
1. Description of property (legal description): 0+1 a) Street (jab) Address: 193 510 V	OBILB Russwood ESt. Unit 2 POF-649 Win Gla Lake City, Fl 32024
2. General description of improvements: Root	repair
a) Name and address: JOHA OC JOH b) Name and address of fee simple titleholde c) Interest in property	r (if other than owner)
4. Contractor Information a) Name and address: Energy Rose	ng 562 MW Orange Are LAKE City, F1 32055
5. Surety Information (if applicable, a copy of the paym	ent bond is attached):
a) Name and address:	
b) Amount of Bond: c) Telephone No.:	
6. Lender	
b) Phone No.	·
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section	
713.13(1)(a)7., Florida Statutes: a) Name and address:	
b) Telephone No.:	18-18-18-18-18-18-18-18-18-18-18-18-18-1
9 In addition to himself or horself Owner designates t	he following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	tie following person to receive a copy of the cierior's reduce as provided in
a) Name:	OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the exist specified):	piration date will be 1 year from the date of recording unless a different date
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	2 1 1
COUNTY OF COLUMBIA 10)X	Mais
	wner of Lessee, or Owner or Lessee's Authorized Office/Director/Partner/Manager
Printed Name and Signatory's Title/Office	
	Tinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me, a Florida Notary, this	
John MACTZ 25 DEUDE	tor Energy Rook - (name of party on behalf of whom instrument was executed)
. The control of the	
Personally Known OR Produced Identification X Type Driver Licevise	
Notary Signature 1 1 1 1 1 1	70/1
Notary Signature	Notary Public, State Of Florida
	My Commission Expires: 6/20/2026