Inst. Number: 202412007780 Book: 1512 Page: 1356 Page 1 of 1 Date: 4/16/2024 Time: 10:03 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
Tax Parcel Identification Number:	
1	
30-4S-17-08878-000 (32785)	
or the norma statutes, the following information is prov	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):	FT OF N 208 FT OF E1/2 OF SW1/4 OF NE1/4. ALSO COMM SW COR OF SE1/4 OF I
a) Street (job) Address: 220 SW	V HONER IN LAKE CITY
2. General description of improvements: 1116761	RETIDENT.
3. Owner Information or Lessee information if the Lessee	contracted for the improvements:
b) Name and address of fee simple titleholder	A MAE 220 SW HONER LN LAKE CITY, FL 32025 (if other than owner)
	(A. OWIEL MATOWNELL)
4. Contractor information	
b) Telephone No.: 352-888-4676	NW Commons Lp Ste 115-315 Lake City FL 32024
5. Surety Information (if applicable, a copy of the paymer	nt bond is attached):
a) Name and address:	
c) Telephone No.:	
6. Lender	
a) Name and address:	
-, · none no.	er upon whom notices or other documents may be served as provided by Section
/13.13(1)(a)/., FIORIDA STATUTES:	
a) Name and address:	
b) Telephone No.:	
Section 713.13(I)(b), Florida Statutes:	following person to receive a copy of the Lienor's Notice as provided in
a) Name:	OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the expirits specified):	ration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROPE FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOF	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, IR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
TATE OF FLORIDA	
OUNTY OF COLUMBIA	and mal Honer
Notary Public State of Florida	er or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Alyssa Miller	ONA MAE HON. FR ted Name and Signatory's Title/Office
	I ANGIL ALL
ne foregoing instrument was acknowledged before me, a	Florida Notary, this day of, 20, by:
Edna Honer a Divine	
Name of Person) (Type of Autho	for
rsonally Known OR Produced Identification	Type FC DC
otary Signature Algum	Notary Dublic Comments
Stary Signature	Notary Stamp or Seal:  Notary Public State of Flori Alyssa Miller My Commission he 3/2/2 Expires 9/14/2026