Inst. Number: 202312000418 Book: 1482 Page: 1777 Page 1 of 1 Date: 1/11/2023 Time: 10:06 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:	
19-45-16-03009-000 (14335)	
of the Florida Statutes, the following information is pro	ents will be made to certain real property, and in accordance with Section 713.13 wided in this NOTICE OF COMMENCEMENT.
	COF SWIM OF SEIM, RUNN 10 FT TO N RIW OF RD, RUNW ALONG RIW 660 FT FOR POB, RUNN 210 FT, W 210 FT, E 210 FT, E 210 FT TO HOUR, 319-206, V B City, FL 32024
2. General description of improvements: HVAC, Flooring	, and plumbing (bath) replacements and repairs in accordance with Columbia County No. 1770g-a
3. Owner Information or Lessee information if the Lesse a) Name and address: James & Deator Gaddie: 5725 SW All All Andrews and Face simple Hillsholde All Andrews and Face simple Hillsholde The Company of the Company of Sac Simple Hillsholde The Company	County Rd 242 Lake City, FL 32024
b) Name and address of fee simple titleholde c) Interest in property Homeowner(s)	it (It Other trial Owner)
a C	
a) Name and address: DSW Homes, LLC: 1650 E v b) Telephone No.: 409-744-3400	vacing way or (Building 6) Filenosmood, 17 17340
5. Surety Information (if applicable, a copy of the paym	nent bond is attached):
a) Name and address: N/A	
b) Amount of Bond: N/A	
c) Telephone No.: N/A 6. Lender	
a) Name and address: Columbia County BCC c/o	Columbia County ARPA Senior Housing Rehab Program: 135 NE Hernando Ave, #203: Lake City, FL 32055
h\ Dhogo No. 386-719-2028	ner upon whom notices or other documents may be served as provided by Section
Dan and 11/-17 Florida Study too:	
a) Name and address: Columbia County Purchasing: I	Mike Null: 135 NE Hernando Ave, #203: Loke City, FL 32055
b) Telephone No.: 386-719-2028	
8. In addition to himself or herself, Owner designates of Section 713.13(i)(b), Florida Statutes: a) Name: Antonio Jenkins	the following person to receive a copy of the Lienor's Notice as provided in OF Guardian CRM, Inc. 15000 Citrus Country Dr. #331: Dade City, FL 33523
a) Name: Antonio Jenkins b) Telephone No.: 888-482-7393	
	Mee A.A.
is specified):	xpiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILED FOR COMMENCEMENT MUST BE RECOMMENCEMENT MUST BE RECOMMENCEMENT MUST BE RECOMMENCEMENT MUST BE RECOMMENCEMENT MUST BE RECOMMENCEMENT.	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 IR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	OSatu Bodos
COUNTY OF COLUMBIA 10 Signature of C	Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Signature di e	
	Dector Gaddy Homeover Printed Name and Signatory's Title/Office
	<u></u>
The foregoing instrument was acknowledged before i	me, by means of physical presence or online notarization, a Florida Notary,
this <u>20</u> day of <u>lugues</u> 20	(Name of Person) (Name of Person) (Type of Authority) who is personally known OR produced identification os executed)
for ANTA Rehab Brus	who is personally known OR produced identification sexecuted)
	Notary Public-State of Florida Commission # HH 194042 My Commission Expires
Notary Signature	(Notary Stamt of Saat) November 02, 2025