NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number.	ins 201312009552 Date:6/25/2013 Time 12 12 PM DC.P DeWitt Cason,Columbia County Page 1 of 2 B.1257 P:21
19-35-17-05088-001	
THE UNDERSIGNED hereby gives notice that improvement Florida Statutes, the following information is provided in ti	s will be made to certain real property, and in accordance with Section 713.13 of the his NOTICE OF COMMENCEMENT
1. Description of property (legal description): Steet (job) Address (81)	Exhibit - A
2. General description of improvements: Z5' > /c	od' Metal Building addition
a) Name and address 500 + 1 cm 5 8 9 1 Name and address of fee simple titleholder (i	
c) Interest in property 100 %	
4. Contractor Information a) Name and address	Builder
b) Telephone No 384-623- 5. Surety Information	0175 Fax No. (Opt.) 376 752 - 9580
a) Name and address	
b) Amount of Bond:	Fax No (Opt.)
6. Lender	
a) Name and address Camas U b) Phone No 800 367-6440	SA POBOL 147029 Gainesville, FL 32614
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 386 623 0	175 Fax No. (Opt.) 386-752-9580
213 13(I)/b). Florida Statutes	erson to receive a copy of the Lienor's Notice as provided in Section
a) Name and address. Bounce St	chner 1812 NW Main Blud Like (1, F2. 32055
b) Telephone No. 396-752-7	12 16 Fax No. (Opt.) 386. 73-2-9580
Expiration date of Notice of Commencement (the expiration is specified)	ation date is one year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OV	WHER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED
IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SEC	TION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR
	IMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST VSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
YOUR NOTICE OF COMMENCEMENT.	\sim 6
STATE OF FLORIDA	A A A A A A A A A A A A A A A A A A A
COUNTY OF COLUMBIA 1	0. Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
	Rossell T Richard
	Printed Name
The foregoing instrument was acknowledged before me , a Flo	orida Notary, this 25th day of June 20 13 by
Ronald T. Buckers as A	Bles, Deaf (type of authority, e.g. officer, trustee, attorney
faction Southern Specialized Tou	ck + Tag (lest (name of party on behalf of whom instrument was executed).
	, BY 01.
Personally Known OR Produced Identification Ty	PE BRIAN D. BUCHNER MY COMMISSION # EE 101282
Notary Signature	EXPIRES: October 8, 2015 Notice Teach Official Thru Budget Notary Services
Towns of Bridge Control of the Contr	TO STATE OF
11. Verification pursuant to Section 92.525, Florida Stathe facts stated in it are true to the best of my known	tutes. Under penalties of perjury, I declare that I have read the foregoing and that wledge and belief.

Signature of Natural Person Signing (In line #10 above)