Inst. Number: 202312007084 Book: 1488 Page: 2402 Page 1 of 1 Date: 4/24/2023 Time: 8:51 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:	
31-3S-17-05993-001 (26116)	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is pro-	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): LOT 6 & E 2	5 FT OF LOT 7 BLOCK 3 UNIT 1 GWEN LAKE ESTATES
a) Street (job) Address: 606 NW PALM 2. General description of improvements: Roof-Over	DRLAKE CITY, FL 32055
3. Owner Information or Lessee information if the Lesse a) Name and address: LEY JOHN L & BARBARA LEY E b) Name and address of fee simple titleholder c) Interest in property Owner	
4. Contractor Information a) Name and address: Lewis Walker PO BC	DX 2147, Lake City, FL 32056
b) Telephone No.: 866-959-7663 5. Surety Information (if applicable, a copy of the payme a) Name and address: N/A	
b) Amount of Bond: c) Telephone No.:	
6. Lender	
b) Phone No.	
713.13(1)(a)7., Florida Statutes:	
Section 713.13(I)(b), Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in
a) Name: <u>N/A</u> b) Telephone No.:	OF
9. Expiration date of Notice of Commencement (the exp	piration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROIFICATION STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A DRIDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	Badaca O Day
COUNTY OF COLUMBIA 10.	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
<u> </u>	Sinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	, a Florida Notary, this 21 day of April 20 23 by:
(Name of Person) as OWN	hority) for Barbara Country (name of party on behalf of whom instrument was and this party on behalf of whom instrument was and this party of the pa
Personally Known OR Produced Identification U	Type OC Solving 5, 2020 Rg.
Notary Signature Suples Houstan	hority) (name of party on behalf of whom instrument was and uteral HOUS) Type OL Notary Stamp or Seal: #HH 148428
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