Inst. Number: 202412015589 Book: 1519 Page: 1478 Page 1 of 1 Date: 7/22/2024 Time: 8:07 AM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

THIS SPACE FOR CLERK'S RECORDING Permit No. Tax Folio/Parcel ID: NOTICE OF COMMENCEMENT THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement: 1. Description of property: (legal description of property, and street address if available) 34-38-17-07133-000 215 SE Tribble 3t., Lake City 2. General description of improvement: 3. Owner information: a. Name and address: Janet Mortin 215 St. Tribble St., Lake ( b. Phone number: 386-984-0671 e. Name and address of fee simple titleholder (if other than owner): a. Name and address: Robert Oaks 505 Goldkist Blvd, Live Oak 5. Surety: b. Amount of bond \$ \_ 6. Lender: a. Name and address: 7. Persons with the State of Florida designated by Owner upon whom notices or other documents may be served as provided in Section 713.13(1)(a)7, Florida Statute AM b. Phone number: \_ 8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b). Florida Statutes: a. Name and address: b. Phone number: N/A 9. The expiration date of the notice of commencement is one (1) year from the date of recording unless a different date is specified: 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. uner wner's Authorized Officer/Director/Partner/Manager Signature of Owner or STATE OF FLORIDA COUNTY OF Swanner The foregoing instrument was acknowledged before me this 19 day of July NoteLYSE FOWLER **NOTARY PUBLIC** Verification Pursuant to Section 92.525, Florida Statutes STATE OF FLORIDA Under MX FORMUSSION FXPRES JEER 100, 2002 | have read the foregoing and that the facts stated in ivare true to the best of my knowledge and belief.

Signature of Natural Person Signing Above