Inst. Number: 202312024074 Book: 1505 Page: 308 Page 1 of 1 Date: 12/21/2023 Time: 3:58 PM 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:	
05-45-16-02773-023 (11733)	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is proven	ents will be made to certain real property, and in accordance with Section 713.13 rided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): 05-4	5-16-02773-023
2. General description of improvements: Meta	sta Terr. Lake City 32024 re-roof
c) Interest in property () WY ()	ce Mobiley 294 SW Vista Terr. Lake City (if other than owner) 32024
4. Contractor Information a) Name and address: Nicholas	Carlucci 268 SE Press Ruth Or. Lake Cit.
b) Telephone No.: 5. Surety Information (if applicable, a copy of the payme a) Name and address:	ent bond is attached):
a) Talanhana Na	
6 Lender	
b) Phone No	
713.13(1)(a)7., Florida Statutes: a) Name and address:	er upon whom notices or other documents may be served as provided by Section
	e following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	
	OF
9. Expiration date of Notice of Commencement (the exp is specified):	iration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, JR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A BRODED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	
COUNTY OF COLUMBIA 10. A Signature of Own	her or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
DANIEL J. CARLUCCI MY COMMISSION #HH024545 EXPIRES: JUL 28, 2024 Bonded through 1st State Insurance	CIARCN CE J Mulb) eg nted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	a Florida Notary, this 20th day of December 2023, by:
A .	
(Name of Person) (Type of Auth	for
Personally KnownOR Produced Identification	
Notary Signature Dan J. Colo	Notary Stamp or Seal: