NOTICE OF COMMENCEMENT		Clerk's Office S	tamp
Tax Parcel Identification Number:			
01-75-16-04108-11 (21380)			
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is prov	ints will be made to ce rided in this NOTICE O	rtain real property, and i	n accordance with Section 713.13
1. Description of property (legal description): \$1/2 L(a) Street (job) Address: 340 StD YNU	78 & ALL LO	tark white F	32038
2. General description of improvements: MP+01	roof	FOLT WHILE E	
3. Owner Information or Lessee information if the Lesse a) Name and address: FREDERICIC 8 b) Name and address of fee simple titleholder c) Interest in property 4. Contractor Information a) Name and address: Tyler Turne b) Telephone No.: 357-888-467 5. Surety Information (if applicable, a copy of the payman and address: b) Amount of Bond: c) Telephone No.: 6. Lender a) Name and address: b) Phone No. 7. Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes:	R SANDICA B: (if other than owner) 27 295 NW CO 6 ent bond is attached):	MMMS LP SHCI	be served as provided by Section
a) Name and address: b) Telephone No.: 8. In addition to himself or herself, Owner designates to		v ,	
Section 713.13(I)(b), Florida Statutes: a) Name:			
a) Name: b) Telephone No.:	OF		
Expiration date of Notice of Commencement (the exist specified):	piration date will be 1	year from the date of rec	ording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAI COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE REC INSPECTION. IF YOU INTEND TO OBTAIN FIN COMMENCING WORK OR RECORDING YOUR	PER PAYMENTS UI PUR PAYING TWICE ORDED AND POST! ANCING, CONSULT	NDER CHAPTER 713, I FOR IMPROVEMENT ED ON THE JOB SITE I	PART I, SECTION 713.13, 'S TO YOUR PROPERTY; A
STATE OF FLORIDA COUNTY OF COLUMBIA 10.7	recleich W	Geaunsit	
Signature of Ov	vner or Lessee, or Own	, , , , ,	d Office/Director/Partner/Manager
<u>/</u>	rinted Name and Signa	M SEAU	WDN
	A Comment of the comm		
The foregoing instrument was acknowledged before me	a, a Florida Notary, this		July 20 21 by:
(Name of Person) (Type of Au	thority)		of whom instrument was executed)
Personally Known OR Produced Identification	Type FC	Driver Lices	
Notary Signature		Notary Stamp or Seal:	Notary Public State of Florida Michael J. Carr My Commission OG 185546 Expires 02/19/2022