Inst. Number: 202412002946 Book: 1508 Page: 579 Page 1 of 1 Date: 2/16/2024 Time: 1:04 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:   |  |
| 24-68-17-09767-007  |  |
| THE UNDERSIGNED hereby gives notice that improvem of the Florida Statutes, the following information is pro | nents will be made to certain real property, and in accordance with Section 713.13 ovided in this <b>NOTICE OF COMMENCEMENT</b> .  |
| Description of property (legal description): COMM NE     a) Street (job) Address: 245 SE GILES MARTIN AV    | COR OF NW1/4 OF NW1/4, RUN S 1711.01 FT FOR POB  |
| 2. General description of improvements: Exposed Faster  | ner Metal over shingle with purins   |
| Owner Information or Lessee information if the Less     Name and address: Scott Lange, 245 SE GILES M.      | ee contracted for the improvements:  |
| <ul> <li>b) Name and address of fee simple titleholds</li> <li>c) Interest in property Owner</li> </ul>     | er (if other than owner)   |
| 4. Contractor Information   |  |
| a) Name and address: True Force Roofing   | 2420 NW 86 Ct Ste B, Gelinesville, FL 32653  |
| b) Telephone No.: 352-900-5149  5. Surety Information (if applicable, a copy of the payre                   | nent bond is attached):  |
|   |  |
| b) Amount of Bond:  |  |
| c) Telephone No.:   |  |
| a) Name and address:  |  |
| <ul> <li>b) Phone No</li></ul>  | ner upon whom notices or other documents may be served as provided by Section  |
|   |  |
| b) Telephone No.:   | <del></del>  |
| Section 713.13(I)(b), Florida Statutes:   | the following person to receive a copy of the Lienor's Notice as provided in   |
| o) relegionic resi  |  |
| Expiration date of Notice of Commencement (the exits specified):  | cpiration date will be 1 year from the date of recording unless a different date   |
| COMMENCEMENT ARE CONSIDERED IMPROFUNCTION OF COMMENCEMENT MUST BE REC                                       | DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, DUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST IANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE R NOTICE OF COMMENCEMENT. |
| Signature of O  | wner or Lessee, of Owner's or Lessee's Authorized Office/Director/Partner/Manager  |
|   | Printed Name and Signatory's Title/Office  |
| The foregoing instrument was acknowledged before m  | ne, by means of physical presence or online notarization, a Florida Notary,  |
| this 15th day of February 2018  | 4 by: Scott Lange as owner   |
|   | (Name of Person) (Type of Authority)   |
| for   | who is personally known OR produced identification executed)   |
| 111   | Type ID  |
| Notary Signature Lauran (and  | (Notary Starmp or Seal)  ANDREW W CARTER  Notary Public - State of Florida  Commission # GG 985042  My Comm. Expires May 5, 2024  Bonded through National Notary According   |