Inst. Number: 202312017159 Book: 1498 Page: 1888 Page 1 of 1 Date: 9/12/2023 Time: 2:31 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:	
12-4S-16-02941-105 (13341)	
THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.	
Description of property (legal description): LOT 5 SOUTH a) Street (job) Address: 120 SW VOYA     General description of improvements: Roof-Over (HOUS)	AGER CT LAKE CITY, FL 32025
3. Owner Information or Lessee information if the Lesse a) Name and address: TORRES DOMINGO J TORRES b) Name and address of fee simple titleholder	
c) Interest in property Owner      Contractor Information     a) Name and address: Lewis Walker PO BO	
b) Telephone No.: 866-959-7663  5. Surety Information (if applicable, a copy of the payme a) Name and address: N/A	
c) Telephone No.:	
b) Phone No.	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
Section 713.13(I)(b), Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in
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 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	
STATE OF FLORIDA COUNTY OF COLUMBIA  10. Signature of Ow	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Hotsry Public State of Florida  Eloise Reynolds  My Commission HH 393220  Expires 5/1/2027	Jomines J. Josepes, inted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me, a Florida Notary, this 12th day of September 20 23, by:	
Domungo lorres as Own (Type of Aut	er for Lewis Walker Roofing The
Personally Known CR Produced Identification	Туре
Notary Signature Elle Blyno	Notary Public State of Florida Eloise Reynolds My Commission HH 393220 Expires 5/1/2027