NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst: 202212007860 Date: 04/22/2022 Time: 12:46PM

Page 1 of 1 B: 1464 P: 2411, James M Swisher Jr, Clerk of Court

Columbia, County, By: COMA Deputy Clerk

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.
1. Description of property (legal description): 15-45-110-03023. 381
a) Street (job) Address: 212 Sw wilshire or Lake City FL 32024.
2. General description of improvements: reducing the root.
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: tourdes valido b) Name and address of fee simple titleholder (if other than owner) 212 sw wilshire Dr. Lake city FL 32024
c) Interest in property (e roof
4. Contractor Information
a) Name and address: OWNER b) Telephone No.: 384 - 444 - 7028
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address:
b) Amount of Bond:
c) Telephone No.:
a) Name and address:
b) Phone No
 Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
a) Name and address:
b) Telephone No.:
a) Name:OF b) Telephone No.: 9. Expiration date of Notice of Commencement (the expiration date will be 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 YOUR LENDER OR AN ATTORNEY BEFORE
COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA 10. Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Lourdes valido
Printed Name and Signatory's Title/Office
and o s
The foregoing instrument was acknowledged before me, a Florida Notary, this day of Cloud, 20 day by:
Valido Lourdos as Self for NIP (Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification Type FOC
MELISSA GARBER MY COMMISSION # GG 952236 EXPIRES: January 28, 2024 Bonded Thru Notary Public Underwriters