## NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

30-75-17-10058-510

Clerk's Office Stamp

Inst: 202212022403 Date: 11/28/2022 Time: 9:54AM

Page 1 of 1 B: 1480 P: 12, James M Swisher Jr, Clerk of Court

EXPIRES: March 30, 2024 Bonded Thru Notary Public Underwriters

Columbia, County, By: VC

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.

a) Street (job) Address: 344 SW WOODLAND AVE, FORT (, Seneral description of improvements: The TAIL SHED	SWITE FL.
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: Kichard Ferland 944 Sw Woodland Auc, F	ort White FL. 32078
b) Name and address of fee simple titleholder (if other than owner)	
c) Interest in property 570-age Building	*-
A Contractor Information	•
a) Name and address: Owner	
b) Telephone No.:	
5. Surety Information (if applicable, a copy of the payment bond is attached):	
a) Name and address:	
b) Amount of Bond:	
c) Telephone No.:	
6. Lender	
a) Name and address:	
b) Phone No.	W 50.
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be ser	ved as provided by Section
712 12/1Val7 Clasida Charles	
a) Name and address:  b) Telephone No:	
b) Telephone No.:	
8	
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's No	tice as provided in
Section 713.13(I)(b), Florida Statutes:	157
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 is specified):	· · · · · · · · · · · · · · · · · · ·
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFOIL INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATT COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	I, SECTION 713.13, YOUR PROPERTY; A RE THE FIRST
COUNTY OF COUNTY	110
Machua Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office	:/Director/Partner/Manager
	COWD .
Printed Name and Signatory's Title/Office	
Timeo Name and agriatory's Title/Office	
	2
The foregoing instrument was acknowledged before me, a Florida Notary, this 25 day of Moules	120 22 by:
COLUME Jacono as DWNFC for ANJON'S But (Name of Person) (Type of Authority) (name of party on behalf of whor	1dings
(Name of Person) (Type of Authority) (name of party on behalf of whor	n instrument was executed)
Personally Known OR Produced Identification X Type GDL	War livy
11.	(3 € / dk
Notary Signature Willy Mund Notary Stamp or Seal:	STPLE.
ivotary stamp or sear:	LESLIE WOOD  MY COMMISSION # GG 974224