Inst. Number: 202212016660 Book: 1474 Page: 200 Page 1 of 1 Date: 8/24/2022 Time: 2:55 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:	
of the Florida Statutes, the following information is prov	
1. Description of property (legal description): 01-3 a) Street (job) Address: 1329 NW (2. General description of improvements: 124a	35-15-00134-002 (358) Daden Loop Lake City, Fl. 32055 Yoof-over
3. Owner Information or Lessee information if the Lessee a) Name and address: Penay C an b) Name and address of fee simple titleholder	e contracted for the improvements: ton 1327 NV Ogden Loop, Lake City, 32055 (if other than owner)
5. Surety Information (if applicable, a,copy of the payme	ent bond is attached):
(- 1	
a) Name and address: /// / / / / / / / / / / / / / / / /	er upon whom notices or other documents may be served as provided by Section
8. In addition to himself or herself, Owner designates the Section 713.13(J)(b). Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in OF
b) Telephone No.: 9. Expiration date of Notice of Commencement (the expire is specified):	iration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROPED FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOINSPECTION. IF YOU INTEND TO OBTAIN FINAL COMMENCING WORK OR RECORDING YOUR INTEND TO FLORIDA COUNTY OF COLUMBIA	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, IR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING. CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
The foregoing instrument was acknowledged before me, \[\lambda \cho \lambda \sum \cho \lambda \cho \lambda \cho \lambda \cho \lambda \cho \hat{ta} \\ \lambda \cho \lambda \sum \cho \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \lambda \sum \cho \hat{ta} \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \lambda \sum \cho \hat{ta} \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \lambda \sum \cho \hat{ta} \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \lambda \sum \cho \hat{ta} \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \lambda \sum \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \hat{ta} \lambda \cho \hat{ta} \\ \lambda \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \\ \lambda \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \\ \lambda \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \\ \lambda \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \\ \lambda \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \cho \hat{ta} \\ \lambda \cho \hat{ta} \\ \lambda \cho \hat{ta} \\ \lambda \cho \hat{ta} \	C O Y for
Personally Known X OR Produced Identification	Type DANIEL J. CARLUCCI MY COMMISSION #HH024545 EXPIRES: JUL 28, 2024 Bonded through 1st State Insurance