NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
02-6S-17-09553-055	
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): 02-6S-17 a) Street (job) Address: 155 SE AUGUST GLN LAKE	LOT 2 OF REPLAT OF LOT 35 ROLLING HILLS S/D UNREC. COMM NE COR OF SE1/4 OF NW1/4 E CITY, FL 32025
	ng Permits for Interior Renovations
Owner Information or Lessee information if the Lessee contracted for the improvements: a) Name and address; MINISTERIO CRISTIANO EL MESIAS INC 155 SE AUGUST GLN LAKE CITY, FL 32025	
	r (if other than owner) <u>Jose Juan Garcia Hernandez</u>
Contractor Information Name and address: Thomas Willits. 47 SW 3	445th Ave Steinhatchee, Fl 32359
b) Telephone No. (904) 813 1066.	
5. Surety Information (if applicable, a copy of the paym	
c) Telephone No.:	
6. Lender	
b) Phone No.	
	ner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:	
a) Name and address: N/A b) Telephone No.:	
8. In addition to himself or herself, Owner designates the	he following person to receive a copy of the Lienor's Notice as provided in
Section 713 13(I)(h) Florida Statutes:	
a) Name: N/A	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 Ov	vner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Notary Public - State of Florida Commission = HH 169055 My Comm. Expires Aug 24, 2025	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before m	e, by means of physical presence or online notarization, a Florida Notary,
L AALL	1 /\ 0 1/
this 13th day of Otober, 202	
	(Name of Person) (Type of Authority)
forwho is personally knownOR produced identification(name of party on behalf of whom instrument was executed)	
Notary Signature	Type ID Illinois Driver Lic.