NOTICE OF COMMENCEMENT Clerk's Office Stamp Tax Parcel Identification Number: 25-4S-16-03121-018 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): a) Street (job) Address: 211 SW Blucberry Pl. 2. General description of improvements: Inground Giberglass pool installation 3. Owner Information or Lessee information if the Lessee contracted for the improvements:

a) Name and address: John Sheely Jr 211 SW Blueberry PI Lake City 4. Contractor Information a) Name and address: Thomas Jones | Paragon Pools of N. FL | 800 N. Thompson St. | Starke, FL b) Telephone No.: 904.368.9777 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. 7. 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.: \_\_\_ 3. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(I)(b), Florida Statutes: a) Name: 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 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 Lesself's Authorized Office/Director/Partner/Manager Printed Name and Signatory's Title/Office The foregoing instrument was acknowledged before me, a Florida Notary, this 27 day of March 20 23, by: \_ as \_\_\_\_\_OWVCV \_\_\_\_\_\_\_(Type of Authority) (name of party on behalf of whom instrument was executed) (Name of Person) Personally Known X OR Produced Identification \_\_\_\_ Type \_\_\_\_\_ Notary Stamp or Seal: CRYSTAL SMITH

Notary Public - State of Florida Commission # GG 366743 My Comm. Expires Aug 18, 2023 Beneed through National Notary Assn

Inst. Number: 202312009202 Book: 1491 Page: 98 Page 1 of 1 Date: 5/23/2023 Time: 9:15 AM

James M Swisher Jr Clerk of Courts, Columbia County, Florida