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	NOTICE OF COMMENCEMENT CHECK'S Office States
	Tax Parcel Identification Number:
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	THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.3 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.
	1. Description of property (legal description): 10-35-16-07707-133 (7417) a) Street (jab) Address: A94 NW SOISTICE CF Lake City, FL 37085 2. General description of improvements: SWIMMING POOL
	3. Owner Information or Lessee information if the Lessee contracted for the improvements:
	a) Name and address: b) Name and address of fee simple titleholder (if other than owner)
	c) Interest in property A. Contractor Information
	a) Name and address: CHAD CUNNINGHAM 1033 SWLITTLE RD LAKE CITY, FL 32024 b) Telephone No.: 386-755-2848
	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. 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 1.
	713.13(1)(a)7., Florida Statutes:
	a) Name and address:
	8. 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: CHAD CUNNINGHAM OF PEELER POOLS OF NORTH FLORIDA
	b) Telephone No.: 386-755-2848
	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 RATIFICIANINGHAM 10.
	Notary Public 10. Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Oirector/Partner/Mana
	State of Florida Comm# HH447515 Related No. Dec hell The Comme th
	Comm# HH447515 Expires 9/25/2027 Printed Name and Signatory's Title/Office
	The foregoing instrument was acknowledged before me, a Florida Notary, this
	Andrew Decker as owner for 294 NW solstice Ct. Lake City
	Personally Known OR Produced Identification Type
	Notary Signature Kattilunuergh - Notary Stamp or Seal: