Clerk's Office Stamp

Tax Parcel Identification Number:

12-55-16-03406-120

Inst: 202112002889 Date: 02/18/2021 Time: 2:47PM

Page 1 of 1 B: 1430 P: 1796, James M Swisher Jr, Clerk of Court

Columbia, County, By: BR

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.
1. Description of property (legal description): 12-55-16-03406-120
a) Street (job) Address: 694 Sw Stangridge dr Lake City F1 32024
2. General description of improvements:
3. Owner Information or Lessee information if the Lessee contracted for the improvements: a) Name and address: Richard McClafferty 694 SW Stoneridse di Lake City F13202 b) Name and address of fee simple titleholder (if other than owner) NM-
a) Name and address: Richard McClafferty 694 Systemerides de Late 1: 613200
c) Interest in property Oune C
a) Name and address: Ocles Roofing + Const, LLC 505 Gold Kist Blvd Live Oak F13xx
b) Telephone No.: 386-364-4838
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.:
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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 /15.15(i)(b), Florida Statutes:
a) Name: OF
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): 5-1-2021
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
THE CONTRACTOR OF THE PROPERTY
THE PARTY OF THE P
TOOK NOTICE OF COMMENCEMENT.
STATE OF FLORIDA
COUNTY OF COLUMBIA 10.
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Robert Ogles #
Printed Name and Signatory's Title/Office
The face of the fa
Robert Oglos as Quoner for Oglos Roofing was executed) (Name of Person) The foregoing instrument was acknowledged before me, a Florida Notary, this 18 day of February 2021 by: (Name of Person) (Type of Authority)
Robert Onlas o
(Name of Person) (Type of Authority) for CGUS ROOFing (name of Person) (name of Person) (name of Person) (name of Person)
(Type of Authority) (name of Person) (Type of Authority) (name of Personally Known instrument was executed)
Personally Known X OR Produced Identification Type
- LIEV
Notary Signature UShluy Stalley Notary Stamp or Seals My COMMISSION # GG 923118 NOTARY Stamp or Seals My COMMISSION # GG 923118 NOTARY STALLEY NOTARY STALL
TO THE PROPERTY OF THE PROPERT
Notary Stamp or Seal: EXPIRES: October 15, 202 EXPIRES: October 15, 202 Bonded Thru Notary Public Underwriters
A SOLITOR BOLLEY