| nes M S | wisher Jr Clerk of | Courts, Columbia Co | ounty, Florida Doc | Mort: 0.00 Int Tax: (| 0.00 Doc Deed: 0.00 |
|---------|--------------------|---------------------|--------------------|-----------------------|---------------------|

| Car 14 Jon | s Instrument Prepared By: mpus USA Credit Union 007 NW 1st Road nesville, Florida 32669 52) 335-9090 | | |
|------------------------|--|---|--|
| CAI 14 | er Recording Return To: MPUS USA CREDIT UNION DO7 NW 1ST ROAD NESVILLE, FLORIDA 32669 | | |
| | | | |
| - | | Space Above | This Line For Recording Data] |
| Pen | mit No.: | Tax Folio No.: | 167S17-10006-204 |
| CO | TE OF FLORIDA UNTY OF Columbia undersigned hereby gives notice that improvement we pter 713, Florida Statutes, the following information Description of Property: Parcel 16-75-17-1 Florida 32643 Lot 4 of River Rise Residential Subthereof as recorded in Plat Book 8, | rill be made to certain is provided in this No.0006–204 SW Mandivision Unit | n real property, and in accordance with Notice of Commencement. arynik Dr, High Springs, I, according to the Plat |
| | Columbia County, Florida. | Page 31, or | the Public Records of |
| | A.P.N.: 167S17-10006-204 | | |
| 3. | General description of improvement: _SINGLE FA | | |
| | a. Name and address: Steven Kline Co | ndo, Kendra Ro | thhaar Condo |
| | PO Box 2084 High Springs, Florida 32655 | - | |
| | magn optings, tioting 32000 | | The second secon |
| | RIDA NOTICE OF COMMENCEMENT C3.CST 01/17/20 Page | 1 of 4 | ☆DocMagi |

| | b. | Interest in property: |
|----|------------------|---|
| | c. | Name and address of fee simple title holder (if other than Owner): |
| 4. | a. | Contractor (name and address): GIBRALTAR CONTRACTING LLC 20267 NW 248TH WAY HIGH SPRINGS, FLORIDA 32643 |
| | ь. | Contractor's phone number: |
| 5. | Surety | y (if applicable, a copy of the payment bond is attached): |
| | a. | Name and address: |
| | | |
| | b. | Phone Number: |
| | c. | Amount of bond: |
| 6. | a. | Lender: CAMPUS USA CREDIT UNION 14007 NW 1ST ROAD JONESVILLE, FLORIDA 32669 |
| | b. | Lenders phone number: (352) 335-9090 |
| 7. | Person as pro | ns within the State of Florida designated by Owner upon whom notices or other document may be served wided by Section 713.13 (1) (a) 7, Florida Statutes: |
| | a. | Name and address: |
| | b. | Phone numbers of designated persons: |
| 8. | a. | In addition to himself, Owner designates |
| | | to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statues. |
| | b. | Phone number of person or entity designated by owner: |
| | | |

| 9. | Expiration date of notice of commencement (the expiration date is 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner/Lessee Kline Condo Steven

Date

Signature of Owner/Lessee Rothhaar Condo

Kendra

-

| State of FLORIDA |) | | |
|--|----------------------------|---|---------------|
| County of ALACHUA |) | | |
| Sworn to (or affirmed) and subscribed Physical Presence, OR- Online Notarization this | before me by means o | of: , 2022 Year | _ , by |
| Steven Kline Condo AND Ken | | | |
| DANIELLE M. M MY COMMISSION EXPIRES: Februa Bonded Thru Notary Pul | # HH 088544 ary 6, 2025 | Signature of Notary Public - State of Florida Danielle M. Marder Name of Notary Typed, Printed or Stamped | |
| (Place Notary Seal Stamp Ab | ove) | | |
| Produced Identification | raks ils | | |
| Type of Identification Produced: | i Drivers li | CONSES | |
| FLORIDA NOTICE OF COMMENCEMENT FLNC3.CST 01/17/20 | Page 4 of | f 4 ☆Doct | Magic |

This Instrument Prepared By: Campus USA Credit Union 14007 NW 1st Road Jonesville, Florida 32669 (352) 335-9090 After Recording Return To: CAMPUS USA CREDIT UNION 14007 NW 1ST ROAD JONESVILLE, FLORIDA 32669 [Space Above This Line For Recording Data] -Permit No .: 167817-10006-204 Tax Folio No .: NOTICE OF COMMENCEMENT STATE OF FLORIDA COUNTY OF Columbia The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement. Description of Property: Parcel 16-7S-17-10006-204 SW Marynik Dr, High Springs, Florida 32643 Lot 4 of River Rise Residential Subdivision Unit I, according to the Plat thereof as recorded in Plat Book 8, Page 51, of the Public Records of Columbia County, Florida. A.P.N.: 167S17-10006-204 General description of improvement: SINGLE FAMILY RESIDENCE Owner information or Lessee information if the Lessee contracted for the improvement: Name and address: Steven Kline Condo, Kendra Rothhaar Condo a. PO Box 2084 High Springs, Florida 32655 FLORIDA NOTICE OF COMMENCEMENT FLNC3.CST 01/17/20 **☆DocMagic** Page 1 of 4

Inst. Number: 202212009923 Book: 1467 Page: 242 Page 2 of 4 Date: 5/18/2022 Time: 12:36 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

| | b. | Interest in property: |
|-----|---------|---|
| | c. | Name and address of fee simple title holder (if other than Owner): |
| 4. | a. | Contractor (name and address): GIBRALTAR CONTRACTING LLC 20267 NW 248TH WAY HIGH SPRINGS, FLORIDA 32643 |
| | b. | Contractor's phone number: |
| 5. | Surety | (if applicable, a copy of the payment bond is attached): |
| | a. | Name and address: |
| | | |
| | b. | Phone Number: |
| | c. | Amount of bond: |
| 6. | a. | Lender: CAMPUS USA CREDIT UNION 14007 NW 1ST ROAD JONESVILLE, FLORIDA 32669 |
| | b. | Lenders phone number: (352) 335-9090 |
| 7. | | ns within the State of Florida designated by Owner upon whom notices or other document may be served vided by Section 713.13 (1) (a) 7, Florida Statutes: |
| | a. | Name and address: |
| | b. | Phone numbers of designated persons: |
| 8. | a. | In addition to himself, Owner designates |
| | | to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statues. |
| | b. | Phone number of person or entity designated by owner: |
| FLO | RIDA NO | TICE OF COMMENCEMENT 01/17/20 Page 2 of 4 \$\frac{1}{2}\text{DocMagic}\$ |

Inst. Number: 202212009923 Book: 1467 Page: 243 Page 3 of 4 Date: 5/18/2022 Time: 12:36 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

 Expiration date of notice of commencement (the expiration date is 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner/Lessee

Steven

Date

Signature of Owner/Lessee Rothhaar Condo

Kendra

Doto

Kline Condo

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Inst. Number: 202212009923 Book: 1467 Page: 244 Page 4 of 4 Date: 5/18/2022 Time: 12:36 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

| State of FLORIDA |) | | | |
|--|-----------------------|----------------------------------|-----------------------------------|------------|
| County of ALACHUA |) | | | |
| Sworn to (or affirmed) and subscribed | before me by means of | of: | | |
| Physical Presence, | | | | |
| - OR - | | | | |
| Online Notarization | | | | |
| this day of | May | | 2022 | , by |
| Date | Month | | Year | |
| DANIELLE M.N | Name of Person Mak | | naraln ublic - State of Florid | da |
| EXPIRES. Febru Bonded Thru Notary Pu | | Danielle Name of Notary Typed | M. Mavd Printed or Stamped | 0. |
| (Place Notary Seal Stamp Ab | ove) | | | |
| Personally Known Produced Identification | a alon I. | | | |
| Type of Identification Produced: | t Divers li | unses | - | |
| FLORIDA NOTICE OF COMMENCEMENT | | | | . Dan Wast |
| FLNC3.CST 01/17/20 | Page 4 of | 4 | P | DocMagic |