Inst. Number: 202212016366 Book: 1473 Page: 2233 Page 1 of 1 Date: 8/19/2022 Time: 3:34 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
00-00-00-14077-000 (42621)	
	ents will be made to certain real property, and in accordance with Section 713.13
1 Description of property Hand description 1. S. Div I	Lot 5 Blk 11 Lake Villas Addition No # 5 ORB 646-784 osa Lane Lake Ciy Fl
2. General description of improvements: Shingle r	e roof
3. Owner Information or Lessee Information if the Lesse a) Name and address: Jeannie F Hosle b) Name and address of fee simple titleholder	e contracted for the Improvements: y 472 SW Tulsarosa Lane lake City 32025 (if other than owner)
4. Contractor Information	O. Box 2147 Lake City FI 32056
b) Telephone No.: 866-959-7663  5. Surety Information (if applicable, a copy of the payment)	ent hand is attached).
b) Amount of Bond: c) Telephone No.:	
a) Name and address: NA	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
8. In addition to himself or herself, Owner designates th Section 713.13(I)(b), Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in  OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the expire is specified):	iration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROFFLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	PE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A DROED AND POSTED ON THE JOB SITE BEFORE THE FIRST INCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA COUNTY OF COLUMBIA Signature of Ow	her or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Pri	Teannie F. Hosley - Sund? nted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	a Sharida Natara akin 19 dayad Augusta
Segnie F. Hosley as Owner (Type of Aut	for clamile F. Hosley  for clamile F. Hosley
Personally Known OR Produced Identification	Type FL OL Some For Manual State of the Stat
Notary Signature Daphic Houston	nted Name and Signatory's Title/Office  Type FL OL  Notary Stamp or Seal:  Notary Stamp or Seal:
	PUBLIC, STATE ON THE OWNER OF THE PROPERTY OF