Inst. Number: 202312018746 Book: 1500 Page: 708 Page 1 of 1 Date: 10/5/2023 Time: 1:51 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:	
of the Florida Statutes, the following information is pro	
a) Street (job) Address: 333 S.W., Edgewood Lane,	OGEWOOD ESTATES S/D. 433-688, DIV CASE#2000-07-DR 896-457-461 WD 1088-1788, WD 1093-1955, Lake City, FL 32025
2. General description of improvements: Re-Roof	
	LORIA LYNN, 333 SW EDGEWOOD LNLAKE CITY, FL 32025
_	r (if other than owner)
4. Contractor Information	
 a) Name and address: Atlantic Roofing & Exteriors, L b) Telephone No.: 352-327-7663 	LLC 4739 NW 53rd Ave., Ste A, Gainesville, FL 32653
5. Surety Information (if applicable, a copy of the paym	pent bond is attached):
a) Name and address:	
c) Telephone No.:	
6. Lender	
a) Name and address:	
7. Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes: a) Name and address:	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713.13(I)(b), Florida Statutes:	he following person to receive a copy of the Lienor's Notice as provided in OF
Expiration date of Notice of Commencement (the exis specified):	spiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, DUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST PAYOTIOE, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	×/1 2 ,
COUNTY OF COLUMBIA (10.	Man Company (Southern Manager)
Signature of Ov	wner or lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
-	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	
this 5th day of October 202	(Name of Person) (Sype of Authority)
for	who is personally known OR produced identification
(name of party on behalf of whom instrument was	executed) Type ID
Notary Signature Man	(Notary Stamp or Seal) Notary Public State of Florida MaRita J Halcomb My Commission HH 329126 Expires 11/3/2026