

Clerk's Office Stamp

Inst: 201312008547 Date: 6/5/2013 Time: 11:21 AM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B:1255 P:2406

a) Street (Job) Address: 186 SW Fennigan Way LC FL 32025

carport

a) Name and address: Willett M. Hayes 186 SW Fennigan Way L.C. 32023

c) Interest in property owner

a) Name and address: owner/build

b) Telephone No.: 352-372-6597 Fax No. (Opt.) _____

a) Name and address:

b) Amount of Bond:

c) Telephone No.: _____ Fax No. (Opt.) _____

a) Name and address:

b) Phone No.

a) Name and address:

b) Telephone No.: _____ Fax No. (Opt.) _____

713.13(l)(b), Florida Statutes:

a) Name and address:

b) Telephone No.: _____ Fax No. (Opt.) _____

STATE OF FLORIDA
COUNTY OF COLUMBIA

10

Signature of Owner or Owner's Authorized Office/Director/Partner/Manager

Willet M. Hays

Printed Name _____

The foregoing instrument was acknowledged before me, a Florida Notary, this 5th day of June, 2013, by:

_____ as _____ (type of authority, e.g. officer, trustee, attorney
fact) for _____ (name of party on behalf of whom instrument was executed)

Personally Known A OR Produced Identification ✓ Type

Type

FL Delic. ²

Notary Signature

Sheila W Cassel

Notary Stamp



11. Verificait on pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing (in line #10 above.)