Inst. Number: 202112019990 Book: 1448 Page: 2480 Page 1 of 1 Date: 10/1/2021 Time: 8:55 AM 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	
NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
22-45-16-03090-102	
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13
1. Description of presents liquid	
a) Street (job) Address: 168 470 SW  2. General description of Improvements: METAL	THE TOP THE TOP TO THE CITY, FL 32024
3. Owner Information or Lessee information if the Large	ROOF
a) Name and address: MARCIA B SH.	e contracted for the Improvements: ARPE, 168 SW FRIENDSHIP WAY, LAKE CITY, FL 32024
c) Interest in croperty OWNER	(if other than owner)
Contractor Diffilliation	
a) Name and address: LEWIS WALKE	R, PO BOX 2147, LAKE CITY, FL32056
5. Surety information of applicable a constant	
b) Amount of Bond:	
o. lenger	The state of the s
a) Name and address: N/A	
b) Phone No. 7. Person within the State of Florida declarated in Co.	
712 12/11/2/7 March Control Designated by Owne	r upon whom notices or other documents may be served as provided by Serting
a) Name and address: N/A	
b) Telephone No.:	
Section 713.13(I)(b), Florida Statutes:	following person to receive a copy of the Lienor's Notice as provided in
a) Name: N/A	OF
b) Telephone No.:	
9. Expiration date of Notice of Commencement (she are)	and a second sec
PLORIDA STATUTES, AND CAN RESULT IN YOUR NOTICE OF COMMENCEMENT MUST BE BECOME	BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF R PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, R PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A EDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ICING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE OTICE OF COMMENCEMENT.
STATE OF FLORIDA	an interpretation in
COUNTY OF COLUMBIA 10.	Margan Xhann
Signature of Owner	or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
j	M < 4
Printe	rd Name and Signatory's Title/Office
	The articles of the court of th
The foregoing instrument was acknowledged before me, a	5 t 21
Maria S/a	Florida Notary, this 20 day of Supt 2021 by:
(Name of Person)	for Marcia Sharpe
(Type of Author	ity) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	Туре
A I T	A
Notary Signature Danbara (186	And Material Second of Coll. BARBARA JOHNSTON
9 43	Notary Stamp or Seal: Commission # GG 306135
	of the state of th

Bookled Thru Budget Notary Services