Inst. Number: 202312000353 Book: 1482 Page: 1633 Page 1 of 1 Date: 1/9/2023 Time: 3:46 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
03-45-14-02739-245	
of the Fibrida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description):	45 Turkey Run S/D illips Circle Lake City, FL 32024
2. General description of improvements: Kilbr UVF	'A' '
3. Owner Information or Lessee information if the Lesse a) Name and address: 0 M M \(  \text{	e contracted for the improvements: 398 SW Phillips Lir Lake City, FL (if other than owner) 32024
a) Name and address: (UMD LNU (1) b) Telephone No.: 384 - 345 - 524	nstruction to LLC 232 NW Chadley Ln Lake City, Fl 3205
<ol> <li>Surety Information (if applicable, a copy of the payme a) Name and address:</li> </ol>	ent bond is attached):
c) Telephone No.:6. Lender	··· <del>·</del>
a) Name and address:	
	er upon whom notices or other documents may be served as provided by Section
<ol> <li>In addition to himself or herself, Owner designates the Section 713.13(I)(b), Florida Statutes:</li> </ol>	e following person to receive a copy of the Lienor's Notice as provided in
a) Name:	OF
b) Telephone No.:	
<ol> <li>Expiration date of Notice of Commencement (the expired):</li> </ol>	iration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROP FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, IF PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	0 10 2
COUNTY OF COLUMBIA 10 Signature of Own	er or Lessee or Owner's or Lessee's Authorized Office/Director/Partner/Manager
$\mathcal{I}_{\mathcal{S}}$	ated Name and Signatory's Title/Office
	QH 1
The foregoing instrument was acknowledged before me,	0 10 10 10 10 10 10 10 10 10 10 10 10 10
(Name of Person) as (Type of Auth	ority) for YIMM UMSTUBING to UC.
Personally Known OR Produced Identification	Type Driver's license
Notary Signature hysuid Gdys	Notary State of Florida Ingris Geiger My Jommission GG 965389 Expires 03/04/2024