

## **Electronically Certified Official Record**

**DOCUMENT INFORMATION** 

Agency Name: Columbia County Clerk of the Circuit Court and

Comptroller

Clerk of the Circuit Court: The Honorable James M. Swisher, Jr.

**Date Issued:** 11/1/2023 12:45:13 AM

Unique Reference Number: BAA-DAAB-BCACD-CACDBCACADFE-CGIABB-G

Instrument Number: 202312020354

Requesting Party Code: 3001

Requesting Party

23ED53DA-699B-EB70-6391-065E69D4C19F-SF

## **CERTIFICATION**

Pursuant to Sections 90.955(1) and 90.902(1), Florida Statutes, and Federal Rules of Evidence 901(a), 901(b)(7), and 902(1), the attached document is electronically certified by The Honorable James M. Swisher, Jr., Columbia County Clerk of the Circuit Court and Comptroller, to be a true and correct copy of an official record or document authorized by law to be recorded or filed and actually recorded or filed in the office of the Columbia County Clerk of the Circuit Court and Comptroller. The document may have redactions as required by law.

## **HOW TO VERIFY THIS DOCUMENT**

This document contains a Unique Reference Number for identification purposes and a tamper-evident seal to indicate if the document has been tampered with. To view the tamper-evident seal and verify the certifier's digital signature, open this document with Adobe Reader software. You can also verify this document by scanning the QR code or visiting <a href="https://verify.clerkecertify.com/verifylmage">https://verify.clerkecertify.com/verifylmage</a>.

\*\*The web address shown above contains an embedded link to the verification page for this particular document.



NOTICE OF COMMENCEMENT	Clerk's Office St	атр
Tax Parcel Identification Number:		
24-3S-16-02275-105 (8103)	AND	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is pro-		accordance with Section 713.13
1. Description of property (legal description): LOT 5  — a) Street (job) Address: ZTT JW	COBBLESTONE UNIT 1. WD Bridgewater terr, I	1045-2291. WD 1065-2161.
2. General description of improvements:SHING		- 1
3. Owner Information or Lessee information if the Lesse  a) Name and address: / Cache Lesse  b) Name and address of fee simple titleholder  c) Interest in property OWNER	e contracted for the improvements: 277: WWT	3rldge waterterr. 3205
<ul> <li>4. Contractor Information</li> <li>a) Name and address: J &amp; M RESIDENT</li> <li>b) Telephone No.: (904) 337-0509</li> </ul>	IAL SERVICES, LLC 6020 Parkway	Dr N, Suite #500, Cumming, GA 30040
5. Surety Information (if applicable, a copy of the payme		
a) Name and address: N/A		
b) Amount of Bond: N/A c) Telephone No.: N/A		
6 Lender		
b) Phone No. N/A 7. Person within the State of Florida designated by Own	or upon whom notices as other documents may	he cannel or armided by Section
713.13(1)(a)7., Florida Statutes:	,	
		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
V) Telephone No.:	- Commence of the Commence of	
8. In addition to himself or herself, Owner designates the Section 713.13(I)(b), Florida Statutes:		or's Notice as provided in
a) Name: N/A	of <u>N/A</u>	
b) Telephone No.: N/A		
9. Expiration date of Notice of Commencement (the expiration date of Notice of Commencement (the expiration): N/A	piration date will be 1 year from the date of rec	ording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAE COMMENCEMENT ARE CONSIDERED IMPROIF FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOINSPECTION. IF YOU INTEND TO OBTAIN FINAL COMMENCING WORK OR RECORDING YOUR	PER PAYMENTS UNDER CHAPTER 713, UR PAYING TWICE FOR IMPROVEMENT DRDED AND POSTED ON THE JOB SITE I ANCING, CONSULT YOUR LENDER OR A	PART I, SECTION 713.13, IS TO YOUR PROPERTY; A BEFORE THE FIRST
STATE OF FLORIDA (		
	ner or Lessee, or Owner's or Lessee's Authorized  A TOLLING  inted Name and Signatory's Title/Office	d Office/Director/Rartner/Manager
The foregoing instrument was acknowledged before me	, a Florida Notary, this <u>27th</u> day of <u>Oc</u> t,	ober
Ricardo Hollingshead as owner (Type of Aut	for <u>277 NW Bridgew</u> hority) (name of party on behalf o	ater Ter, Lake City, FL 32055 of whom Instrument was executed)
Personally Known OR Produced Identification	Type <u>driver's license</u>	······································
Notary Signature	Notary Stamp or Seal:	JAYSON ALBRIGHT Notary Public-State of Florida S Commission # GG 954739 My Commission Expires
-		February 04, 2024