NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

Inst; 202212005202 Date: 03/16/2022 Time: 2:34PM Page 1 of 1 B: 1461 P: 2760, James M Swisher Jr, Clerk of Court Columbia, County, By: VC

	Dep	outy Clerk		
THE UNDERSIGNED hereby gives notice the of the Florida Statutes, the following information of the Florida Statutes				th Section 713.13
1. Description of property (legal description	mt 343 542	mysma De	_	
a) Street (Job) Address:	Lake atta	F1 32026	7 '	
2. General description of improvements:				
3. Owner Information or Lessee information	on if the Lessée contracted for	or the improvements:		
a) Name and address: 100 c	e Sesson - 31	43 Sw wil	shire dr-La	x Ke (1+7, Fi 320
O) Maine and addiess of les sill	his rinshinisi (ii Aflisi nisi)	OMILE!	-	
c) Interest in property <u>DWF</u>	<u>ver</u>	····		
. Contractor Information a) Name and address:	- CI De Como .	-2111 7	1 French	. FI 32731
b) Telephone No.:	266-3065	SHILL KEN	DIC 1-51	12, 1 2 3c 12.
Surety Information (if applicable, a copy		achad):		
a) Name and address:				
h) A	·			
c) Telephone No.:				<u> </u>
. Lender				
a) Name and address:				
b) Phone No				
. Person within the State of Florida desig	nated by Owner upon whom	notices or other docum	ents may be served as pro	ovided by Section
713.13(1)(a)7., Florida Statutes:				
a) Name and address:		<u></u>	<u> </u>	
b) Telephone No.:				
a) Name: b) Telephone No.:				
 Expiration date of Notice of Commence is specified): 	nent (the expiration date w	rill be 1 year from the da	ite of recording unless a	different date
is specialed.				
<u>VARNING TO OWNER: ANY PAYN</u>	ENTS MADE BY THE O	WNER AFTER THE EX	KPIRATION OF THE N	IOTICE OF
OMMENCEMENT ARE CONSIDER	ED IMPROPER PAYMEI	NTS UNDER CHAPTE	R 713, PART I, SECTIO	ON 713.13,
LORIDA STATUTES, AND CAN RES				
OTICE OF COMMENCEMENT MU				
ISPECTION, IF YOU INTEND TO O			R OR AN ATTORNEY	BEFORE
OMMENCING WORK OR RECORD	ING TOOK NOTICE OF	COMMENCEMENT.		
TATE OF FLORIDA	4-1	4		
OUNTY OF COLUMBIA	10.	\circ		
Sig	nature of Owner or Lessee, e	or Owner's or Lessee's A	uthorized Office/Director	/Partner/Manager
	C/_	rue Perr	-1	
	Printed Name and	d Signatory's Title/Office		
			۸. ۸	
ne foregoing instrument was acknowledg	ed before me, a Florida Not:	ary this 16th day	, March	20 22 hr.
- A (O.			**************************************	, , wy.
redrick kerry as	ser	for_UIA	 	····································
(Name of Person)	(Type of Authority)	(name of party on	behalf of whom instrum	ent was executed)
		21		
rsonally Known OR Produced Iden	tification Type	27		7 63
$\sim \sim \sim$	1.			MELICON CARDED

Notary Stamp or Seal:

MY COMMISSION # GG 952236 EXPIRES: January 28, 2024 Bonded Thru Notery Public Underwriters