Inst. Number: 202112017956 Book: 1446 Page: 1683 Page 1 of 1 Date: 9/3/2021 Time: 11:07 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	Clerk's Office Stamp
Tax Parcel Identification Number:	
24-38-16-02275-132	
97-35-10-03015-132	
of the Florida Statutes, the following information is prov	
1. Description of property (legal description): 64 3 a) Street (job) Address: 63 NW Am	DER Ct., Lake City, Fl 32055
2. General description of improvements: RE-R	DOF
o) ivame and address of ree simple titleholder	ha Bridgeman 163 NW AMBER Ct., Lake City, (if other than owner) F2 32055
c) Interest in property	thng 10153 W. Hwy .90, Lake City Fl
a) Name and address: ENCRGU ROL	shog 10153 W. Hay 90, Lake City Fl
b) Telephane No.: 386-867	32055
Surety Information (if applicable, a copy of the payme	ent bond is attached):
a) Name and address:	
b) Amount of Bond: c) Telephone No.:	
6. Lender	
a) Name and address:	
b) Phone No.	
	er upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes: a) Name and address:	
b) Telephone No.:	
8. In addition to himself or herself, Owner designates the	e following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	
	OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the exp is specified):	iration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
COMMENCEMENT ARE CONSIDERED IMPROP FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, JR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A JRDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA	2
COUNTY OF COLUMBIA 10.	David L. 15 Balla as Ma
	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
·	
	VAVId L. BRidgeman
Pri	nted Name and Signatory's Title/Office
	å
The foregoing instrument was acknowledged before me,	
David Bridgerai as Owne	for Seld
(Name of Person) (Type of Auth	nority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	Type
	TIT -

Notary Signature	Notary Stamp or Seal: Notary Public State of Florida
N "	Susan L Nicklas My Commission GG 932575 Expires 11/17/2023