Inst. Number: 202212023812 Book: 1481 Page: 598 Page 1 of 1 Date: 12/15/2022 Time: 12:13 PM 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:	
34-35-16-02462-221(10161)	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13
•	Oax Meadow Plantation Unit 2 8/6-24/2, WD 1009-278 ISTERIA Drive LAKE CITY & 32055
2. General description of improvements: De-Nut	STATE OFFICE CARE CITY, FE SECSIS
 b) Name and address of fee simple titleholder 	e contracted for the improvements: Dr. / Ake (i.ty, FL 32055) (if other than owner)
4. Contractor Information a) Name and address: Every lus b) Telephone No.:	ing Po Box 3187 LAKE (ity, KL 32056
5. Surety Information (if applicable, a copy of the paym	ent bond is attached):
c) Telephone No.:	
6. Lender a) Name and address:	
b) Phone No	
713.13(1)(a)7., Florida Statutes: a) Name and address:	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713.13(I)(b), Fiorida Statutes:	ne following person to receive a copy of the Lienor's Notice as provided in
a) Name:	OF
Expiration date of Notice of Commencement (the expire specified):	piration date will be 1 year from the date of recording unless a different date
	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC	PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA	Iller
COUNTY OF COLUMBIA 10	her or Jessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Signature of Ow	\setminus \mathcal{L} \mathcal{L}
-	Tosi Keyes
Pr	inted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, a Florida Notary, this 15 day of De Cember 20 22 by:
(Name of Person) (Type of Au	thority) for Self-thority (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	
^	
Notary Signature Restiean Siagno	Notary Stamp or Seal: Notary Public State of Florida Lestieann H Piazza My Commission HH 115097 Expires 04/07/2025