NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

36-35-16-02626-010

Clerk's Office Stamp

Inst: 202512025506 Date: 11/06/2025 Time: 11:40AM Page 1 of 1 B: 1553 P: 1584, James M Swisher Jr, Clerk of Court

Type ID ____

Columbia, County, By: VCW

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT .
1. Description of property (legal description): Beg SE COR of SEC Run V 40ff a) Street (job) Address: 1740 w us high uny 90 caucaty
2. General description of improvements:
3. Owner Information or Lessee information if the Lessee contracted for the improvements: a) Name and address: Anking Ravindra 6311 5E Country club rd Callectry b) Name and address of fee simple titleholder (if other than owner) c) Interest in property
A Contractor Information
a) Name and address: Nic Tyre 5813 NW Lake Seffry rol 32085 b) Telephone No.: 386 365 8690
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address:
b) Amount of Bond:
6. Lender
a) Name and address:
b) Phone No
b) Telephone No.:
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(I)(b), Florida Statutes: a) Name:OF
9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified):
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA
COUNTY OF COLUMBIA 10. Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager ALEXANDER MITCHELL
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager ALEXANDER MITCHELL
* Commission # HH 493761
Printed Name and Signatory's Title/Office
Timed Harie and Signatory 3 Hilley Office
The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, a Florida Notary,
this 5 day of November, 20 25, by: Me Tyre as sworn
(Name of Person) (Type of Authority)