Inst. Number: 202412009449 Book: 1513 Page: 2561 Page 1 of 1 Date: 5/6/2024 Time: 3:36 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:	
33-35-16-02438-121	
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 vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): Lot 2	ll Emerald Cove S/D PHS 1. odleaf Ct. Lake City, FL 32024
2. General description of improvements: Replacement or Sceen Room Cholosure in accordance with engineering	
<ul> <li>b) Name and address of fee simple titlefolder</li> <li>c) Interest in property <u>OWNEX</u></li> </ul>	e contracted for the improvements:  185 Sw Woodleaf Ct, Lake City, FL  (if other than owner)
4. Contractor Information a) Name and address: Cestoration S b) Telephone No.: 352-732-3	pecialists 244 NW 9th St. Ocala, FL 34475
<ol> <li>Surety Information (if applicable, a copy of the payma)</li> <li>Name and address:</li> </ol>	ent bond is attached):
c) Telephone No.:	
6. Lender a) Name and address: b) Phone No	
<ol> <li>Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes:</li> </ol>	er upon whom notices or other documents may be served as provided by Section
Section 713.13(I)(b), Florida Statutes:	ne following person to receive a copy of the Lienor's Notice as provided in
b) Telephone No.:	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 Signature of Ow	Sacret of Lessee, or Owner's or Lessee's Suthorized Office/Director/Partner/Manager
<u>C</u> Pr	Frace E Woright inted Name and Signatory's Title/Office
	e, a Florida Notary, this 25 th day of March 2024 by:
(Name of Person) as owner (Type of Au	for thority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	Type DL
Notary Signature	RYAN T. KINCHNEMP Seal:  Notary Public State of Florida  Seal:  RYAN T. KINCHNEMP SEA!  RYAN T. KINCHNE
	Commission # HH 256693  My Commission Expires  April 24, 2026