NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

\(\sqrt{201312006166}\) Date 4/23/2013 Time 11 28 AM \(\sqrt{201312006166}\) DC, P DeWitt Cason, Columbia County Page 1 of 1 B.1253 P 1156

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):	+ 15 English Acres SIA Church Hill Way Lake City F1 32025
	00 F
3. Owner Information a) Name and address: 100000000000000000000000000000000000	ner 1515W Church Hill Wy Lake City \$132015 er (If other than owner) NA Nather Roofing In Angles Fax No. (Opt.) 386 496 0925
b) Telephone No: 8100 950	1 1663 Fax No. (Opt.) 386 496 0925
5. Surety Information a) Name and address:	
b) Amount of Bond: c) Telephone No.:	Fax No. (Opt.)
6. Lender a) Name and address:	
a) Name and address:	1) [7]
7. Identity of person within the State of Florida designa	ated by owner upon whom notices or other documents may be served:
a) Name and address: b) Telephone No.:	Fax No. (Opt.)
8. In addition to himself, owner designates the followin 713.13(I)(b), Florida Statutes: a) Name and address: b) Telephone No.:	
Expiration date of Notice of Commencement (the exits specified):	piration date is one year from the date of recording unless a different date
IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SIMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF C	OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR OMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
STATE OF FLORIDA	
COUNTY OF COLUMBIA	10. Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
	Printed Name
The foregoing instrument was acknowledged before me , a	11th N. 12
	riorida Notary, tris
Lodd LWagner as	(type of authority, e.g. officer, trustee, attorney
fact) for	(name of party on behalf of whom instrument was executed).
Personally Known OR Produced Identification	Type FLDL
Notary Signaturo	Notary Stamp or Seal.
Ŷ»	FAME
11. Verification pursuant to Section 92.525, Florida S the facts stated in it are true to the best of my ki	Statutes. Under penalties of perjury, I declare that I have read the foregoing and that

BARBARA DOONAN Notary Public, State of Florida Commission# EE 109607 My comm. expires Aug. 10, 2015 Signature of Natural Person Signing (In line #10 above.)