This Instrument Prepared By: Campus USA Credit Union 14007 NW 1st Road Jonesville, Florida 32669 (352) 335-9090

After Recording Return To: CAMPUS USA CREDIT UNION 14007 NW 1ST ROAD JONESVILLE, FLORIDA 32669

| Permit N | Space Above This Line For Recording Data |
|--------------------|--|
| | NOTICE OF COMMENCEMENT |
| STATE | OF FLORIDA |
| COUNT | Y OF Columbia |
| The und Chapter | ersigned hereby gives notice that improvement will be made to certain real property, and in accordance with 713, Florida Statutes, the following information is provided in this Notice of Commencement. |
| <u>Lo</u> in | scription of Property: _SW Otter Lane #Lot 77, FORT WHITE, FLORIDA 32038 t 77, Sassafras Acres, according to the map or plat thereof, as recorded Plat Book 4, Page(s) 8, of the Public Records of Columbia County, Florida. P.N.: 19-7S-17-10024-077 |
| 2. G e | neral description of improvement: SINGLE FAMILY RESIDENCE |
| 3. Ov | oner information or Lessee information if the Lessee contracted for the improvement: |
| a. | Name and address: Kurtis S Udelhofen and Elizabeth Dominguez 17016 NW 244th St High Springs, Florida 32643 |
| FLORIDA FLNC3 C | NOTICE OF COMMENCEMENT ST .01/17/20 Page 1 of 4 |



| b. Interest in property: | | Interest in property: | | |
|--------------------------|--------|--|--|--|
| | c. | Name and address of fee simple title holder (if other than Owner): | | |
| | ٠. | Traine and address of fee simple title notice (if other titler owner). | | |
| | | | | |
| 4. | a. | Contractor (name and address): KG CONSTRUCTION LLC | | |
| | | 7490 NE 30 ST | | |
| | | HIGH SPRINGS, FLORIDA 32643 | | |
| | b. | Contractor's phone number: | | |
| 5. | Surety | (if applicable, a copy of the payment bond is attached): | | |
| | a. | a. Name and address: | | |
| | | | | |
| | | | | |
| | b. | Phone Number: | | |
| | | Amount of bond: | | |
| | c. | Allount of bond, | | |
| 6. | a. | Lender: CAMPUS USA CREDIT UNION | | |
| | | 14007 NW 1ST ROAD | | |
| | | JONESVILLE, FLORIDA 32669 | | |
| | | | | |
| | b. | Lenders phone number: <u>(352) 335-9090</u> | | |
| 7. | | ns within the State of Florida designated by Owner upon whom notices or other document may be served vided by Section 713.13 (1) (a) 7, Florida Statutes: | | |
| | | Name and address: | | |
| | a. | Name and address. | | |
| | | | | |
| | | | | |
| | b. | Phone numbers of designated persons: | | |
| _ | | | | |
| 3. | | | | |
| | | of to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statues. | | |
| | | (1) (2), 1 - 11-14 Similar Sim | | |
| | b. | Phone number of person or entity designated by owner: | | |
| | | | | |

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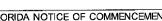
Inst. Number: 202512014766 Book: 1543 Page: 1475 Page 3 of 4 Date: 6/27/2025 Time: 1:22 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

> Expiration date of notice of commencement (the expiration date is 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner/Lessee Kurtis S Udelhofen

Elizabeth Dominguez



| State of FLORIDA |) | |
|--|---------------------------|--|
| County of ALACHVA |) | |
| Sworn to (or affirmed) and subscribe | ed before me by means of: | |
| Physical Presence, | | |
| - OR - | | |
| Online Notarization, | | |
| this 27th day of | June Month | , <u>2025</u> , by <i>Year</i> |
| Kurtis S Udelhofen | | |
| | | |
| | | |
| KYŁE PATRICK POLANSI Commission # HH 202583 Expires March 27, 2026 | | re of Notary Public - State of Florida LE POLANDLY |
| | Name o | of Notary Typed, Printed or Stamped |
| (Place Notary Seal Stamp | Above) | |
| Personally Known Produced Identification | | |
| Type of Identification Produced: | Invis Liense | |
| | | |
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