County Clerk's Office Stamp or Seal Tax Parcel Identification Number 07-5S-16-03485-004 (17065)
THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Horida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.
1 Description of property (legal description) E1/2 OF NE1/4, EX BEG NW COR OF NE1/4 OF NE1/4, RUN S 1382 61 FT, E 533 42 FT, N 219 76 FT, W 69 76 FT, N 1135 70 FT TO S R/W OF LEE DAIRY RD, W ALONG R/W 467 64 FT TO POB 967-2116,
a) Street (job) Address2274 SW DAIRY ST, LAKE CITY, FL 32024
2. General description of improvements: RE-ROOF
3. Owner Information
 a) Name and address: <u>DONALD & MICHELLF COX</u>, 2274 SW DAIRY ST, LAKE CITY, FL 32024 b) Name and address of fee simple titleholder (if other than owner) <u>N/A</u>
c) Interest in property
4. Contractor Information
a) Name and address:O`Neal Roofing, PO Box 2166, Lake City FL 32056
b) Telephone No 386-752-7578 Fax No (Opt.)386-755-0240
5. Surety Information a) Name and addressN/A
b) Amount of Bond:
c) Telephone No Fax No (Opt.)
6 Lender
a) Name and address:N/A
7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served
a) Name and address:N/A Fax No (Opt)
b) Telephone No.: Fax No (Opt)
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713-13(1)(b). Florida Statutes
a) Name and address. N/A
9. Expiration date of Notice of Commencement (the expiration date is one 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 DOWN OF ALL
Signature of Owner or Owner s Authorized Office Director Partner/Manager
Print Name Donald Cox
The foregoing instrument was acknowledged before me, a Florida Notary, this $\frac{22 \text{ M}}{22 \text{ M}}$ day of September . 20.23 by
Donald COX as DWNEV (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 FL Driver's Licence
Notary Signature Church Commission # HH 013756 Expires July 20, 2024 Ended Thru Tray Fain Insurance 800-385-7019
11 Verification pursuant to Section 92 525. Florida Statutes Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief
NUMANIO 7

Signature of Natural Person Signing (in line #10 above)