

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 35-3S-16-02574-001

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): COMM SW COR OF NW 1/4 OF SE 1/4 RUN N 212.28 FT, E 226.30 FT TO INTERS OF BROOKSIDE AVE & CL EASTSIDE DR, RUN E ALONG CL 273 FT, NE 308.05 FT TO END OF EASTSIDE DR, NE ALONG CL OF EASTSIDE DR EXTENDED 305 FT, E 26.16 FT TO E ROW, RUN N ALONG E ROW 347.92 FT FOR POB, RUN N 321.12 FT, E 245 FT, S 327.50 FT, W 225.95 FT TO POB, BEING PARCEL #3 BLOCK C BROOKSIDE SID & ALSO LOT 4 BLOCK C BROOKSIDE SID, & COMM NE COR OF SW 1/4 OF NE 1/4, RUN S 8 DEG W 888.88 FT, N 70 DEG W 471.88 FT, S 8 DEG W 747.88 FT TO N LINE OF A 60 FT EASEMENT, W 180.29 FT, N 157.28 FT, W 2.21 FT, N 8 DEG E 1109.25 FT, E 657.98 FT TO POB, & COMM AT INTERS OF EAST LINE OF BROOKSIDE SID & N ROW OF S HWY 90, RUN NE 856.96 FT FOR POB, CONT NE 518.67 FT, E 100 FT, SW 532.33 FT, W 100 FT TO POB, & PARCEL 5 BLOCK C BROOKSIDE SID 945-675, 1008-2709, 1014-1919, PB 1284- 1029, DC 1293-23, PB 1327-300, PB 1350-2548, PB 1353-209, PB 1355-113, 120, 142,

a) Street (Job) Address: 317 NW STREAMSIDE CT, LAKE CITY, FL 32055

2. General description of improvements: GARAGE REMODEL TO BEDROOM SUITE

3. Owner Information

- a) Name and address: BRUCE AND JENNY DRAWDY, 317 NW STREAMSIDE CT., LAKE CITY, FL 32055
b) Name and address of the simple titleholder (if other than owner) _____
c) Interest in property _____

4. Contractor Information

- a) Name and address: O'Neal Contracting, Inc., PO Box 3505, Lake City FL 32056
b) Telephone No.: 386-752-7573 Fax No. (Opt.): 386-755-0240

5. Surety Information

- a) Name and address: N/A
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.): _____

6. Lender

- a) Name and address: N/A
b) Phone No. _____

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
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
b) Telephone No.: _____ Fax No. (Opt.): _____

9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified):

N/A

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

Jenny Scalf Drawdy
Signature of Owner or Owner's Authorized Officer/Designated Person/Manager
Jenny Scalf Drawdy
Print Name

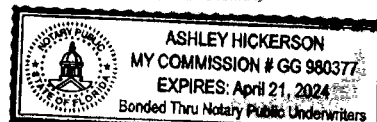
The foregoing instrument was acknowledged before me, a Florida Notary, this 29 day of October, 2020, by

Jenny Scalf Drawdy as owner (type of authority, e.g., officer, trustee, attorney)

Es(s) for _____ (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Photocopy Identification _____ Type _____

Notary Signature Ashley Hickerson Notary Stamp or Seal:



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.

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