Inst. Number: 202212008312 Book: 1465 Page: 991 Page 1 of 1 Date: 4/28/2022 Time: 8:19 AM 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 Clark's Office Stamp Tax Parcel Identification Number: 12-4S-16-02947-022 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. LOT 22 CANNON CREEK AIR PARK S/D. ORB 520-275, 562-435, 967-476, 1. Description of property (legal description): DC JAMES CLOEREN 967- 478, WD 1173-2638, a) Street (Job) Address: 343 SW AIRPARK GLN, LAKE CITY, FL 32025 2. General description of improvements: REROOF b) Name and address of fee simple titleholder (if other than owner)_ c) Interest in property OWNER 4. Contractor Information a) Name and address: LEWIS WALKER, PO BOX 2147, LAKE CITY, FL 32056 b) Telephone No.: 866-959-7663 5. Surety Information (if applicable, a copy of the payment bond is attached): a) Name and address: b) Amount of Bond: c) Telephone No.: 5. Lender a) Name and address: N/A 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section a) Name and address: N/A b) Telephone No.: 8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in a) Name: b) Telephone No.: 9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date 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 Owner or Lessee, or Owner s or Lessee's Authorized Office/Director/Partner/Manager Printed Name and Signatory's Title/Office The foregoing instrument was acknowledged before me, a Florida Notary, this OWINA (Name of Person) (Type of Authority) Personally Known OR Produced identification

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