NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

36-55-16-03761-150

Clerk's Office Stamp

Inst: 202512001511 Date: 01/27/2025 Time: 11:31AM
Page 1 of 1 B: 1531 P: 2547, James M Swisher Jr, Clerk of Court
Columbia, County, By: VC

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. 3. Owner Information or Lessee information if the Lessee contracted for the improvements:

a) Name and address: Timothy J HARVEY 51 BEERE RIVER RD CAMPTON NH 03 223

b) Name and address of fee simple titleholder (if other than owner) c) Interest in property OWNER 4. Contractor Information a) Name and address: _OWNER b) Telephone No.: 1603 - 776 - 6050

5. Surety Information (If applicable, a copy of the payment bond is attached): a) Name and address: b) Amount of Bond: c) Telephone No.: 6. Lender a) Name and address: b) Phone No. 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes: a) Name and address: 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 Section 713.13(I)(b), Florida Statutes: 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 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 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 30 day of 0000 2000 120 by: __ as ____ (Type of Authority) (name of party on behalf of whom instrument was executed) Personally Known ____ OR Produced Identification V Type NH DL WENDY COODY

Notary Stamp or Sea

Notary Public - State of Florida Commission # HH 531133 My Comm. Expires May 27, 2028