Inst. Number: 202312019232 Book: 1500 Page: 1981 Page 1 of 1 Date: 10/13/2023 Time: 12:41 PM 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	Clerk's Office Stamp
Tax Parcel Identification Number:	
24-35-16-02275-068	
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 .	
a) Street (job) Address: 159 NW COMPTON CT LAK	
General description of improvements: Weroor	e contracted for the improvements:
a) Name and address: RAFAEL TRESPALACIOS 159 NW COMPTON CT LAKE CITY. FL 32055 b) Name and address of fee simple titleholder (if other than owner)	
a) Name and address: MICHAEL TOWNE 179 ATHE b) Telephone No.:	
5. Surety Information (if applicable, a copy of the payme	ent bond is attached):
b) Amount of Bond:	
e) Telephone No.:6. Lender	
b) Phone No	
713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
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.:	OF
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 10. 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, by means of physical presence or online notarization, a Florida Notary,	
	3 by: William Muncy as OWNer (Name of Person) (Type of Authority)
for(name of party on behalf of whom instrument was	who is personally known OR produced identification
Notary Signature Mule Ju	Type ID ASHLEY SUGGS MY COMMISSION # HH 013624 EXPIRES: June 23, 2024 Bonded Thru Notary Public Underwriters