Inst. Number: 202112012596 Book: 1440 Page: 1931 Page 1 of 1 Date: 6/24/2021 Time: 10:58 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	Clerk's Office Stamp
Tax Parcel Identification Number:	
27-55-17-09415-114	
of the Florida Statutes, the following information is pro	ivided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): Lb+ a) Street (job) Address: 268 Sw Cy 2 General description of improvements: Pon E 844	that improvements will be made to certain real property, and in accordance with Section 713.13 formation is provided in this NOTICE OF COMMENCEMENT. Indiana. Let 14 My Orbit. place S/D WO.10-23-2435-001427-457 8 Sow Cyp15%-web. Silen Letter City, EL WO.10-23-2435-001427-457 18 Sow Cyp15%-web. Silen Letter City, EL WO.10-23-2435-001427-457 Indiana of the payment bond is attached]: 18 Sow Cyp15%-web. Silen Letter City, EL WO.10-23-2435-001427-457 Indiana of the payment bond is attached]: 18 Sow Cyp15%-web. Silen Letter City, EL WO.10-23-2435-00142-157 Indiana of the payment bond is attached]: 18 Sow Cyp15%-web. Silen Letter City, EL WO.10-23-2435-00142-157 Indiana of payments with the payments with the payments of the control of the payment bond is attached]: 18 Sow Cyp15%-web. Silen Letter City, EL WO.10-23-2435-00142-157 Indiana of payments with the payments with the payments of the payments with the payments with the payments of the payments with the payments with the payments with the payments of the payments with the payments
3. Owner information or Lessee information if the Lessi	se contracted for the Improvements:
a) Name and address: Pow WATSON b) Name and address of fee simple titleholde c) letometria account. Of the first feet and address of feet simple titleholde.	er (if other than owner) 34~6
4. Contractor Information 8) Name and address: BYRA'S EYE ROOF!	NO PO. BOT 402 BRANFORD, FL
2. Suieth juiolimation ist applicable, a coby or one basis	icit boud B statutelle.
b) Amount of Band: c) Telephone No.:	
7. Person within the State of Florida designated by Ow	ner upon whom notices or other documents may be served as provided by Section
a) Name and address: b) Telephone No.:	
e was abilital flacida Controper	
a) Name: b) Telephone No.:	OF
Expiration date of Notice of Commencement (the exist specified):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILED FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECLINSPECTION. IF YOU INTEND TO OBTAIN FIN	PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION:/13.13, DUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA COUNTY OF COLUMBIA	Den Joseph of Durar's or Lassee's Authorized Office/Director/Partner/Manager
	DONALD C. WATSON
(Maine of Control of C	for <u>Unadd Watson</u> (name of party on behalf of whom Instrument was executed)
Personally KnownOR Produced Identification Notary Signature CREATE	Notary Stamp or Seal: Notary Stamp or Seal: Notary Public State of Florida Commit HH099438