Inst. Number: 202012013595 Book: 1417 Page: 1258 Page 1 of 1 Date: 8/18/2020 Time: 3:46 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:	
16-45-16-03025-106	
16-42-16-02022-106	
of the Florida Statutes, the following information is are	erits will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description):	6 1) readay (Ista SID)
2. General description of improvements:	6 Meadaw Vista SID antasy Sin, Lake City FI 32024 round Swimming Joo 1
3. Owner Information or Lessee information if the Lesse  a) Name and address: LUKE E D  b) Name and address of fee simple titleholder  c) Interest in property	any Thompson, 243 SW Fantacy Gln, Lake Grafforthan owner) FL32024
4. Contractor Information	TONE 21 NOTE CL. LOVE CL. TI 20055
a) Name and address: \$1500 L.+ b) Telephone No.: (380) 292-0	rate, 346 NW Try Glen, Lake Cety, FL32055
5. Surety Information (if applicable, a copy of the payment)	ent bond is attached):
o) Telephone No.:	
a) Name and address: T.I.AA	
b) Phone No.  7. Person within the State of Florida designated by Own	er upon whom notices or other documents may be served as provided by Saction
713.13(1)(a)7., Florida Statutes:	
b) Talephone No.:	
	e following person to receive a copy of the Lienor's Notice as provided in
Section 713.13/H/b), Florida Statuter:	
a) Name: b) Telephone No :	OF
Expiration date of Notice of Commancement, (the expire is specified):	piration 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 10. X	regoritessee or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Luke Thomason
	inted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	, a Florida Notary, this 6th day of August 20, by:
Luke Thomason: Ou	There is J
(Name of Person) (Type of Aut	hority) (name of party on behalf of whom instrument was executed)
Personally Known V OR Produced Identification	
1	Susan Lee Fraze NOTARY PUBLIC
Notary Signature Susan &	Notary Stamp or Seal: STATE OF FLORIDA
, , , , , , , , , , , , , , , , , , , ,	Comm# GG911469 Expires 12/16/2023