Inst. Number: 202312002431 Book: 1484 Page: 1527 Page 1 of 1 Date: 2/13/2023 Time: 12:47 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:	
32-2S-16-01809-122(5909)	
THE UNDERSIGNED hereby gives notice that improver of the Florida Statutes, the following information is proved the statutes of the following information is proved the statutes of the following information is proved the following information in the following information is proved the following information in the following information is proved the following information in the following information in the following information is proved the following information in the following information in the following information is proved the following information in the following information is proved the following information in the following information is proved the following information in the following information is proved the following information in the following information is proved the following information in the following information is proved the following information in the following information is proved the following information in the following informa	ments will be made to certain real property, and in accordance with Section 713.13 rovided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): LOT 22 II	NDIAN RIDGE S/D PHS 1, WD 1177-2425, WD 1188-1464, WD 1350-544  IAN RIDGE LN, LAKE CITY, FL 32055
a) Street (Job) Address: 420 INVV INDI  2. General description of improvements: ROOF-OVER	IAN RIDGE LIV. LAKE CITT, PL 32033
3. Owner Information or Lessee information if the Les	see contracted for the improvements: S LAURIE 426 NW INDIAN RIDGE LN, LAKE CITY, FL 32055
b) Name and address of fee simple titlehold	ler (if other than owner)
a) Name and address: LEWIS WALKER F	PO BOX 2147 LAKE CITY, FL 32056
b) Telephone No.: 866-959-7663  5. Surety Information (if applicable, a copy of the paying the payi	ment bond is attached):
a) Name and address:	
b) Amount of Bond: c) Telephone No.:	
5. Lender '	
a) Name and address: b) Phone No	
	wner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:	
b) Telephone No.:	
3. In addition to himself or herself, Owner designates Section 713.13(I)(b), Florida Statutes:	the following person to receive a copy of the Lienor's Notice as provided in
a) Name:	OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the e     is specified):	expiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILED FLORIDA STATUTES, AND CAN RESULT IN YOUR OFFICE OF COMMENCEMENT MUST BE REC	ADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, OUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA COUNTY OF COLUMBIA 10	wner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
TATE OF FLORIDA COUNTY OF COLUMBIA 10	fll the
TATE OF FLORIDA COUNTY OF COLUMBIA 10 Signature of O	wher or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  RANDAL L BARNES  Printed Name and Signatory's Title/Office
TATE OF FLORIDA OUNTY OF COLUMBIA Signature of O	wher or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  RANDAL L BARNES  Printed Name and Signatory's Title/Office
TATE OF FLORIDA OUNTY OF COLUMBIA 10 Signature of O	Printed Name and Signatory's Title/Office  day of February
TATE OF FLORIDA  OUNTY OF COLUMBIA  Signature of O  Find the foregoing instrument was acknowledged before many the foregoing instrument was acknowledged by the foregoing inst	Printed Name and Signatory's Title/Office  day of February
STATE OF FLORIDA  COUNTY OF COLUMBIA  Signature of O  Figure 10.  Signature of O  Figure 10.  Signature of O	Printed Name and Signatory's Title/Office  day of February 120 23 . by:
TATE OF FLORIDA  COUNTY OF COLUMBIA  Signature of O  Figure 10.  Signature of O  Signature of O  Figure 10.  Figure 10.  Signature of O  Signa	Printed Name and Signatory's Title/Office  day of February 20 33 .by:
TATE OF FLORIDA  COUNTY OF COLUMBIA  Signature of O  Figure 10.  Signature of O  Signature of O  Figure 10.  Figure 10.  Signature of O  Signa	Printed Name and Signatory's Title/Office  day of February 20 33 . by:
The foregoing instrument was acknowledged before m  (Name of Person)  The STATE OF FLORIDA  10.  Signature of O  Signature of O  Signature of O  (Type of Article 1)	where or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  PANON L BARNES  Printed Name and Signatory's Title/Office  The printed Notary, this day of February 20 23 by:  The printed Notary, this day of February 20 23 by:  The printed Notary, this day of February 20 23 by:  The printed Notary and Signatory's Title/Office  The printed Notary and Signatory and Si