NOTICE OF COMMENCEMENT	Cler	k's Office Stamp
Tax Parcel Identification Number:		
31-3S-18-10332-000		
0.000.000		
THE UNDERSIGNED hereby gives notice that improvem of the Florida Statutes, the following information is pro-	nents will be made to certain real prope ovided in this NOTICE OF COMMENCEN	erty, and in accordance with Section 713.13 MENT.
Description of property (legal description): a) Street (job) Address:		
2. General description of improvements: New liquid familizar but	ilding	
3. Owner Information or Lessee information if the Less a) Name and address: COG Marketers LTD 3065 W M-21, St. Jo	ohns, MI 48879	
b) Name and address of fee simple titleholde c) Interest in property Real Estate Holding Company	er (if other than owner)	
4. Contractor Information		
a) Name and address: Greystone Construction b) Telephone No.: 952-496-2227	on Company	2995 Winners Circle Drive, Suite 200, Shakopee, MN 55378
S. Surety Information (if applicable, a copy of the payment bond is attached): a) Name and address: b) Amount of Bond:		
b) Amount of bond.		
c) Telephone No.:		
a) Name and address:		
b) Phone No. 7. Person within the State of Florida designated by Owr	ner upon whom notices or other docum	gents may be somed as provided by Santian
713.13(1)(a)7., Florida Statutes:		
a) Name and address:b) Telephone No.:		
 In addition to himself or herself, Owner designates the Section 713.13(I)(b), Florida Statutes: 	ne following person to receive a copy of	f the Lienor's Notice as provided in
a) Name:	OF	
b) Telephone No.:		
 Expiration date of Notice of Commencement (the expires specified): 	piration date will be 1 year from the da	ate of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROFFLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOINSPECTION. IF YOU INTEND TO OBTAIN FINAL COMMENCING WORK OR RECORDING YOUR	PER PAYMENTS UNDER CHAPTE UR PAYING TWICE FOR IMPROV DRDED AND POSTED ON THE JO ANCING, CONSULT YOUR LENDE	R 713, PART I, SECTION 713.13, /EMENTS TO YOUR PROPERTY; A /B SITE BEFORE THE FIRST
STATE OF FLORIDA	· 1/0/	- /2
COUNTY OF COLUMBIA	by this of	/ PRESIDENT
Signature of Owr	ner or Lessee, or Owner's or Lessee's A	uthorized Office/Director/Partner/Manager
<u>""</u> _		ANCROFT
Prin	nte'd Name and Signatory's Title/Office	
The foregoing instrument was acknowledged before me,	Michigan a Florida Notary, this 4th day of	of April 20,25 by:
(Name of Person) (Type of Auth	for COG M nority) (name of party on	behalf of whom instrument was elecuted)
Personally Known OR Produced Identification	Түре	
A LNC.		WY COMMONON
Notary Signature Both A Simo		EXPINES .
	BETH A SIMON Notary Public - State of Mich County of Clinton My Commission Expires Oct 6, Acting in the County of Citicals	2028