Inst. Number: 202412008276 Book: 1512 Page: 2656 Page 1 of 1 Date: 4/23/2024 Time: 8:09 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:	
33-35-17-06364-000	
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.	
1. Description of property (legal description): 33-35-17-06364-000  a) Street (job) Address: 80 NE Bellair PL. Lake City, FL	
2 General description of improvements: MI+CI Cont c 0/1C	
3. Owner Information or Lessee information if the Lesse a) Name and address:	ce contracted for the improvements: CE P.O. BOX 3443 Lake City, FL 320.56  r (if other than owner)
b) Telephone No.: 386-205-38	32025
5. Surety Information (if applicable, a copy of the paym a) Name and address:	ent bond is attached):
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5 Lender	
a) Name and address: MA b) Phone No	
713.13(1)(a)7., Florida Statytes;	ner upon whom notices or other documents may be served as provided by Section
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(/)(b), Florida Statutes:	
a) Name:///t 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	CX a Malica
COUNTY OF COLUMBIA 10	rner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Lanell Grice / Owner
Pr	inted Name and Signatory's Title/Office
	e a Florida Notary this 22nd day of April 2024 by:
The foregoing instrument was acknowledged before me, a Florida Notary, this do day of / \Pri 20db by:	
(Name of Person) (Type of Aut	for
Personally KnownQR Produced Identification	Type License
Notary Signature Land J. Cal	Notary Stamp or Seal:  DANIEL J. CARLUCCI MY COMMISSION #HH024545 EXPIRES: JUL 28, 2024 Bonded through 1st State Insurance