Inst. Number: 202212009616 Book: 1466 Page: 2228 Page 1 of 1 Date: 5/16/2022 Time: 10:19 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:	
19-45-16-03061-003 (14293)	
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): 19-9 a) Street (job) Address: 65-5-65-65-65-65-65-65-65-65-65-65-65-65	5-16-03061-003 (14293) iza Ln. Lake City roof-over
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: Michael Mully 6/5 SW Giza Ln. Lake City  b) Name and address of fee simple titleholder (if other than owner)  c) Interest in property OWNEY  4. Contractor information  a) Name and address: Nicholas Carlucc. 268 SE Press Ruth Or. 32025  b) Telephone No.: 386-209-0850  5. Surety Information (if applicable, a copy of the payment bond is attached):  a) Name and address: NA  b) Amount of Bond:  c) Telephone No.:  6. Lender  a) Name and address: MA  b) Phone No.	
b) Phone No	
a) Name: //// b) Telephone No.:	
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.	
10	er or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Prin	Nicholas Carlucci ted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me, a Florida Notary, this 13th day of May 2022 by:  \[ \langle \text{Cholas Carlucci} \text{ as Contractor} \text{ for } \]  (Name of Person)  (Type of Authority)  (name of party on behalf of whom instrument was executed)  Personally Known \( \text{X} \)  OR Produced Identification \( \text{Type} \)	
Notary Signature Danl J. Calc	Notary Stamp or Seaf:  DANIEL J. CARLUCCI MY COMMISSION #HH024545 EXPIRES: JUL 28, 2024 Bonded Ihrough 1st State Insurance