Ins . Number: 201212018261 Book: 1246 Page: 180 Date: 12/12/2012 Time: 8:46:19 AM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	In 201212018261 Date:12/12/2012 Time:8:46 AM
	DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1246 P:180
Kay-45-15-00384-018	
Florida Statutes, the following information is provided in the	
1. Description of property (legal description): R24	-45-15 CR 242
a) Street (job) Address: 650 SW 2. General description of improvements: RF R	CR 292
2. General description of improvements: 787 787	20/2
c) Interest in property OWNERS	HAROLETTE GriFFIN  other than owner)
a) Name and address: CATY Toffle b) Telephone No: 386-752-34	Fax No. (Opt.) 386-752-3444
5. Surety Information a) Name and address:	
b) Amount of Bond:	Fax No. (Opt.)
c) Telephone No.:	Fax No. (Opt.)
a) Name and address:	
b) Phone No.	
7. Identity of person within the State of Florida designated  a) Name and address:	by owner upon whom notices or other documents may be served:
b) Telephone No.:	Fax No. (Opt.)
	Fax No. (Opt.)
<ol> <li>Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified):</li> </ol>	
IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTIMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COM	WHER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED TION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR MENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ISULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING  Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  Charolette Griffing
The foregoing instrument was acknowledged before me, a Flor	rida Notary, this 11 day of November 20 12 by:
as	(type of authority, e.g. officer, trustee, attorney
fact) for	(name of party on behalf of whom instrument was executed).
Personally Known Typ	ie
Notary Signature Mulli 2014	Notary Stamp or Seal:
11. Verification pursuant to Section 92.525, Florida State the facts stated in it are true to the best of my know	utes. Under penalties of perjury, I declare that I have read the foregoing and that riedge and belief.