

# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

26-35-14-02308-013 (46174)

Clerk's Office Stamp

Inst: 202412008549 Date: 04/25/2024 Time: 3:19PM  
Page 1 of 1 B: 1513 P: 574, James M Swisher Jr, Clerk of Court  
Columbia, County, By: OA  
Deputy Clerk

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): Lot 13 Fairway View unit 1  
a) Street (job) Address: 545 NW Fairway Dr
2. General description of improvements: Screen Enclosure on back of house
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  
a) Name and address: Pravinchandra Patel  
b) Name and address of fee simple titleholder (if other than owner) N/A  
c) Interest in property N/A
4. Contractor Information  
a) Name and address: Al Lake Side Aluminium LLC 5239 US Hwy 129 Lwe Oak FL 32060  
b) Telephone No.: 386-438-3728
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address: N/A  
b) Amount of Bond: N/A  
c) Telephone No.: N/A
6. Lender  
a) Name and address: N/A  
b) Phone No. N/A
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:  
a) Name and address: Dan Trimble 5239 US Hwy 129 Lwe Oak FL 32060  
b) Telephone No.: 386-438-3728
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(1)(b), Florida Statutes:  
a) Name: Polly Trimble OF Al Lake Side Alum  
b) Telephone No.: 386-438-3728
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  
COUNTY OF COLUMBIA

10. [Signature]  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

Pravinchandra Patel  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 14th day of May, 2024, by:  
Suzanne Stewart as notary for Pravinchandra Patel  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification ☐ Type \_\_\_\_\_

Notary Signature Suzanne Stewart

Notary Stamp or Seal:



SUZANNE STEWART  
Commission # HH 463468  
Expires November 17, 2027

# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

26-35-14-02309-013 (46174)

## Clerk's Office Stamp

Inst: 202412008549 Date: 04/25/2024 Time: 3:19PM  
Page 1 of 1 B: 1513 P: 574, James M Swisher Jr, Clerk of Court  
Columbia, County, By: OA  
Deputy Clerk

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): Lot 13 Fairway View Subunit 1  
a) Street (job) Address: 545 NW Fairway Dr Lake City FL 32055
2. General description of improvements: Screen Enclosure
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  
a) Name and address: P. J. Patel 3144 W US Hwy 90 Lake City FL 32055  
b) Name and address of fee simple titleholder (if other than owner): NA  
c) Interest in property: NA
4. Contractor Information  
a) Name and address: ALL Lakeside Aluminum LLC 5239 US Hwy 129  
b) Telephone No.: 384-438-3728 Live Oak FL 32060
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address: NA  
b) Amount of Bond: NA  
c) Telephone No.: NA
6. Lender  
a) Name and address: NA  
b) Phone No.: NA
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:  
a) Name and address: Dan Trimble 5239 US Hwy 129 Live Oak FL 32060  
b) Telephone No.: 384-438-3728
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(1)(b), Florida Statutes:  
a) Name: Polly Trimble of ALL Lakeside Aluminum LLC  
b) Telephone No.: 384-438-3728
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  
COUNTY OF COLUMBIA

10. [Signature]  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

P. J. Patel  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 25th day of April, 2024, by:  
Suzanne Stewart as notary for P. J. Patel  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature [Signature]

Notary Stamp or Seal:



SUZANNE STEWART  
Commission # HH 463468  
Expires November 17, 2027