NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	Inst: 202212003777 Date: 02/25/2022 Time: 9:38AM Page 1 of 1 B: 1460 P: 1143, Janues M Swisher Jr, Clerk of Court Columbia, County, By: VC
35-45-17-09033-132(332)	Deputy Clerk
THE UNDERSIGNED hereby gives notice that improvem of the Florida Statutes, the following information is pro	ents will be made to certain real property, and in accordance with Section 713.13
a) Street (job) Address: 221 SE STA	mases Pi Lake Cty, R. 32025
2. General description of improvements: Re R	90 F
3. Owner Information or Lessee information if the Lesse a) Name and address:  b) Name and address of fee simple titleholde	ee contracted for the improvements:  SCENSKI 1268 NW SCENIC DL. Lake City, EC 320 55  r (if other than owner)
c) Interest in property	
4. Contractor Information  a) Name and address:  b) Telephone No.:	Constanction 232 NW Charley CN Lake CAY RC 32000
<ol><li>Surety Information (if applicable, a copy of the paym</li></ol>	nent bond is attached):
a) Name and address: b) Amount of Bond:	
c) Telephone No.:	
∠6. Lender	
' a) Name and address:	/p
DI Phone No.	ner upon whom notices or other documents may be served as provided by Section
713 13/11/a)7 Florida Statutes:	
a) Name and address:	A
b) Telephone No.:	<u> </u>
Section 712 12/IV/h) Elected Statutos	the following person to receive a copy of the Lienor's Notice as provided in
b) Telephone No.:	
9. Expiration date of Notice of Commencement (the ex	xpiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILED FLORIDA STATUTES, AND CAN RESULT IN YOUR NOTICE OF COMMENCEMENT MUST BE REC	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, DUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST IANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE R NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	$\Omega$ , $\Omega$ , $\Omega$
COUNTY OF COLUMBIA X 10	1 auc Les Bengh
Signature of O	wner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
-1-	PAUL LESCEN SKI
7 1	Printed Name and Signatory's Title/Office
	· ·
	ne, a Florida Notary, this 21 day of February 20,22 by:
taul Lescensk as	uthority) (name of party on behalf of whom instrument was executed)
(Name of Person) (Type of A	·
Personally Known OR Produced Identification _	
Notary Signature Rurie & Cra	Notary Stamp or Seal:  LAURIE J CRAWFORD  MY COMMISSION # HH 217731