Inst. Number: 202412008049 Book: 1512 Page: 2147 Page 1 of 1 Date: 4/18/2024 Time: 3:36 PM 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:	
17-3S-17-04967-025 (24743)	
of the Florida Statutes, the following information is pro- LOT 25 FIVE PC 1. Description of property (legal description):	DINTS ACRES S/D. 357-734, 578-481, 631-779, 656-604, 693-784, DC 1384-1364, WD 1386-1443, WD 1409
2. General description of improvements: Metal roof is o	completed from 2020 with no permit. TMT Roofing LLC helping owner with after the fact permit
3. Owner Information or Lessee information if the Lesse a) Name and address: GONZALEZ CARMEN b) Name and address of fee simple titleholder	ee contracted for the improvements: DIAZ 448 NE TAMMY LN LAKE CITY, FL 32055 r (if other than owner)
c) Interest in property	
4. Contractor Information a) Name and address: TMT Roofing LLC 298 b) Telephone No.:	5 NW Commons Lp Ste 115-315 Lake City FL 32024
5. Surety Information (if applicable, a copy of the paym a) Name and address:	ent bond is attached):
c) Telephone No.:	
a) Name and address:	
713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
Section 713.13(I)(b), Florida Statutes:	he following person to receive a copy of the Lienor's Notice as provided in
a) Name: b) Telephone No.:	OF
Expiration date of Notice of Commencement (the exis specified):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFLORIDA STATUTES, AND CAN RESULT IN YOUR NOTICE OF COMMENCEMENT MUST BE RECO	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, OUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE R NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA Signature of Over	vner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Pi	rinted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me Carmon Dizz Granzalas Jww. (Name of Person)	e, a Florida Notary, this B day of AVII , 20_24 by: for
Personally Known OR Produced Identification	Type FL D
Notary Signature	Notary Stamp or Seal: Notary Stamp or Seal: Notary Public State of Florida Alyssa Miller My Commission HH 312322 Expires 9/14/2026