Inst. Number: 201312017259 Book: 1264 Page: 1399 Date: 11/6/2013 Time: 2:49:08 PM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	201312017259 Date 11/6/2013 Time 2 49 PM
11-45-16-02911-117	DC,P DeWitt Cason Columbia County Page 1 of 1 B.1264 P-1399
THE UNDERSIGNED hereby gives notice that improvements Florida Statutes, the following information is provided in the	s will be made to certain real property, and in accordance with Section 713.13 of the als NOTICE OF COMMENCEMENT.
1. Description of property (legal description): Lot [a) Street (job) Address: 207 200 2. General description of improvements: 1000f	Pilots way rate City P2 32024
a) Name and address: Frank Role b) Name and address of fee simple titleholder (if c) Interest in property 4. Contractor Information	
a) Name and address: Der Rold	Construction 2230 SE Raya 07#101 72 Fax No (Opt.) 380-758.7272
b) Amount of Bond: c) Telephone No: 6. Lender	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.)
713.13(I)(b), Florida Statutes: a) Name and address: b) Telephone No.:	Fax No. (Opt.) Ition date is one year from the date of recording unless-a different date
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OV IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTIMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COM	VNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED FROM 13.13, 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
STATE OF FLORIDA COUNTY OF COLUMBIA 10	Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
The foregoing instrument was acknowledged before me , a Flo	
Frank Roberts as	OWYEY (type of authority, e.g. officer, trustee, attorney
fact) for	(name of party on behalf of whom instrument was executed).
Personally Known OR Produced Identification Type Notary Signature Security	Notary Stamp or Seal:
11. Verification pursuant to Section 82.525, Florida Stat 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.
	Signature of Natural Person Signing (in line #10 above.)