Inst. Number: 202312017471 Book: 1498 Page: 2728 Page 1 of 1 Date: 9/18/2023 Time: 9:38 AM James M Swisher Jr Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
31-35-16-02413-005	
of the Florida Statutes, the following information is pro-	_
1. Description of property (legal description): (Dhan) a) Street (job) Address:	ME COR 3475.8 Ft w 1596.33 Ft For POB Moor Ln. Lake City FL 20004
2. General description of improvements:	Handby generated installation
 b) Name and address of fee simple titleholder 	e contracted for the improvements: LL 427 SW ANDOY LO LOKE City FL 32024 (if other than owner)
c) Interest in property 4. Contractor Information	
a) Name and address: Holly Electr	ie inc PD Box 22116 Lake City Fr. 32056. 4 hollyslectnicinc & garoo.com
5. Surety Information (if applicable, a copy of the payme	ent bond is attached):
a) Name and address: b) Amount of Bond:	
c) Telephone No.:	
6. Lender	· · · · · · · · · · · · · · · · · · ·
a) Name and address:	<u> </u>
	er upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:	
713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:	A
5) 100	
	e following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	OF
a) Name:	
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	2
COUNTY OF COLUMBIA 10.	mer or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Ernes Quail
	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	, by means ofphysical presence oronline notarization, a Florida Notary,
this 1 day of September 20 25	3. by: Extres Greachy Quail as
	(Name of Person) (Type of Authority)
for Ernest Gregory Quail	who is personally known OR produced identification
(name of party on behalf of whom instrument was e	Type ID DYIVEX'S Lisens Expires
Type ID 17(VCX S L) Et ma. Expires December 13, 2023	
ALD. C/ 4	No. FF 943108
Notary Signature Children Low	(Notary Stamp or Seal)
	OF FLORING