NOTICE OF COMMENCEMENT Clerk's Office Stamp Inst: 202212014330 Date: 07/22/2022 Time: 11:35AM Page 1 of 1 B: 1471 P: 1828, James M Swisher Jr, Clerk of Court Tax Parcel Identification Number: Columbia, County, By: VC Deputy Clerk 08 43 1002 8150 11 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): 0848 16 02815011 a) Street (job) Address: 405 SW Lcon a 2. General description of improvements: b) Name and address of fee simple titleholder (if other than owner) 1 c) Interest in property 1.96 4. Contractor Information 1annes a) Name and address: £ b) Telephone No.: 386 365 5909 5. Surety Information (if applicable, a copy of the payment bond is attached): b) Amount of Bond: c) Telephone No.: 6 Lender Name and address: Phone No. 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: b) Telephone No.: 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(I)(b), Florida Statutes: a) Name: b) Telephone No.: 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

Signature of Owner of Lessee, of Owner's or Lessee's Authorized Office/Director/Partner/Manager

Printed Name and Signatory's Title/Office

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| The foregoing instrument was acknowledged before me, by me | eans of V physical presence or | _onli | ne notarization, a Florida Notary |
| this 18th day of May 2022 by | James Johnston | _as _ | Contractor |
| 1 | (Name of Person) | | (Type of Authority) |
| for James Johnston | who is personally known | OR | produced identification |
| (name of party on behalf of whom instrument was executed | d) | | |
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Jeanette Kirby Notary Public State of Florida Comm# HH070503 Expires 12/9/2024

Notary Signature Notary Stamp or Seal: