NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Tax Parcel Identification Number:

Inst: 202412022165 Date: 10/22/2024 Time: 1:56PM Page 1 of 1 B: 1525 P: 1949, James M Swisher Jr, Clerk of Court Columbia, County, By: AH Denuty Clerk

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 des	cription): E (unord) a - 13 c
2. General description of improvement	268 SE CAMPON TRE. ents: NEW MEDA RODERE
a) Name and address:	mation if the Lessee contracted for the improvements:
 b) Name and address of fe 	e simple titleholder (if other than owner)
c) Interest in property	1. 1
a) Name and address: b) Telephone No.	laudette Litenalison
Surety Information (if applicable,	a copy of the payment bond is attached):
a) Name and address:	
b) Amount of Bond:	
c) Telephone No.:	
6. Lender	
b) Phone No.	
	designated by Owner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Stat	
b) relephone (vo.:	
8. In addition to himself or herself. C	Owner designates the following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florid	
	OF
b) Telephone No.:	
9. Expiration date of Notice of Comm	nencement (the expiration date will be 1 year from the date of recording unless a different date
is specified):	
COMMENCEMENT ARE CONS FLORIDA STATUTES, AND CAI NOTICE OF COMMENCEMENT INSPECTION. IF YOU INTEND	PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF GIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, IN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A IT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE CORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	Southette Hudersen
COUNTY OF COLUMBIA	10 CAMMAN PAUL S
	Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	(Jun do LSE HENDEN SOD)
	VIWA ALTONOMY SO
	Printed Name and Signatory's Title/Office
	00 - 1 - 0"
The foregoing instrument was acknown	owledged before me, a Florida Notary, this <u>dd</u> day of <u>CC+Ober</u> 20 <u>24</u> by:
Ci destall 1	C. C.
Claudette Clauder	Got SCIF for SCIF
(Name of Person)	(Type of Authority) (name of party on behalf of whom instrument was executed)
	V - 0, D/
Personally Known OR Produce	ed Identification Y Type FC DC
Notary Signature Man	Notary Stamp or Seal: EMALEICH WARD
The second second	
	MY COMMISSION # HH 525 EXPIRES: October 18, 200