NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

18-75-16-04236-089 (43342)

Clerk's Office Stamp

Inst: 202212012379 Date: 06/24/2022 Time: 8:54AM Page 1 of 1 B: 1469 P: 1858, James M Swisher Jr, Clerk of Court Columbia, County, By: VC

Deputy Clerk

of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT .
1. Description of property (legal description): a) Street (job) Address: 468 SW Burgundy W Fo-t White, FL 32038
2. General description of improvements:
3. Owner Information or Lessee information if the Lessee contracted for the improvements: a) Name and address: Andrew 5000000000000000000000000000000000000
4. Contractor Information a) Name and address: Elite Outdoor Buildings, LLC 2008 Ohio Ave N. Live Oak, F b) Telephone No.: 386-364-1364
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address:
c) Telephone No.:
6. Lender
a) Name and address:
b) 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) receptione rot.
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:OFOF
of resemble to
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 10.
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me, a Florida Notary, this 21 day of Ture 20 22, by:
(Name of Person) (Type of Authority) for OWNES (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification Type FL DL
lotary Signature Notary Stamp or Seal: LIZAW. WILLIAMS MY COMMISSION # GG 953180 EXPIRES: January 29, 2024