



Electronically Certified Official Record

DOCUMENT INFORMATION

Agency Name:	Columbia County Clerk of the Circuit Court and Comptroller
Clerk of the Circuit Court:	The Honorable James M. Swisher, Jr.
Date Issued:	7/10/2024 9:30:13 AM
Unique Reference Number:	BAA-DAAB-BCACD-CACEBCABEEGG-DGBIDA-D
Instrument Number:	202412014466
Requesting Party Code:	3001
Requesting Party Reference:	B7901A8E-843A-DB4B-5FD3-0E6E92E93152-SF

CERTIFICATION

Pursuant to Sections 90.955(1) and 90.902(1), Florida Statutes, and Federal Rules of Evidence 901(a), 901(b)(7), and 902(1), the attached document is electronically certified by The Honorable James M. Swisher, Jr., Columbia County Clerk of the Circuit Court and Comptroller, to be a true and correct copy of an official record or document authorized by law to be recorded or filed and actually recorded or filed in the office of the Columbia County Clerk of the Circuit Court and Comptroller. The document may have redactions as required by law.

HOW TO VERIFY THIS DOCUMENT

This document contains a Unique Reference Number for identification purposes and a tamper-evident seal to indicate if the document has been tampered with. To view the tamper-evident seal and verify the certifier's digital signature, open this document with Adobe Reader software. You can also verify this document by scanning the QR code or visiting <https://Verify.Clerkecertify.com/VerifyImage>.

**The web address shown above contains an embedded link to the verification page for this particular document.



Permit Number: _____
Folio/Parcel ID #: 28-35-16-02372-502
Prepared by: Construction Unlimited
2578 Clark St STE 1
Apopka, FL 32703
Return to: _____

NOTICE OF COMMENCEMENT

State of Florida, County of Columbia

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. **Description of property** (legal description of the property, and street address if available) 593 NW Zach Dr Lot 2 Arbor Greene at Emerald Lakes SW WD 1013-2891, WD 1017-2168
2. **General description of improvement** tear off and re-roof, with asphalt shingles & synthetic underlayment.
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Hugh Skidmore
Address 593 NW Zach Dr Lake City FL 32055
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Construction Unlimited Telephone Number 833-407-7663
Address 2578 Clark St STE 1 Apopka, FL 32703
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
Name _____ Telephone Number _____
Address _____
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name _____ Telephone Number _____
Address _____
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name _____ Telephone Number _____
Address _____
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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

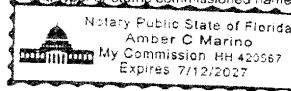
Hugh P. Skidmore
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this 8 day of 7, 24, by Hugh Skidmore
as Owner for _____
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed _____

Amber C Marino
Signature of Notary Public - State of Florida

Personally Known _____ OR Produced ID X
Type of ID Produced DL

Amber C Marino
Print, type, or stamp commissioned name of Notary Public



Form content revised: 01/23/14



James M. Swisher, Jr.