This Instrument Prepared By: Campus USA Credit Union 14007 NW 1st Road Jonesville, Florida 32669 (352) 335-9090 After Recording Return To: CAMPUS USA CREDIT UNION 14007 NW 1ST ROAD JONESVILLE, FLORIDA 32669	Inst: 202212021415 Date: 11/08/2022 Time: 10:35AM Page 1 of 5 B: 1478 P: 2541, Junes M Swisher Jr, Clerk of C Columbia, County, By: VC Deputy Clerk				
	[Space Above This Line For Recording Data]				
Permit No.:	Tax Folio No.: 18-7S-17-10021-024				
STATE OF FLORIDA COUNTY OF Columbia The undersigned hereby gives notice that improchapter 713, Florida Statutes, the following in	ovement will be made to certain real property, and in accordance with formation is provided in this Notice of Commencement.				
1. Description of Property: PARCEL 18- SEE EXHIBIT "A" ATTACHED HER A.P.N.: 18-7S-17-10021-024	7S-17-10021-024, FORT WHITE, FLORIDA 32038 EETO AND BY THIS REFERENCE MADE A PART HEREOF.				
2. General description of improvement: S	. General description of improvement: SINGLE FAMILY RESIDENCE				
3. Owner information or Lessee information	n if the Lessee contracted for the improvement:				
a. Name and address: <u>STEPHEN</u> 27104 NW 203RD PL HIGH SPRINGS, FLORIDA 3					
FLORIDA NOTICE OF COMMENCEMENT FLNC3.CST 01/17/20	Page 1 of 4				

	b.	Interest in property:
	c.	Name and address of fee simple title holder (if other than Owner):
4.	a.	Contractor (name and address): HARTLEY BROTHERS, INC 1325 NW 53RD AVENUE GAINESVILLE, FLORIDA 32609
	ь.	Contractor's phone number:
5.	Suret	y (if applicable, a copy of the payment bond is attached):
	a.	Name and address:
	b.	Phone Number:
	c.	Amount of bond:
6.	a.	Lender: CAMPUS USA CREDIT UNION 14007 NW 1ST ROAD JONESVILLE, FLORIDA 32669
	b.	Lenders phone number: (352) 335-9090
7.		ns within the State of Florida designated by Owner upon whom notices or other document may be served ovided by Section 713.13 (1) (a) 7, Florida Statutes:
	a.	Name and address:
	b.	Phone numbers of designated persons:
8.	a.	In addition to himself, Owner designates of
		to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statues.
	b.	Phone number of person or entity designated by owner:

9.	Expiration date of notice of commencement (the expiration date	is 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.

Signature of Owner/Lessee

STEPHEN J. I

MAHN II

FLORIDA NOTICE OF COMMENCEMENT FLNC3.CST 01/17/20

Sworn to (or affirmed) and subscribed before me by means of: Physical Presence, OR- Online Notarization, this 7th day of November , 2022 , by Month Year STEPHEN J. MAHN II Name of Person Making Statement STEPHEN J. MAHN II Name of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above) Personally Known Produced Identification Type of Identification Produced: Drivers License	State of	FLORIDA	—- ;					
Physical Presence, Online Notarization, this 7th day of November , 2022 , by STEPHEN J. MAHN II Name of Person Making Statement Signature of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above) Personally Known	County of	ALACHUA	;					
OR - Online Notarization, this	Sworn to (or affirmed) and subscribed before me by means of:							
Online Notarization, this	☐ Physica	al Presence,						
this	- (OR -						
Date Month Year STEPHEN J. MAHN II Name of Person Making Statement SHLEY M. SHLEY M. SHLEY M. SHLEY M. SHLEY M. SHLEY M. Signature of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above) Personally Known	☐ Online	Notarization,						
STEPHEN J. MAHN II Name of Person Making Statement SHLEY M. SHLEY M. SHLEY M. Signature of Notary Public - State of Florida Name of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above)	this 7	th day of						
MY COMMISSION Signature of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above)		****						
MY COMMISSION Signature of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above)								
	MY COMMISSION Signature of Notary Public - State of Florida Name of Notary Typed, Printed or Stamped (Place Notary Seal Stamp Above)							

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