NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

16-75-17-10006-227

Clerk's Office Stamp

Inst: 202412009151 Date: 05/02/2024 Time: 4:12PM

Page 1 of 1 B: 1513 P: 1945, James M Swisher Jr, Clerk of Court Columbia, County, By: VC

Deputy 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	description):
a) Street (Job) Address General description of impro	s: TBD SW Marynik Drire High springs FL 32643
 a) Name and address: 	information if the Lessee contracted for the improvements: Lauren Feagin - current address 10406 NW 146th PI FL of fee simple titleholder (if other than owner)
c) Interest in property	
4. Contractor Information	
a) Name and address:	: Feagin Construction - 10406 NW 196th PI Alachua Fl 352 316 6767 3261
	able, a copy of the payment bond is attached):
 a) Name and address: 	
b) Amount of Bond:	
COURT S.	
6. Lender	
	S:
b) Phone No	
	orida designated by Owner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida	a Statutes:
b) Telephone No.:	
Section 713.13(I)(b), I	self, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Florida Statutes: OF OF
COMMENCEMENT ARE C FLORIDA STATUTES, AND NOTICE OF COMMENCEN	NY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A MENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST END TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE
	R RECORDING YOUR NOTICE OF COMMENCEMENT.
COMMENCENTA WORK OF	THE CONDING TO CHEE OF GOTHER CHIEF.
STATE OF FLORIDA	
COUNTY OF COLUMBIA	Signature of Owner or Jessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Signature of Owner or Vessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Contraction
	Lauren Feagin
	Printed Name and Signatory's Title Office
The foregoing instrument was a	acknowledged before me, a Florida Notary, this day of
(Name of Person)	for
	oduced Identification Stype FL DC
reisonally known Oryon	NEONTA ANDERSON
Notary Signature	Notary Stamp or Seal: MY COMMISSION # HH 467688 EXPIRES: November 28, 2027