Inst. Number: 201212008521 Book: 1235 Page: 2732 Date: 6/5/2012 Time: 10:49:10 AM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT This Instrument Prepared By: Name: MIKE BENNETT Address: PO BOX 387 Newberry, FL 32669 Permit No: Tax Folio No: OQ-QQ-CQQ-LY310-CQQ STATE OF: FLORIDA COUNTY OF: ALACHUA THE UNDERSIGNED HEREBY gives notice that improvement(s) 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: Street Address: LY12 SW SP 47 FL White F. Legal Description: 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): CCACACA, Metallipulins, COMMICIAL 3. OWNER INFORMATION: a.) Name: Et White True Value Hand Address: 1912 SW SP 47 Ff Whate b.) Interest in Property: Occurrence	
NOTICE OF COMMENCEMENT This instrument Prepared By: Name: MIKE BENNETT Address: PO BOX 387 Newberry, FL 32669 Permit No: Tax Folio No: OC-OC-CO-LY 310-COC STATE OF: FLORIDA COUNTY OF: ALACHUA THE UNDERSIGNED HEREBY gives notice that improvement(s) 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: Street Address: 18112 Sw Sh Y7 FL White F. Legal Description: 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): Cocaco, Metalupulus Commence Address: 18112 Sw Sh Y7 FL White F. 3. OWNER INFORMATION: a.) Name: Et White Trave Value Hand Address: 18112 Sw Sh Y7 FL white	
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Name: MIKE BENNETT Address: PO BOX 367 Newberry, FL 32669 Permit No: Tax Folio No: OD-OD-CD-(4310-COD) STATE OF: FLORIDA COUNTY OF: ALACHUA THE UNDERSIGNED HEREBY gives notice that improvement(s) 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: Street Address: 18112 Sw 47 Ft white function: 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): Codow, metalwowing, commodicial 3. OWNER INFORMATION: a.) Name: Ft White True Value Hand Address: 18112 Sw 5h (7) Elmit	
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Tax Folio No: OD-CD-CD-14310-CDD STATE OF: FLORIDA COUNTY OF: ALACHUA THE UNDERSIGNED HEREBY gives notice that improvement(s) 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: Street Address: 18112 SIN SK 47 Ft. White Ft. Legal Description: 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): CONTACT 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): TOTALLY, METALLIPLIANS, COMMICIAL 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard Address: 18112 SW 50 (7) FL WILL 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard Address: 18112 SW 50 (7) FL WILL 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): Total Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 3. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 4. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 4. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 4. OWNER INFORMATION: a.) Name: Ft. Wh. ft. True Value Hard 4. OWNER INFORMATION: A. OWNER	
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3. OWNER INFORMATION: a.) Name: Et White True Value Hard Address: 19112 SW SD (17 ELVI)	
b) Interest in Property Original States of the States of t	
D. Interest in Property: (Ut : W zu-	FI
	310
c.) Fee Simple Titleholder (if other than owner) Name: NA FINhitz Handur Address: Sank	1
6. CONTRACTOR: a.) Name: MAC JOHNSON ROOFING Inc. Address; PO BOX 367 Newberry, FL 32669 b.) Phone: 352-472-4943	1
2. Sove 11: a.) Name: N/A Address:	
b.) Phone	
/. Persons within the State of Florida designated by Owner upon whom position and the	
713.13(1)(a) 7., Florida Statutes: a.) Name: N/A Address:	
b.) Phone:	
 In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), forida Statutes. 	
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U.) Prione:	
Expiration date of notice of commencement (the expiration date is one (1) year from the date of recording unless a different date is specified.)	
NARNING 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. FLOR ALL TO GO TO G	50
Signatory's Title/ Office	
The female had	
The foregoing instrument was acknowledged before me this day of (year)	
by (name of person) as (type of authority, e.g. officer,	
trustee, attorney in fact) for (name of party on behalf of whom instrument was executed).	
TAMARA H. MALLOY TO 985018 TO 985018 TO PART OF THE SEASON DO 985018 EXPIRES: September 5. Stingettre of Notary Public – State of Florida Booked Trea Notary Public Union State – Stamp Commissioned Name of Notary Public	
Commission Number: Personally Known or Produced Identification X FL ' Barro - 608 U	rec =
Fr. Market Control of the Control of	ODC
Verification Pursuant to Section 92.521. Florida Statutes Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.	
x / and /s/free	
Signature of Natural Person Signing Above	

11	
	951-201212008521 Date:6/5/2012 Time:10:49 AM
	psi-201212008521 Date:6/5/2012 Time:10:49 AM DC P.De:Mit Cason,Columbia County Page 1 of 1 B:1235 P:2732
	7 - 101 B 1235 P 2/32

7. Persons 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: N/A Address: b.) Phone: 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). Florida Statutes. a.) Name: N/A Address: b.) Phone: 9. Expiration date of notice of commencement (the expiration date is one (1) year from the date of recording unless a officerent date is specified.) WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED INSPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYMENT WITCH THE FIRST INSPECTION. IF YOU INTEND TO ORDAN SMANLYING CONSIDERED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORDAN SMANLYING CONSIDERED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORDAN SMANLYING CONSIDERED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORDAN SMANLYING CONSIDERED INTENDED THE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORDAN SMANLYING CONSIDERED INTENDED THE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTENDED ORDAN SMANLYING CONSIDERED IN THE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTENDED ORDAN SMANLYING CONSIDERED IN THE POSTED ON THE POSTED O	DC P.De/Mil Cason Columbia County Page 1 of 1 B 1235 P 2732
Name, MIKE BENNETT Addraises PO BOX 367 Newborry, FL 32669 Permit No. Tak Follow CoCCL. PL31D-COD STATE OF, ELORIDA COUNTY OF ALACHUA The UNDERSIGNED HEREBY glves notice that improvemently with be made to cartain real property, and in accordance with Chapter 713, Planted Statutes, the Islowing information is provided in this Notice of Commencement. 1. DESCRIPTION OF PROPERTY: Street Address: 19112 Study 47 FL White-Flaged Beachight. 2. GENERAL DESCRIPTION OF BUPPOVEMENT(S): COCKEY, AN EXAMPLE Address: 18112 SW SE 47 Ff filling 31 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	NOTICE OF COMMENCEMENT
Address: PO BOX 357 Newborry, FL 32669 Parith No. The Felonic Do-Cot Cot 19310 Cot STATE OF ELORIDA COUNTY OF ALCHHA THE UNDERSIGNED HEREBY gives notice that improvement(s) will be made to certain real property, and in accordance with Chapter 713, Parisda Statistics, the following information is provided in this holice of Commencement. 1. DESCRIPTION OF RUPPER Y: Server Address: 19112 Stu Qu YT FL White FL Legel Description: 2. GENERAL DESCRIPTION OF BUPPROVEMENT(S): COLORS AND ADDRESS: 18110 SW St. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT(S): COLORS AND ADdress: 18110 SW St. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT(S): COLORS AND ADdress: 18110 SW St. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT(S): COLORS AND ADdress: 18110 SW St. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT(S): COLORS AND ADdress: 18110 SW St. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT SW. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT SW. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT SW. 47 FFBSurf Fl D. Inferest in Property. County of Auditoria. 2. GENERAL DESCRIPTION OF BUPPROVEMENT SW. 47 FFBSURF Fl D. Inferest in Property. D. Inferest in Proper	
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THE UNDERSIGNED HEREBY gives notice that improvement(s) will be made to certain real property, and in accordance with Chapter 713. Provide Statutes the following information is provided in this Notice of Commencement. 1. DESCRIPTION OF PROPERTY: Street Address: 18 12 Stu 9 47 Ft. White Ft. 2000 Commencement. 2. GENERAL DESCRIPTION OF IMPROVEMENT(S): CONDUCT AND Address: 18 12 Stu 9 47 Ft. White Ft. 2000 Co. 1	
1. DESCRIPTION OF PROPERTY: Street Address: 1Y 1/2 SIDURY 41 FLUNTE 4 Legis Description: 2. GENERAL DESCRIPTION OF BIPROVEMENT(S): POSICIAL METALLISMS. CONDUCTED 3. OWNER INFORMATION: a.) Name: Et Whate True Value like Address: 1211 SW 512 47 Ff billisms of the Simple Property. C.Fee Simple Tibenoider (If other then owner) Name; NA. FWh. Address: DO BOX 367 Nowberry, FL 32669 a.) Phone: 32-22 4. CONTRACTOR: a.) Name: MAC JOHNSON RECOFING ing Address: PO BOX 367 Nowberry, FL 32669 a.) Phone: 32-24-35 5. SURETY: a.) Name: MAC JOHNSON RECOFING ing Address: D.) Phone: 32-32-345 6. LENDER: a.) Name: MAC JOHNSON RECOFING ing Address: D.) Phone: 32-32-345 6. LENDER: a.) Name: MAC JOHNSON RECOFING ing Address: D.) Phone: 32-32-345 6. LENDER: a.) Name: MAC JOHNSON RECOFING ing Address: D.) Phone: 32-32-345 6. LENDER: a.) Name: MAC Address: D.) Phone: 32-32-345 6. LENDER: a.) Name: MAC Address: D.) Phone: 32-32-345 6. Name: MAC Add	
2. GENERAL DESCRIPTION OF IMPROVEMENT(S): POSSESS. A MATARIAN CONSTRUCTION 3. OWNER INFORMATION: a.) Name: Et Whyte True Value litary Address: ICIT2 SW 5t 47 Ffill for the politic property. Claim Address: PO BOX 367 Newberry, Ft. 32669 a.) Prome: SS-472-6643 4. CONTRACTOR: a.) Name: MAC JOHNSON ROOFING Inc. Address: PO BOX 367 Newberry, Ft. 32669 a.) Prome: SS-472-6643 5. SURETY: a.) Name: NIA Address: C.) Phone: C.) Phone: C.) Phone: D.) Phone: D	1. DESCRIPTION OF PROPERTY: Street Address: 1812 Sw \$ 47 Ft. whitef
D, Inferest in Property. CCLC Pee Simple Titleriolder (In other than owner) Name: N/A F/1/b, Fee Simple Titleriolder (In other than owner) Name: N/A Address: 4. CONTRACTOR: a) Name: MAC JOHNSON RCOFING Inc. Address: PC BOX 367 Newberry, FL 32656 b.) Phone: 35. SURETY: a.) Name: N/A Address: b.) Amount of bond \$; N/A c.) Phone: 6. LENDER: a) Name: N/A Address: 6. LENDER: b) Phone: 713.13(1)(a) 7, Florida Satutuse: 714.13(1)(a) 7, Florida Satutuse: 715.13(1)(a) 7, Florida Satutuse: 715.13(1)(a) 7, Florida Satutuse: 716.13(1)(a) 7, Florida Satutuse: 717.13(1)(a) 7, Florida Satutuse: 718.13(1)(a) 7, Florida Satutuse: 719.13(1)(a) 7, Fl	2. GENERAL DESCRIPTION OF IMPROVEMENT(S): rootaco, metalupulins, commoncial
4. CONTRACTOR: a.) Name: MAC JOHNSON RCOFING Inc. Address: PO BOX 367 Newberry, FL 32656 b.) Phone: 352-473-465 5. SURETY: a.) Name: N/A	b.) Interest in Property: CCLIN 22
5. SURETY: a.) Name: N/A L) Amount of bond \$: N/A LENDER: a.) Name: N/A Address: C.) Phone: B. LENDER: a.) Name: N/A Address: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Ph	
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b.) Amount of bond \$: N/A B. LENDER: a.) Name: !!/A Address: D.) Phone: D.	5 SHRETY: a Name: N/G
B. LENDER: s.) Name: N/A Address: b.) Phone: 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b) 7. Florida Statutes: a.) Name: N/A Address: b.) Phone: b.) Phone: b.) Phone: D.) Phone: D.) Phone: D.) Phone: D.) Phone: Address: D.) Phone: D.) Phone: D.) Phone: Address: D.) Phone: D.) Phone: D.) Phone: D.) Phone: Address: D.) Phone: D	b.) Amount of bond \$: N/A c.) Phone:
7. Persons 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 Statuties: a) Name: N/A: Address: b.) Phone: 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). 9. Expiration date of notice of commencement (the expiration date is one (1) year from the date of recording unless a different date is specified.) WARNING TO COWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE MOTICE OF COMMENCEMENT ANE EXPIRES AND CAME RESULT in YOUR PAYMENT IN CORNER OF COMMENCIAL THE MOTICE OF COMENCIAL THE MOTICE OF COMMENCIAL THE MOTICE OF COMMENCIAL THE MOTI	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT
Address: 8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b). Fibride Statutes. a.) Name: N/A Address: b.) Phone: 9. Expiration date of notice of commencement (the expiration date is one (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 AND CONSIDERED INPROPER PAYMENT THICE FOR IMPROVEMENTS IN OUR PROPERTY. A NOTICE OF COMMENCEMENT MAY BOTH OF COMMENCEMENT AND CONSIDERED INPROPER PAYMENT THICE FOR IMPROVEMENTS IN OUR PROPERTY. A NOTICE OF COMMENCEMENT MAY BOTH RESULT ON YOUR PAYING THICE FOR IMPROVEMENTS IN OUR PROPERTY. A NOTICE OF COMMENCEMENT MAY BOTH RESULT ON YOUR PAYING THICE OF COMMENCEMENT MAY BOTH OF COMMENCEMENT MAY BOTH RESULT ON YOUR PAYING THICE OF COMMENCEMENT MAY BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBJ/AIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT MAY BE A CONSULT WITH YOUR LENDER OR AN Signature of Owner or Owner's Authorized Officer/Director Partner/Manager Signature of Owner or Owner's Authorized Officer/Director Partner/	7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section
Address: b.) Prone. 9. Expiration date of notice of commencement (the expiration date is one (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 CAM RESULT IN YOUR PAYMEN TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON ITEM JOB STEED FOR THE FIRST INSPECTION. If YOU INTEND TO ORDINANACING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. A Lat. A CONSULT WITH YOUR LENDER OR AN SIgnature of Owner or Owner's Authorized Officer/Director Partner/Manager Signature of Owner or Owner's Authorized Officer/Director Partner/Manager Signature of Owner or Owner's Authorized Officer/Director Partner/Manager In force of person as the part of person or person of subport as officer that I have read the foregoing and that the facts stated in it is the true to the best of my knowledge and belief. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it is the true to the best of my knowledge and belief.	a Marroy M/A
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trustee, attorney in fact) for	
trustee, attorney in fact) for	The foregoing instrument was acknowledged before me this day of (year)
TAMAPA H. MALLOY TAMAPA H. MALLOY In COMMISSION 1909 999318 EXPIRES: September & Stripative of Notary Public — State of Fiorida EXPIRES: September & Stripative of Notary Public — State of Fiorida EXPIRES: September & Stripative of Notary Public — Or Stamp Commissioned Name of Notary Public Commission Number: Personally Known or Produced Identification X Ft : Pool	the state of the s
TAMARA H. MALLOY And COMMISSION & DO SHOULD BE SHOULD B	
x / and / Jenn	TAMARAH MALLOY MY COMMISSION POD 99/018 EXPIRES. Septembers. Stithartive of Notary Public - State of Florida Boodst Trux Natury Public Indiany Public - Other Commission Number: Commission Number:
	Verification Pursuant to Section 92.525, Florida Statutes Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it after true to the best of my knowledge and belief. X Aut A