

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: 5/9/2024 11:15:13 AM

Unique Reference Number: BAA-DAAB-BCACD-CACEBCAAJGFG-DDAIEH-I

Instrument Number: 202412009656

Requesting Party Code: 3001

Requesting Party

Reference: B4192201-530B-BA2B-6E3B-A7501FF1E48A-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/verifylmage.

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



| NOTICE OF COMMENCEMENT | Clerk's Office S | itamp |
|---|--|---|
| Tax Parcel Identification Number: | | |
| 23-4S-16-03099-108 (14868) | | |
| 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): LOT 8 STONEHENGE SID WID 1032-786, WID 1038-126, a) Street (job) Address: 140 SW AMESBURY CT, LAKE CITY 2. General description of improvements: RERCOF | | |
| | LAVERNE 140 SW AMESBURY CT LAKE CITY, FL 32025 | |
| b) Name and address of fee simple titleholde c) Interest in property | r (if other than owner) | |
| Contractor Information Name and address: Richard Dorman/ F | Roofing Pros USA II 8650 S F | ine Ave Ocala FL 34480 |
| b) Telephone No.: 352-581-7333 5. Surety Information (if applicable, a copy of the paym | ent bond is attachedi: | |
| a) Name and address: | | |
| b) Amount of Bond: c) Telephone No.: | | |
| 6. Lender | | |
| a) Name and address: | | |
| b) Phone No 7. Person within the State of Florida designated by Own | | |
| 713.13(1)(a)7., Florida Statutes: a) Name and address: | | y be served as provided by Section |
| b) Telephone No.: | | |
| 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: | | |
| | OF | |
| b) Telephone No.: | | |
| 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 | averne Daniels | |
| COUNTY OF COLUMBIA 10.1 | iner or Lessee, or Owner's or Lessee's Authoriza | ed Office/Director/Partner/Manager |
| Signature of Owner of Lessee, or Owner's bit Lessee's Authorized Ornogonies Corporative Amanager | | |
| | averne Daniels | Homeowner |
| Pr | inted Name and Signatory's Title/Office | |
| The foregoing instrument was acknowledged before me, a Florida Notary, this g day of May, 20 <u>24, by:</u> | | |
| Laverne Daniels as Self | for | |
| (Name of Person) (Type of Au | forfor | of whom instrument was executed) CHRISTOPHER M. LORENTZ |
| Personally Known OR Produced Identification | Type FL DL | NOTARY PUBLIC STATE OF FLORIDA |
| Oncu-Signed by | | Commission #HH 458642 |
| Notary Signature (luristopher Loventy) | Notary Stamp or Seal: | My Commission Expires 10/25/2027 ONLINE NOTARY |
| | | |

