Inst. Number: 201312018720 Book: 1265 Page: 1714 Date: 11/25/2013 Time: 11:30:07 AM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number	TS 201312018720 Date 11/25/2013 Time 11 30 AM DC P DeWitt Cason Columbia County Page 1 of 1 B 1265 P 1714
20-3s 17-05360-000	Devil Cason Columbia County Page 1 of 1 B 1203 P 17 14
TH UP DERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713 13 of the FOR POB. The FOR POB. RUN E 165 FT S 100 FT N 100 FT N 100 FT N POB. RUN E 165 FT S 100 FT N 100 FT N 100 FT N POB. RUN E 165 FT S 100 FT N 100	
1 De cription of property (legal description)	TROST 895-927
2 Ceneral description of improvements MUDULAR CLARENCE CORA'S DAYCARE	
3 Owner Information a) Name and address: CALL W	BILLARO, SK.
b) Name and address of fee simple titleholder (ii	other than owner)
4 i ontractor Information	BULLARD, SIZ. P.C. BOX 114, LAICE CITY &C
a) Name and address CACL b) Telephone No 386.752 6	LOA Fax No (Opt) 32056
5 Curety Information a) Name and address	
b) Amount of Bond	
c) Telephone No.	Fax No (Opt.)
a) Name and address:	
"Identity of person within the State of Florida designated	by owner upon whom notices or other documents may be served
Name and address Prephone No	Fax No (Opt.)
` `	erson to receive a copy of the Lienor's Notice as provided in Section
7 3 13(I)(b) Florida Statutes	erson to receive a copy of the menor's housed as provided in section
a) Name and address b) Telephone No	Fax No. (Opt)
9 Expiration date of Notice of Commencement (the expirits specified)	ation date is one year from the date of recording unless a different date
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	
•	IMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST VSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
YOUR NOTICE OF COMMENCEMENT	
STATE OF FLORIDA COUNTY OF COLUMBIA	Carl Dulland
Section of Section.	Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
	CARC BULLARD
	Printed Name
The foregoing instrument was acknowledged before me a Florence of the control of	
0	(type of authority, e.g. officer, trustee, attorney
fact) for CARL IN BULLARWIZ	OR (name of party on behalf of whom instrument was executed).
Personally Known OR Produced Identification Ty	
Notary Signature La. Kl	Notary Stamp or Seal Notary Stamp or Seal AND THE HODSON MY COMMISSION # EE 214728 EXPIRES July 14, 2016 Bonded Thru Notary Public Underwriters
AND	
that ict this dinutar true to the best of my knowledge and belief	
	Carl Dullard
	Signature of Natural Person Signing (in Inc. #10 above.)