Inst. Number: 202112005537 Book: 1433 Page: 1319 Page 1 of 1 Date: 3/26/2021 Time: 12:37 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

NOTICE OF COAMACNICES	
NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Fax Parcel identification Number:	
20-3S-16-02202-132	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): COMM AT SE	COP OF WAR OF SEC DUBLINGTON OF SET VICENTE TO THE SECOND OF SECON
2. General description of improvements: ROOF	IT POINT DR. LAKE CITY FL 32055
3. Owner Information or Lessee information if the Lessee	
 name and address of fee simple titleholder Interest in property OWNER 	(if other than owner)
4. Contractor Information	
b) Telephone No.: 866-959-7663	fing INC, PO Box 2147 Lake City, FL 32056
we wanter them making the action of the property of the making a	per bernel to mean about.
a) Name and address: N	A
c) Telephone No.:	
b) Phone No.	A
And the state of Florida designated by OMUS	er upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes: a) Name and address: N/A	
b) Telephone No.:	
8. In addition to himself or herself Owner designates the	Sall
Deuxon /13.15iiiDi. Fionda Statistec	e following person to receive a copy of the Lienor's Notice as provided in
a) Name:N/A	OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the expirits specified):	ration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MADE COMMENCEMENT ARE CONSIDERED IMPROPE FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, IR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING. CONSULT YOUR IENDER OR AN ATTORNEY RESORE
STATE OF FLORIDA	Pr //
COUNTY OF COLUMBIA 10.	
Signature of Own	er or Lessee/or/Owner's or Lessee's Authorized Office/Director/Partner/Manager
Prin	ted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me, a	a Florida Notary, this 26 day of Morch 2021 by
010. F. 1.	strong Notary, dis 50 day of 110 cm 20 day by:
(Name of Derson) Type of Author	for Clay Feagle
	(name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	Type FUAL
Notary Signature Berbara Joh	Notary Stamp or Seal: Notary Stamp or Seal: BARBARA JOHNSTON Commission # GG 306135 Expires May 6, 2023