NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

03390-011

Clerk's Office Stamp

Inst: 202012013771 Date: 08/21/2020 Time: 12:15PM
Page 1 of 1 B: 1417 P: 2051, James M Swisher Jr, Clerk of Court
Columbia, County, By: KV 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

	ormation is provided in this NOTICE OF COMMENCEMENT
Description of property (legal descrip a) Street (job) Address	ed Su Freeman Gen Lake City It 30004
2. General description of improvements	addition
3. Owner Information or Lessee informa a) Name and address:	ation if the Lessee contracted for the improvements: 1
b) Name and address of fee si	When the line is the same of t
4. Contractor Information	mer Phildel
a) Name and address: b) Telephone No.:	ONET - Pullder 380 288 4439
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\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
b) Amount of Bond:	
6 Lender	
 a) Name and address: 	
b) Phone No	signated by Owner upon whom notices or other documents may be served as provided by Section
7. Person within the State of Florida de	signated by Owner upon whom notices of other abcume to
7 713.13(1)(a)7., Florida Statut	es:
a) Name and address:	es
b) Telephone No.:	
3. In addition to himself or herself, Ow	ner designates the following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida S	itatutes:
a) Name:	OF
b) Telephone No	
COMMENCEMENT ARE CONSID	YMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF DERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, 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 D OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE DRDING YOUR NOTICE OF COMMENCEMENT.
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STATE OF FLORIDA	2 / Cheth Littler ax
COUNTY OF COLUMBIA	
	of Owner or asses or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Signature of Owner or lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Elizabeth J. Freeman
	ELizabeth J. Freeman Printed Name and Signatory's Title/Office
	ELizabeth J. Freeman Printed Name and Signatory's Title/Office
	ELizabeth J. Freeman Printed Name and Signatory's Title/Office
	ELizabeth J. Freeman Printed Name and Signatory's Title/Office
The foregoing instrument was acknow	Elizabeth J. Freeman Printed Name and Signatory's Title/Office Iledged before me, a Florida Notary, this 21 st day of august 20 20 by:
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office Medged before me, a Florida Notary, this 21st day of August 2020 by: as Self (Type of Authority) (name of party on behalf of whom Instrument was executed)
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office Medged before me, a Florida Notary, this 21st day of August 2020 by: as Self (Type of Authority) (name of party on behalf of whom Instrument was executed)
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office reledged before me, a Florida Notary, this 21st day of August 2020 by: as Self for
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office Redged before me, a Florida Notary, this 21 day of August 20 20 by: as SUF (Type of Authority) (name of party on behalf of whom Instrument was executed) Reddentification Type FUL FLOSS - 230 - 49 - 832-0
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office Idedged before me, a Florida Notary, this 21 day of August 20 20 by: as SUF (Type of Authority) (name of party on behalf of whom instrument was executed) Identification Type FUL FLOSS - 230 - 69 - 832-0
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office Medged before me, a Florida Notary, this 21st day of August 2020 by: as SUF (Type of Authority) (name of party on behalf of whom Instrument was executed) High Holling Control of Control
The foregoing instrument was acknow Elizabeth Freeman	ELiZabeth J. Freeman Printed Name and Signatory's Title/Office Idedged before me, a Florida Notary, this 21st day of August 2020 by: as SUF (Type of Authority) (name of party on behalf of whom instrument was executed) Identification Type FUL FLOSS - 230 - 49-832-0