Inst. Number: 202312008343 Book: 1490 Page: 532 Page 1 of 1 Date: 5/11/2023 Time: 3:03 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 COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
05-75-16-04138-114 (21543)	
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): Bria.  a) Street (job) Address: 3545 544 84  2. General description of improvements: Mctal	r Patch Estates Parcel 14 pockwoods Glen Fort White 32038
3. Owner Information or Lessee information if the Lesse a) Name and address: Linda Clar b) Name and address of fee simple titleholder c) Interest in property DUNCC	e contracted for the improvements:  K 354 SW Backwoods Glen Ft. White  (if other than owner) 32038  Carlucci 268 SE Press Ruth Or. Lake City
b) Telephone No.: 386-205-3865  5. Surety Information (if applicable, a copy of the payment)  a) Name and address:	37025/
b) Amount of Band:	
6. Lender  a) Name and address: MA  b) Phone No.	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
Section 713.13(//(b), Florida Statutes: a) Name: // A	e following person to receive a copy of the Lienor's Notice as provided in  OF
b) Telephone No.:	
<ol> <li>Expiration date of Notice of Commencement (the expired):</li> </ol>	oiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE REC	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	Rinda Clarke
DANIEL J. CARLUCCI MY COMMISSION #H024545	mer or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  Lindo Cor K  inted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, a Florida Notary, this 11th day of May 2023 by:
Linda Clark as Own (Type of Aut	•
Personally Known OR Produced Identification	C Type I O
Notary Signature Davil J. Cal	Notary Stamp or Seal: