Inst. Number: 202412025769 Book: 1528 Page: 1860 Page 1 of 1 Date: 12/4/2024 Time: 9:12 AM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

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NOTICE OF COMMENCEMENT	Çļe	erk's Office Stamp	
ax Parcel Identification Number:		*	
17-3S-17-05000-005			
IE UNDERSIGNED hereby gives notice that improvement the Florida Statutes, the following information is provide			tion 713.13
Description of property (legal description):	D'OL RINN HÀIN' LINH IN TROME AL MÀIN MÈIL TURE EL MAN	FT, \$ 300 FT FOR POR CONFS 80 FT, W HIGE FT, N 80 FT, E 1	a PT TO POB & COM
a) Street (job) Address: 184 NW JIMMY WAY, LAKE	ECITY		
General description of improvements: Re Roof			
Owner Information or Lessee information If the Lessee of Name and address: BAUMAN KIMBERLY ANN	contracted for the improvements:	EI 920EE	
b) Name and address of fee simple titleholder (if	f other than owner) NA		
c) Interest in property NA Contractor Information			
a) Name and address: Lewis Welker Roofing		1118 S Marton Ave, Lake City, FL 32025	<u> </u>
b) Telephone No.: 866-959-7663		-	
5. Surety information (if applicable, a copy of the paymen) a) Name and address: NA			
b) Amount of Bond:			
c) Telephone No.:			
a) Name and address: N/A		and the second second	
 b) Phone No. Person within the State of Florida designated by Owner 			ad but Continu
 Person within the State of Florida designated by Owner 713.13(1)(a)7., Florida Statutes: 	upon whom notices or other doc	ritients way be served as brovid	su by aection
a) Name and address: NA			
b) Telephone No::			
Section 713.13(I)(b), Florida Statutes: a) Name: NA b) Telephone No.:	OF		***************************************
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I. Expiration date of Notice of Commencement (the expirits specified):	ation date will be 1 year from the	e date of recording unless a diffe	rent date
			ICE AF
WARNING TO OWNER: ANY PAYMENTS MADE COMMENCEMENT ARE CONSIDERED IMPROPE FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOFT INSPECTION. IF YOU INTEND TO OBTAIN FINANCOMMENCING WORK OR RECORDING YOUR N	ER PAYMENTS UNDER CHAI R PAYING TWICE FOR IMPR RDED AND POSTED ON THE NCING, CONSULT YOUR LEN	TER 713, PART I, SECTION OVEMENTS TO YOUR PRO JOB SITE BEFORE THE FIRS IDER OR AN ATTORNEY BE	713.13, PERTY; A IT
STATE OF FLORIDA			
COUNTY OF COLUMBIA 10	Kulul & San		13.5
Signature of Owner	er or Lessee, or Owner's or Lessee	's Authorized Office/Director/Pa	ntner/Manager
	Vinhachy A R.		
. Pr	inted Name and Signatory's Title/	Office	
he foregoing instrument was acknowledged before me, i	by means ofphysical presen	ce orlanline notarization, a	Florida Notary,
his 3 day of December, 2024	. by: Kimberly A Be	auman as owner	
usy or	(Name of Person)	(Type of Aut	harity)
for Kimberly A. Rauman	who is personally know	n OR produced identif	cation WHAHO
(name of party on behalf of whom instrument was ex	recuted)	n.	3 cg/3/5
1	ĭ	ype ID	- 130 m
Lasti Martie	-		
Notary Signature OVWW TIOUSIA	(Notary Stamp or Seal)		Updated 12/2023
0 1			2000
			PUBLIC