NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

14-4S-17-08346-029(30601)

Clerk's Office Stamp

Inst: 202312004745 Date: 03/20/2023 Time: 1:11PM

Page 1 of 1 B: 1486 P: 2069, James M Swisher Jr, Clerk of Court

Columbia, County, By: VC

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.

1. Description of property (legal Street (lob) Addre	gal description): AMPROLEZIPRICE CREE PSS: 355 SE Tevis Ave.	LUNR PHASE 2 DESC AS L'COMM 662 56 FT E OF SW CO	0R OF SW1/4 OF NE1/4, RUN N 441.93 FT FOR POB, RUN E 283.92 FT, N 148.59 F
2. General description of imp		Lake Oity, I L 0202	
3. Owner Information or Less	ee information if the Lessee con	tracted for the improvements	:
 a) Name and address 	SS: Tracy McAuliffe, 355 SE Tevis Ave., Lake	e City, Florida 32025	- 1
b) Name and addre	ss of fee simple titleholder (if ot rty	her than owner)	
A Contractor Information			· · · · · · · · · · · · · · · · · · ·
a) Name and address	Jason Elixson Construc	ction	7490 CR 18, Lake Butler, FL 32054
b) Telephone No.:	386-623-1741		
	cable, a copy of the payment bo		
b) Amount of Bond:	ss:		
c) Telephone No.:			
6. Lender			
a) Name and addre	ess:		2 X
b) Phone No			
7. Person within the State of I	lorida designated by Owner upo	on whom notices or other doc	uments may be served as provided by Section
a) Name and addres	ua Statutes:		
b) Telephone No.:			
		owing person to receive a copy	y of the Lienor's Notice as provided in
Section 713.13(I)(b),			
a) Name:	•	OF	
b) Tereprione No.:			— · · · ·
COMMENCEMENT ARE (FLORIDA STATUTES, ANI NOTICE OF COMMENCE INSPECTION. IF YOU INTO	CONSIDERED IMPROPER P D CAN RESULT IN YOUR PA MENT MUST BE RECORDE END TO OBTAIN FINANCIN	AYMENTS UNDER CHAP AYING TWICE FOR IMPR D AND POSTED ON THE NG, CONSULT YOUR LEN	EXPIRATION OF THE NOTICE OF TER 713, PART I, SECTION 713.13, OVEMENTS TO YOUR PROPERTY; A JOB SITE BEFORE THE FIRST DER OR AN ATTORNEY BEFORE
COMMENCING WORK O	R RECORDING YOUR NOT	ICE OF COMMENCEMEN	T.
STATE OF FLORIDA			/:
COUNTY OF COLUMBIA	10. Lec	- Millely	s Authorized Office/Director/Partner/Manager
	Signature of Owner or	Lossee, or Owner's or Lessee	s Authorized Office/Director/Partner/Manager
		,	
	Printed N	lame and Signatory's Title/Off	Rico.
	Timed N	anie and signatory 5 ritle/On	ice
The foregoing instrument was	acknowledged before me, a Flor	ida Notary, this 15+4	ay of MArch 2023 by:
			100000
Tracy McAuliffe (Name of Person)		forself	
(warne of Person)	(Type of Authority)	(name of party	on behalf of whom instrument was executed)
Personally Known OR Pr	oduced Identification Typ	eDL# M241812	71 88 70
Notary Signature		Notary Stamp	GLENN L. KEEN MY COMMISSION # HH 142611 EXPIRES: October 15, 2025 Bonded Thru Notary Public Underwrite