Inst. Number: 202412017179 Book: 1521 Page: 28 Page 1 of 1 Date: 8/12/2024 Time: 3:07 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT

	Cierk's Office Stamp
Tax Parcel Identification Number:	
01-4S-16-02709-002	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is provened to the Florida Statutes.	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): 01-4S	S-16-02709-002
a) Street (job) Address: <u>1895 SW LESUII</u> 2. General description of improvements: Re-Roof	E GLN, LAKE CITY, FL 32025
3. Owner Information or Lessee information if the Lesse	e contracted for the improvements:
 a) Name and address: Paul Scammacca I 	1895 SW LESLIE GLN, LAKE CITY, FL 32025 (if other than owner)
c) Interest in property <u>Owner</u> 4. Contractor Information	(ii other trial owner)
a) Name and address: Whiddon Construction	Company, Inc. 295 NW Commons Loop Ste. 115-262, Lake City, FL 32055
b) Telephone No.: (386) 754-7367 5. Surety Information (if applicable, a copy of the payments)	ent bond is attached):
a) Name and address:	<u> </u>
b) Amount of Bond: c) Telephone No.:	
6. Lender a) Name and address:	
D) Phone No	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
a) Name and address:	
	e following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	
a) Name: b) Telephone No.:	OF
9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified):	
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN 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 INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	
STATE OF FLORIDA	
COUNTY OF COLUMBIA 10 Signature of Owr	ner or Lessee's Authorized Office/Director/Partner/Manager
Paul Scammacca / Owner	
 -	nted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me,	a Florida Notary, this <u>30th</u> day of July , 20_24 , by:
Paul Scammacca as Own	er Self
(Name of Person) (Type of Auth	ority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification Type <u>Driver's License</u> .	
Notary Signature Mancy C. Will	Notary Stamp or Sea : Notary Public State of Florida Nancy C Miller My Commission HH 321064 Expires 10/11/2026