Inst. Number: 202312023652 Book: 1504 Page: 2043 Page 1 of 1 Date: 12/15/2023 Time: 3:45 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:	
34-35-17-07205-000(2757)	
of the Florida Statutes, the following information is pro-	
1. Description of property (legal description): 34-3 a) Street (job) Address: 303 SE Go 2. General description of improvements: Meta	IS-17-07205-000 Country Club estates BIKIO IF Club Ave. Lake City 32025 Lot 13 Coof-over
3. Owner Information or Lessee information if the Lesse a) Name and address: 60000 C0 b) Name and address of fee simple titleholder	re contracted for the improvements: 2004 303 SE GOLF Club Ave. Lake City 32025 r (if other than owner)
O) Telephone No.: Date	
b) Amount of Bond:	
Phone No.Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
-	ne following person to receive a copy of the Lienor's Notice as provided in
Section 713 13(M/h), Florida Statutes:	OF
b) Telephone No.:	
9. Expiration date of Notice of Commencement (the exp is specified):	piration date will be 1 year from the date of recording unless a different date
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 Signature of Ow	Port or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Pri	inted Name and Signatory's Title/Office
(Name of Person) as OWN (Type of Aut	
Personally Known OR Produced Identification Notary Signature Notary Signature OR Produced Identification Notary Signature OR Produced Identification Notary Signature	DANIEL J. CARLUCCI MY COMMISSION #HH024545 EXPIRES: JUL 28, 2024 Bonded through 1st State Insurance