Inst. Number: 202112007829 Book: 1435 Page: 1897 Page 1 of 1 Date: 4/22/2021 Time: 10:31 AM 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:	
27-6S-17-09792-003	
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is prov	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): Berry, Gene a) Street (job) Address: 18587 S US Hwy 441 High S	prince FI 32643
2. General description of improvements: Single Family Dw	
3. Owner Information or Lessee information if the Lesse a) Name and address: Genelle Berry 18587 S US Hwy b) Name and address: formation if the Lesse b) Name and address: The least the	441 High Springs, FL 32643
c) Interest in property Owner Construct SFD	(if other than owner)
4. Contractor Information a) Name and address: b) Telephone No.: 352-215-7255	th Ave Alachua, FL 32615
5. Surety Information (if applicable, a copy of the payme a) Name and address:	
b) Amount of Bond: c) Telephone No.:	
6. Lender a) Name and address:	
b) Phone No	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713.13(I)(b) Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in OF
Expiration date of Notice of Commencement (the expiration is specified):	oiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROI FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	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 DRDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	Tax Member
Signature of Ow	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager Office Director/Partner/Manager Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	, by means of physical presence or online notarization, a Florida Notary,
this 22nd day of April 30 2	I hu Jasm Roberts as Member
for Sowhtrust Construction (name of party on behalf of whom instrument was e	executed)
Notary Signature — — — — — — — — — — — — — — — — — — —	Type ID DANIELLE M. MARDEN (Notary Stamp or Seal) MY COMMISSION # HH 088544 EXPIRES: February 6, 2025 Bonded Thru Notary Public Underweters