

Electronically Certified Official Record

DOCUMENT INFORMATION

Agency Name: Columbia County Clerk of the Circuit Court and

Comptroller

Clerk of the Circuit Court: The Honorable James M. Swisher, Jr.

Date Issued: 2/12/2025 8:30:24 AM

Unique Reference Number: BAA-DAAB-BCACD-CACFBCAACIBC-EFEBAB-D

Instrument Number: 202512002812

Requesting Party Code: 3001

Requesting Party

24B8D0AE-82C0-4CB3-8153-7AC5D1DE6EB8-SF

CERTIFICATION

Pursuant to Sections 90.955(1) and 90.902(1), Florida Statutes, and Federal Rules of Evidence 901(a), 901(b)(7), and 902(1), the attached document is electronically certified by The Honorable James M. Swisher, Jr., Columbia County Clerk of the Circuit Court and Comptroller, to be a true and correct copy of an official record or document authorized by law to be recorded or filed and actually recorded or filed in the office of the Columbia County Clerk of the Circuit Court and Comptroller. The document may have redactions as required by law.

HOW TO VERIFY THIS DOCUMENT

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**The web address shown above contains an embedded link to the verification page for this particular document.



NOTICE OF COMMENCEMENT	Clerk's Office Stamp	
Tax Parcel Identification Number:		
04-45-16-02752-000(11403)		
THE UNDERSIGNED hereby gives notice that improvem of the Florida Statutes, the following information is pro	ents will be made to certain real property, and in accordance with Section 713.13 wided in this NOTICE OF COMMENCEMENT.	
a) Street (job) Address: 281 S	A WESTWOOD ACTES TO DC1395 - 17 DC1397-324 PB 1397- ZUIU WD 1376-	728 1487-559
2. General description of improvements:	RUOF	
3. Owner Information or Lessee information if the Lesse a) Name and address: Fortunas Time	ee contracted for the improvements:	
b) Name and address of fee simple titleholder	r lif other than owner) NA NA	
c) Interest in property		
4. Contractor Information	6020 PARKWAY DR N #500	
a) Hame and courters.	ITIAL SERVICES, LLC CUMMING, GA 30040	
b) Telephone No (904) 337-0509		
5. Surety Information (if applicable, a copy of the payment and address: N/A	ent bond is attached):	
a) Name and address: N/A b) Amount of Bond: N/A		
c) Telephone No.: N/A		
6. Lender	The state of the s	
a) Name and address: N/A		
b) Phone No. N/A		
	ner upon whom notices or other documents may be served as provided by Section	
713.13(1)(a)7., Florida Statutes:		
a) Name and address: N/A		
b) Telephone No.: N/A		
8. In addition to himself or herself, Owner designates the	he following person to receive a copy of the Lienor's Notice as provided in	
Section 713.13(I)(b), Florida Statutes:		
a) Name: N/A	ofN/A	
b) Telephone No.: N/A		
9. Expiration date of Notice of Commencement (the exits specified): N/A	piration date will be 1 year from the date of recording unless a different date	
	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF	
	PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13,	
	OUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A	
	ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST	
	ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE	
COMMENCING WORK OR RECORDING YOUR	R NOTICE OF COMMENCEMENT.	
STATE OF FLORIDA		
COUNTY OF COLUMBIA 10	In object the	
Signature of Ov	wner of tessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager	
JAYSON ALBRIGHT Netary Public-State of Florida		
Commission # HH 459379	limothy tortunas	
My Commission Expires	Printed Name and Signatory's Title/Office	
February 04, 2023		
The foregoing instrument was acknowledged before me	e, by means of physical presence or online notarization, a Florida Notary,	
this 10 day of February 20-2	5 by: Timothy Fortunas as Homecuner	
- · 	(Name of Person) (Type of Authority)	
for Taylor Albright		
(name of party on behalf of whom histrument was	who is personally known OR produced identification	
triaine or party on behalf of whom histrument was o		
Л	Type IDDRIVER'S LICENSE	
Notary Signature	(Notary Stamp or Seal)	

