

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number*

15 48 16 03 000 107

Clerk's Office Stamp

Imp: 201312013509 Date 9/3/2013 Time 12 22 PM
DC P DeWitt Cason Columbia County Page 1 of 1 B 1260 P 2362

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 description). Lot 7 Block A Forest Country 3rd Addition ORB 787-639 Probate 95-116 CP ORB 817-746, 848-2531
a) Street (job) Address: 121 Loblolly PL Lake City FL 32624
JFWs 876 1790
963 2655
- 2 General description of improvements: Metal roof over shingles.
- 3 Owner Information
a) Name and address: Omar Arocho 121 Loblolly PL Lake City FL 32624
b) Name and address of fee simple titleholder (if other than owner) -
c) Interest in property owner
- 4 Contractor Information
a) Name and address: Lewis Walker P.O. Box 554 Lake Butler FL 32054
b) Telephone No 386 496 0940 Fax No (Opt) 386 496 0925
- 5 Surety Information
a) Name and address /
b) Amount of Bond /
c) Telephone No / Fax No. (Opt.) /
- 6 Lender
a) Name and address /
b) Phone No /
- 7 Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served
a) Name and address /
b) Telephone No / Fax No. (Opt.) /
- 8 In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes
a) Name and address /
b) Telephone No / Fax No. (Opt.) /
- 9 Expiration date of Notice of Commencement (the expiration date is one 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 Omar R. Arocho
Signature of Owner or Owner's Authorized Officer/Director/Partne./Manager
Omar R. Arocho
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 30th day of August, 2013, by Omar Arocho as authority (type of authority, e.g. officer, trustee, attorney fact) for himself (name of party on behalf of whom instrument was executed).

Personally Known / OR Produced Identification X Type Hospital ID

Notary Signature Gail C. Hartmaier Notary Stamp or Seal



GAIL C. HARTMAIER
MY COMMISSION # EE 877868
EXPIRES June 24, 2017
Bonded Thru Budget Notary Services

---AND---

11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief

Omar R. Arocho
Signature of Natural Person Signing (in line #10 above)