NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

18-45-17-08477

Clerk's Office Stamp

Inst: 202312023502 Date: 12/14/2023 Time: 2:19PM
Page 1 of 1 B: 1504 P: 1721, James M Swisher Jr, Clerk of Court
Columbia, County, By: DN

Deputy Clerk

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): 439 SW GRELN RIDGE LANE LAKE CITY 32025
2. General description of improv	
3. Owner Information or Lessee i	nformation if the Lessee contracted for the improvements:
a) Name and address:	FRANKLIN FERY 439 SW GEFENRIOSE LANG, LAKE INY 12025
b) Name and address of	of fee simple titleholder (if other than owner)
c) Interest in property	1-710 / SUBSECTION A 1110 MARKED 10 SUBSECTION OF MARKED 10 SU
A Contractor Information	
a) Name and address:	FRANKLIN FREY 439 SW GREENAIDGE LAND, LAKE CITY 32025
b) Telephone No.:	610-730-7420
5. Surety Information (if applical	ole, a copy of the payment bond is attached):
 a) Name and address: 	
b) Amount of Bond:	
6. Lender	
b) Phone No	
	rida designated by Owner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida	
b) Telephone No.:	
	elf, Owner designates the following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), F	
	OF
b) Telephone No.:	
Is specified):	IY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
FLORIDA STATUTES, AND NOTICE OF COMMENCEM INSPECTION. IF YOU INTER	ONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A SENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NO TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	
COUNTY OF COLUMBIA .	Signature of Swage or Lessee or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Signature of Swiner or Lessee, or Owner's or Lessee's Authorized Uffice/Director/Partner/Manager
	FRAUKLIU A FREY
	Printed Name and Signatory's Title/Office
The foregoing instrument was a	cknowledged before me, a Florida Notary, this 14 day of December, 20,23 by:
Franklin Freu	A
	as OWORY for
(Name of Rerson)	(Type of Authority) (name of party on behalf of whom instrument was executed)
Personally Known OR Pro	duced Identification
Λ	Λ
Notary Signature OVM	Notary Stamp or Seal: CARMEN GRAY Notary Public - State of Floric Commission # HH 215822
	Bonded through National Notary As