Inst. Number: 201212011667 Book: 1239 Page: 1251 Date: 8/7/2012 Time: 12:50:02 PM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

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inst 201212011667 Date 8/7/2012 Time 12:50 PM

NOTICE OF COMMENCEMENT	Devviit Cason Columbia County Page 1 of 1 B.1239 P.1251
Tax Parcel Identification Number 22-45-17-08663-	COUNTY Clerk's Office Stamp or Seal
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): COMM, Inters a) Street (job) Address: 2860 SE (R22 La 2. General description of improvements: Parat	S P.IN URZSZ JW LINE OF NE Yn
3. Owner Information a) Name and address: Patricia Gemen 2 b) Name and address of fee simple titleholder (if other than own c) Interest in property 4. Contractor Information	er)
a) Name and address: Caleb Lauchlin 1625 b) Telephone No: 386-752-4622 5. Surety Information	Fax No. (Opt.) Fax No. (Opt.)
a) Name and address: b) Amount of Bond:	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: Fax No. (Opt.)
8. In addition to himself, owner designates the following person to receive	
Florida Statutes:	Fax No. (Opt.)
9. Expiration date of Notice of Commencement (the expiration date is on	e 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.	
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The thregoing instrument was acknowledged before me, a Florida Notary, this	
fact) for	(name of party on behalf of we in insurances was account
Personally Known OR Produced Identification Type T	BARBARA SAUNDERS Notary Public, State of Florida Commissions EE 170888 My comm. expires Feb. 25, 2018
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. Signature of Natural Person Signing (in line #10 above.)	