Tax Parcel Identification Number		
35-48-17-09033-163 (33240)		
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is pro	vided in this NOTICE OF COMMENCE	EMENT
1. Description of property (legal description): LCT3BIOCKD a) Street (job) Address. 220 SE BRITT PL LAKE CI	BRENT HEIGHTS S/D. 746-1522 778-53 822 1718 WD 094- 197 CT	
2. General description of improvements: HURRICANE DE	EBBY STORM DAMAGE REPAIRS	
3 Owner Information or Lessee information if the Lesse a) Name and address: ONEAL PROPERTIES LLC PO	BOX 2166 LAKE CITY FL 32056	
 b) Name and address of fee simple titleholder c) Interest in property 		
Contractor Information a) Name and address: ONEAL CONTRACTING INC		
b) Telephone No 386-752-7578	FO BOX 3303 EARE CITTE 32030	
5. Surety Information (if applicable, a copy of the payme	ent bond is attached).	
a) Name and address		
b) Amount of Bond:		
c) Telephone No		_
6 Lender a) Name and address:		
b) Phone No		
7 Person within the State of Florida designated by Own	ner upon whom notices or other doc	uments may be served as provided by Section
713 13(1)(a)7 , Florida Statutes		
a) Name and address		
b) Telephone No.		
8 In addition to himself or herself, Owner designates th Section 713-13(I)(b), Florida Statutes	-	•
a) Name:		
b) Telephone No		
9 Expiration date of Notice of Commencement (the expired is specified):	•	e date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAI COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE RECO INSPECTION. IF YOU INTEND TO OBTAIN FINA COMMENCING WORK OR RECORDING YOUR	PER PAYMENTS UNDER CHAF IUR PAYING TWICE FOR IMPR ORDED AND POSTED ON THE ANCING, CONSULT YOUR LEN	PTER 713, PART I, SECTION 713.13, OVEMENTS TO YOUR PROPERTY; A JOB SITE BEFORE THE FIRST IDER OR AN ATTORNEY BEFORE
STATE OF FLORIDA COUNTY OF COLUMBIA 10	Danette &	's Authorized Office/Director/Partner/Manager
Signature of Ow	Ther or Lessee, or Owner's or Lessee	S Authorized Office/Director/Partner/Manager
	Dane He	0.20
	Printed Name and Signatory's Title/	Office
The foregoing instrument was acknowledged before mo	e by means of hysical presen	ce oronline notarization, a Florida Notary.
this 15th day of August 202	(Name of Person)	(Type of Authority)
for O'NIQ Properties, LLC (name of party on behalf of whom instrument was	who is personally knowi executed)	n OR produced identification
	Τ	уре
Notary Signature	Whotary Stamp or Seal	TERESA HORNE Commission # HH 445575 Expires November 5, 2027
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