Inst. Number: 202412014850 Book: 1518 Page: 2292 Page 1 of 1 Date: 7/11/2024 Time: 1:48 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Fax Parcel Identification Number:	
33-5S-16-03745-203	
THE UNDERSIGNED hereby gives notice that improvement 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.
1. Description of property (legal description): Lot 3 S a) Street (job) Address: 1026 SW Sunvie	w St Fort White Fl
2. General description of improvements: OII FTAIII	e Modular nome
Dwner Information or Lessee information if the Lesse a) Name and address: Kevin & Charisse	ee contracted for the improvements: Hardegree 4029 SE 20th Pl #503 ape Coral Fl 33904
b) Name and address of fee simple titleholder c) Interest in property Fee Simple	r (if other than owner)
Contractor Information     A) Name and address: Florida Modular     NA	Homes 1800 SR 207 St Augustine Fl 32086
Surety Information (if applicable, a copy of the payment	ent bond is attached):
a) Name and address: NA	,
c) Telephone No.:	
Lender	
a) Name and address: NA	
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713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713.13(I)(b), Florida Statutes:  a) Name: NA	ne following person to receive a copy of the Lienor's Notice as provided in
b) Telephone No.:	A THE PARTY OF THE
Expiration date of Notice of Commencement (the exp is specified):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILIORIDA STATUTES, AND CAN RESULT IN YOU INTICE OF COMMENCEMENT MUST BE RECONSPECTION. IF YOU INTEND TO OBTAIN FINATION WORK OR RECORDING YOUR TATE OF FLORIDA OUNTY OF COLUMBIA	Kevin Hardegree
Signature of Own	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
K	evin Hardegree - atrice)
	nted Name and Signatory's Title/Office
ne foregoing instrument was acknowledged before me,	, a Florida Notary, this de day of Will 2021 by:
Name of Person) (Type of Auth	
ersonally Known OR Produced Identification	<b>-</b>
A	
otary Signature Oll N. R. V. A. K.	Description of Seals My Commission # HH 44: