Inst. Number: 202112017209 Book: 1445 Page: 2346 Page 1 of 1 Date: 8/26/2021 Time: 12:48 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
Tay Darved Identificanting Number	
Tax Parcel Identification Number:	
19-38-16-02181-815	
of the Florida Statutes, the following information is pro-	±
1. Description of property (legal description): 19	35-16 Lake City, FI 33055
a) Street (Job) Address: 3756 Na) 2. General description of Improvements: RE-A	SAWN Rd., Lake City, FL 32055
3. Owner information or Lessee information if the Lesse  a) Name and address: DOW OUN (100)  b) Name and address of fee simple titleholde  c) Interest in property	exponented for the improvements:  A IRUST 145 KIVERSIGE AVE., Suite 450  or (If other than owner) JACKSDAVIIIE, FL 32202
a) Name and address: Bakky 10 b) Telephone No.: 386-867-5	1960 10153 W. Huy 90, Lake City, FI 32055
<ol> <li>Surety Information (if applicable, a copy of the payn a) Name and address:</li> </ol>	nent bond is attached);
c) Telephane No.:	
6. Lender	Territorio de la companya del companya de la companya del companya de la companya del la companya de la company
a) Name and address:	
7. Person within the State of Florida designated by Owi 713.13(1)(a)7., Florida Statutes:	ner upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Application of the second seco	And the second s
Section 713.13(I)(b), Florida Statutes:	he following person to receive a copy of the Lienor's Notice as provided in
b) Telephone No.:	OF
	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO NOTICE OF COMMENCEMENT MUST BE RECI INSPECTION. IF YOU INTEND TO OBTAIN FINA COMMENCING WORK OR RECORDING YOUR STATE OF FLORIDA COUNTY OF COLUMBIA  10.  Signature of Ow	where of Jessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager  Charles Authorized Office/Director/Partner/Manager  Charles Authorized Office
The foregoing instrument was acknowledged before me	and the state of t
Teresa Boudoin as (Type of Aut	thority) for (name of party on behalf of whom instrument was executed)
Personally KnownOR Produced Identification	Type
Notary Signature Such S. Verchin	JENA STOREY VERCHER  Commission # GG 183986  Commission # GG 183986
0	Expires December 3, 2021  Bonded Thru Troy Fein Insurance 800-385-7019