Inst. Number: 202212016658 Book: 1474 Page: 198 Page 1 of 1 Date: 8/24/2022 Time: 2:54 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	Clark's Office Stamp
ਜਰਮ Parcel Identification Number:	
DO (0000-1/803-00)	
00 CO(10 10 00 100	
THE UNDERSIGNED hereby gives notice that improvements will be made to certa of the Florida Statutes, the following information is provided in this NOTICE OF C	OMMENCEMENT.
1. Description of property (legal description): 1000000000000000000000000000000000000	<i>D</i> DD
a) Street (job) Address: 327 S WOVION WAVE 10 2. General description of Improvements: 30 WOVI-C	recity 4.310/5
3. Owner Information or Lessee Information if the Lessee contracted for the Impress Name and address: Warcus Files 1000 1000 1000 1000 1000 1000 1000 10	ovements:
 b) Name and address of fee simple titleholder (if other than owner) 	
c) Interest in property Ot 1 XV X 4. Contractor Information	
a) Name and address: Paul McDaniel	2230 SE Baya Dr. LAke City, FL 32025
b) Telephone No.: 388-752-4072 5. Surety Information (if applicable, a copy of the payment bond is attached):	
a) Name and address:	
b) Amount of Bond: c) Telephone No.:	
6. Lender	
a) Name and address:	
7. Person within the State of Florida designated by Owner upon whom notices of	
713,13(1)(a)7., Florida Statutes:	
a) Name and address:	
•	
 In addition to himself or herself, Owner designates the following person to re Section 713.13(i)(b), Florida Statutes: 	celve a copy of the Lienor's Notice as provided in
a) Name:OF	•
b) Talephone No.:	
9. Expiration date of Notice of Commencement (the expiration date will be 1 y is specified): —90-Days	ear from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER A	1
COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UN	DER 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 POSTE INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT	O ON THE 108 SITE BEFORE THE FIRST
COMMENCING WORK OR RECORDING YOUR NOTICE OF COMM	ENCEMENT.
STATE OF FLORIDA	
COUNTY OF COLUMBIA 10. X	
Signature of Owner or Lessee, or Owne	r's or Lessee's Authorized Office/Director/Partner/Manager
Marcus (-akonberru
Printed Name and Signate	pry's Title/Office
	01 10 10
The foregoing instrument was acknowledged before me, a Florida Notary, this	21 day of 144 QUST 2022 by:
MAYCUS FILENDEY VLAS OWNER 507	O
	name of party on behalf of whom Instrument was executed)
·	and or party on barran of miles institution was enceatedy
Personally Known OR Produced Identification Type	· · · · · · · · · · · · · · · · · · ·
/ (//) \ / ·	\$*************************************
Notary Signature	Notary Stamp or Seal: Notary Public State of F