Inst. Number: 202112020955 Book: 1449 Page: 2622 Page 1 of 1 Date: 10/14/2021 Time: 2:44 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 |
|--|---|
| Tax Parcel Identification Number: | |
| _ | |
| 33.33.16.62434.010 | |
| 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): 33.53.16.70243-1.010 a) Street (Job) Address: 170.500 1000554 CV+ Lake CV+4 194 32074 | |
| a) Street (job) Address: 110 SW 100SSU CY+ CARE CITY TO 32074 | |
| 2. General description of improvements: | Shingle ' |
| 3. Owner Information or Lessee information if the Lessee contracted for the Improvements: a) Name and address: SOYOL PYONON_1705W WOSSI (r+ lake C+ 432024) b) Name and address of fee simple titleholder (if other than owner) c) Interest in property OWOEY | |
| A Control of the Landson | |
| a) Name and address: Paul McDaniel | 2230 SE Baya Dr. LAke City, FL 32025 |
| b) relephone No.: 300-752-1072 | |
| 5. Surety Information (if applicable, a copy of the payma) 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 Ow | ner upon whom notices or other documents may be served as provided by Section |
| 713.13(1)(a)7., Florida Statutes: | nor apon internal control design and many of several or provided by School |
| | |
| b) Telephone No.: | |
| 9 In addition to himself as homelf Change designates t | he following person to receive a copy of the Lienor's Notice as provided in |
| Section 713.13(I)(b), Florida Statutes: | ne ronowing person to receive a copy of the ciencit's Notice as provided in |
| a) Name: | OF |
| b) Telephone No.: | |
| 9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified):90-Days | |
| 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, COMSULT YOUR LENDER OR AN ATTORNEY BEFORE | |
| COMMENCING WORK OR RECORDING YOU | R NOTICE OF COMMENCEMENT. |
| STATE OF FLORIDA | |
| COUNTY OF COLUMBIA 12 | / // Oren |
| Signature of O | wner or tessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager |
| t . | |
| × | George H. Drawvov |
| · | rinted Name and Signatory's Title/Office |
| | <i>(11)</i> |
| The foregoing instrument was acknowledged before me, a Florida Notary, this 14 day of 0040ber 20 21 by: | |
| GEOVAL BYANNO : as Owner | , |
| (Name of Person) as OWN (Type of Ar | thority) for (name of party on behalf of whom instrument was executed) |
| Personally Known OR Produced Identification Type | |
| | \$ |
| Notary Signature | Notary Stamp or Seal: Notary Public State of Florida |