Inst. Number: 202312012172 Book: 1493 Page: 2217 Page 1 of 1 Date: 6/29/2023 Time: 9:15 AM 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:	_
14-5S-15-00459-210	·
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is proven	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): COMI a) Street (job) Address: 559 SW MONTE	M SW Cor OF NW 1/4 of SW 1/4 R EGO AVE Lake City, FL 32024
2. General description of improvements: REPLAC	CE WINDOWS AND/OR DOORS
3. Owner Information or Lessee information if the Lesse a) Name and address: Collin Lamb 559 b) Name and address of fee simple titleholder c) Interest in property Owner	e contracted for the improvements: SW MONTEGO AVE Lake City, FL 32024 (if other than owner)
	of NE FL - Brian Wall 9440 Philips Hwy Suite 1 Jacksonville FL 32256
5. Surety Information (if applicable, a copy of the payme a) Name and address: N/A	
c) Telephone No.:	
6 Lender	
b) Phone No	
713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713-13(I)(b), Florida Statutes:	e following person to receive a copy of the Lienor's Notice as provided in OF
9. 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 IMPROPRIED FLORIDA STATUTES, AND CAN RESULT IN YOUNOTICE OF COMMENCEMENT MUST BE RECO	PE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF PER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, UR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A DRIDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	latt X.
COUNTY OF COLUMBIA 10 Signature of Ow	ner or Lessee, or Swner's or Lessee's Authorized Office/Director/Partner/Manager
	COLIN LAMB
	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, by means of X physical presence or online notarization, a Florida Notary,
this 15th day of June 20 23	Colin Lamb as owner (Name of Person) (Type of Authority)
60.	
for	
Notary Signature	(Notary Stamp or Seal) MICHAEL DAVID BENNETT MY COMMISSION # HH 404969 EXPIRES: June 3, 2027