Inst. Number: 202312017001 Book: 1498 Page: 1549 Page 1 of 1 Date: 9/11/2023 Time: 10:30 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:	
25-7S-16-04321-039	
THE UNDERSIGNED hereby gives notice that improveme of the Florida Statutes, the following information is pro-	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): W1/2 of a) Street (job) Address: 634 Feather Ln Ft	f W1/2 of SW1/4 of SE1/4(AKA lot 48 unit 1Rum Island Ranches White, FL 32038 unrec). ORB
2. General description of improvements: INSTALLA	TION OF SMART JACKS TO PERMANENTLY SUPPORT FLOORING
Owner Information or Lessee information if the Lesse a) Name and address:ANE GROSS 034 b) Name and address of fee simple titleholder	FEATHER LANE FYWHITE, FL 32038 (if other than owner)
c) interest in property OVVNER	
4. Contractor Information a) Name and address: 173/1/1/ b) Telephone No.: 904-902-7801	Foundation Prepar 2203 Hamilton St ent bond is attached): Julies NVIII. FZ 32210
a) Home and address.	
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.:	
b) Telephone No.:	iration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROFFLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO	DE 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 DRDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY REFORE
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	1000
Signature of Own	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
The foregoing instrument was acknowledged before me,	by means of physical presence or online notarization, a Florida Notary,
this 11 day of Styriber, 20 1	as
for .	(Name of Person) (Type of Authority)
(name of party on behalf of whom instrument was ex	who is personally known OR produced identification Vecuted)
Notary Signature Chalaigue	Notary Public State of Florida 9 1020 - 453 - 46-160 - D Notary Seding LaiGaie Notary Seding LaiGaie Expires 2/24/2027