Inst. Number: 202412012689 Book: 1516 Page: 2545 Page 1 of 1 Date: 6/13/2024 Time: 3:18 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:	
28-45-17-08836-002	
00 10 11 000 002	
of the Florida Statutes, the following information is pro-	
1. Description of property (legal description):	SFNW14 OF SW14 OF SE14 ORB 731-012-P22-237
2. General description of improvements: $- C - C = C = C = C = C = C = C = C = C $	of 2038 414 SW HITCHEST ST LARE CHY, The SECOND
b) Name and address of fee simple titleholder c) Interest in property Owner 4. Contractor Information a) Name and address b) Telephone No.: CONTRACTOR INFORMATION b) Telephone No.: CONTRACTOR INFORMATION contractor Information (if applicable, a copy of the payments)	Suppon of Vera Thompson (if other than owner) Tachendogy SE, LLC SO2NW Dange St. LAKE City 52 3205
b) Amount of Bond:	
c) Telephone No.:	
a) Name and address:	
7. Person within the State of Florida designated by Owr 713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
8. In addition to himself or herself, Owner designates th	ne following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	
a) Name: b) Telephone No.:	OF
Expiration date of Notice of Commencement (the expires specified):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILING STATUTES, AND CAN RESULT IN YOUR 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 BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	Nea 1111 Marson
COUNTY OF COLUMBIA 10 \(\frac{1}{2}\) Signature of Ow	ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Printed Name and Signatory's Title/Office	
	12 th 1
The foregoing instrument was acknowledged before me, a Florida Notary, this 12 th day of JUNE, 20 24, by: JANINE FLEGERT as NOTARY for JOSEPH WAYNE THOMPSON. (Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)	
JANINE FLEGERT BS NOTAI	EY for JOSEPH WAYNE THOMPSON.
(Name of Person) (Type of Aut	chority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification Type	
Notary Signature Janine Hegert	Notary Stamp or Seal JANINE M. FLEGERT Commission # HH 534684 Expires June 4, 2028