Inst. Number: 202512003042 Book: 1533 Page: 598 Page 1 of 1 Date: 2/13/2025 Time: 8:22 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
	CEIX 3 Office Stamp
Tax Parcel Identification Number:	
12-45-15-00347-020	
of the Florida Statutes, the following information is prov	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): 12-L a) Street (job) Address: 25550 2. General description of improvements: 14-ta.	15-15-00347-020 (1201) aruso pl. Lake City, Fi 32024 root-ever
3. Owner Information or Lessee information if the Lesse a) Name and address: She by Tay (b) Name and address of fee simple titleholder c) Interest in property OWNEY 4. Contractor Information a) Name and address: Nicholas Carly	e contracted for the improvements: Or 335 SW Caruso Pl. Lake City 32024 (if other than owner) ACC: 268 SE Press Ruth Or. Lake City, FL 32025
b) Telephone No.: 386-305-336. 5. Surety Information (if applicable, a copy of the payment a) Name and address:	Sent bond is attached):
b) Amount of Bond: c) Telephone No.:	
6. Lender a) Name and address: b) Phone No.	
Telephone No.: In addition to himself or herself, Owner designates the Section 713.1af(Vb). Florida Statutes:	ne following person to receive a copy of the Lienor's Notice as provided in
a) Name: //// b) Telephone No.:	OF
Expiration date of Notice of Commencement (the expire is specified):	piration date will be 1 year from the date of recording unless a different date
WARNING TO OWNER: ANY PAYMENTS MAD COMMENCEMENT ARE CONSIDERED IMPROI FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECO INSPECTION. IF YOU INTEND TO OBTAIN FINA COMMENCING WORK OR RECORDING YOUR	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
STATE OF FLORIDA COUNTY OF COLUMBIA 10.	Shilby Taylor ner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
DANIEL J. CARLUCCI MY COMMISSION #HH572186 EXPRES: 811 28 2028	ner or Lessee, or Öwner's or Lessee's Authorized Office/Director/Partner/Manager onted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me Shelby Taylor as OWN (Name of Person) (Type of Aut	1
Personally KnownQR Produced Identification	1 ·
Notary Signature Daw V. Call	DANIEL J. CARLUCCI MY COMMISSION & HH572186 EXPRES: JUL 28, 2028 Bonded through 1st State insurance