Clerk's Office Stamp

NOTICE OF COMMENCEMENT

Tax Parce) Identification Number· 29-45-17-08854-005	Inst:201412002579 Date:2/25/2014 DC,P DeWitt Cason,Colum	1 Time:1 42 PM Ibla County Page 1 of 1 B.1270 P 330	
THE UNDERSIGNED hereby gives notice that improvemer Florida Statutes, the following information is provided in		accordance with Section 713 13 of the	·
1. Description of property (legal description): COM  a) Street (Job) Address: SW. F  2 General description of Improvements:	RESLEY TERRACE LAKE DITY IFL 3	= 160.56 FT, N 1165.2 FT F w 175 FT TO POB ORB 372.595.EX 2025	ca POB Ca KO Afw
3 Owner Information	PATEL DAMAGES TO HOME		
a) Name and address: BRADY RAYMO     b) Name and address of fee simple titleholder	WD & PATRICIA 343 SW.	PRESLEY TERRACE LAKE City.	FL 32025
c) Interest in property	if other than owner)		
4 Contractor Information East EHRL	PECIALISTS 244 NW 9TH	STREET DEALA. FL 34475	
b) Telephone No 352-732-2322	Fax No (Opt)	32- 732-8950	
5 Surety Information			
a) Name and address.  b) Amount of Bond	A Fax No (Opt.)	N/A	
c) Telephone No.	Fax No (Opt.)	NIA	
6 Lender		7	
a) Name and address:	2		
7 Identity of person within the State of Florida designate		nents may be served:	
a) Name and address: RESTORATION SOC	CIPLISTS 244 NW. 974 5%	Neer OCALA, FL 34475	
b) Telephone No 352 - 732-432	FAX IVO. ICOL.	352-732-8950	
8 in addition to himself, owner designates the following		as provided in Section	
713.13(I)(b), Florida Statutes: ERIC EMPLUND			
a) Name and address: RESTORATION 5	Decialists 244 NW. 9TH S	STRICT OCALA, EL 34475	
b) Telephone No.: 352 - 732 - 232	Fax No. (Opt.)	352-732-8450	
9 Expiration date of Notice of Commencement (the expl is specified):	ration date is one year from the date of record	ling unless a different date	
WARNING TO OWNER: ANY PAYMENTS MADE BY THE C IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SE IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF CO INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CO YOUR NOTICE OF COMMENCEMENT.	CTION 713.13, FLORIDA STATUTES, AND CAN R MMENCEMENT MUST BE RECORDED AND POST	RESULT IN YOUR PAYING TWICE FOR TED ON THE JOB SITE BEFORE THE FIRST	
STATE OF FLORIDA COUNTY OF COLUMBIA	10. Signature of Owner or Owner's Authorized O PATRICIA T. E	office/Director/Partner/Manager	
The foregoing instrument was acknowledged before me , a l	Florida Notary, thisday of	2014 by	
PATRICIA T. BRADY as	OWNER (type o	of authority, e.g. officer, trustee, attorney	
fact) for PATRICIA T. BRADY	(name of party on k	behalf of whom instrument was executed)	
Personally Known OR Produced Identification	ype I-L DRIVERS LICENSE	NOTARY PUBLIC-STATE OF FLORIDA	
Notary Signature Lugay D. Rh.A	Notary Stamp or Seal	Gregory D. Roberts Commission # DD997078 Expires JUNE 20, 2014 BONDED THRU ATLANTIC BONDING CO., INC.	
11 Verification pursuant to Section 92.525, Florida St the facts stated in it are true to the best of my kn			
	Signature of Natural Person	J. Brady Staning (in line #10 shove )	
	2.0	pa (aa #201.61)	