Inst. Number: 201312005543 Book: 1252 Page: 2252 Date: 4/11/2013 Time: 2:02:28 PM Page 1 of 1 P.DeWitt Cason Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number. 34-35-17-06/83-001	Usst 201312005543 Date 4/11/2013 Time 2 02 PM DC,P DeWitt Cason Columbia County Page 1 of 1 B 1252 P 2252
THE UNDERSIGNED hereby gives notice that improvements Florida Statutes, the following information is provided in the	s will be made to certain real property, and in accordance with Section 713.13 of the nis NOTICE OF COMMENCEMENT.
1. Description of property (legal description): 10+0 a) Street (job) Address: 20) 5E 14-00 2 General description of improvements 200	O Block A Bellaire Subdivision Place Lake City, FL 32025
4. Contractor Information a) Name and address: May	other than owner)  1 2525 Bawlykury Cir W Jax, Fr 522410  Fax No. (Opt.)
5. Surety information  a) Name and address  b) Amount of Bond.  c) Telephone No.  6 Lender	Fax No. (Opt.)
a) Name and address:     b) Phone No.  Identity of person within the State of Florida designated     a) Name and address.	by owner upon whom notices or other documents may be served:
8. In addition to himself, owner designates the following p 713.13(I)(b), Florida Statutes a) Name and address: b) Telephone No	erson to receive a copy of the Lienor's Notice as provided in Section  Fax No (Opt.)
is specified).  WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNERD PAYMENTS UNDER CHAPTER 713, PART I, SEC IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COM	NNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED TION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ISULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
STATE OF FLORIDA COUNTY OF COLUMBIA	Signature of Owner's Authorized Office/Director/Partner/Manager  France Kramer  Printed Name
( The foregoing instrument was acknowledged before me , a Fic	orlda Notary, this 10 day of AVII 20 13 by
fact) for	(type of authority, e.g. officer, trustee, attorney  (name of party on behalf of whom instrument was executed).
Personally Known OR Produced IdentificationTy	pe
Notary Signature 11. Verification pursuant to Section 92.525, Florida Stat	
the facts stated in it are true to the best of my know	wiedge and belief. [407) 358-0163 Fronda Notary Service, com  Signature of Natural Person Signing (in line #10 above.)