

## **Electronically Certified Official Record**

## **DOCUMENT INFORMATION**

Agency Name: Columbia County Clerk of the Circuit Court and

Comptroller

**Clerk of the Circuit Court:** The Honorable James M. Swisher, Jr.

**Date Issued:** 11/25/2024 10:45:23 AM

Unique Reference Number: BAA-DAAB-BCACD-CACEBCACFCBB-EBJBEG-D

Instrument Number: 202412025211

Requesting Party Code: 3001

Requesting Party

Reference: E8ABBA79-C0D5-CFBA-00E5-FADE3951A0E2-SF

## **CERTIFICATION**

Pursuant to Sections 90.955(1) and 90.902(1), Florida Statutes, and Federal Rules of Evidence 901(a), 901(b)(7), and 902(1), the attached document is electronically certified by The Honorable James M. Swisher, Jr., Columbia County Clerk of the Circuit Court and Comptroller, to be a true and correct copy of an official record or document authorized by law to be recorded or filed and actually recorded or filed in the office of the Columbia County Clerk of the Circuit Court and Comptroller. The document may have redactions as required by law.

## **HOW TO VERIFY THIS DOCUMENT**

This document contains a Unique Reference Number for identification purposes and a tamper-evident seal to indicate if the document has been tampered with. To view the tamper-evident seal and verify the certifier's digital signature, open this document with Adobe Reader software. You can also verify this document by scanning the QR code or visiting <a href="https://verify.clerkecertify.com/verifylmage">https://verify.clerkecertify.com/verifylmage</a>.

\*\*The web address shown above contains an embedded link to the verification page for this particular document.



NOTICE OF COMMENCEMENT	Clerk's Office Stamp	
Tax Parcel Identification Number:		
10-6S-16-03814-103		
10-03-10-03814-103		
of the Florida Statutes, the following information is pro-		
1. Description of property (legal description): (AKAL a) Street (job) Address: 232 SW JADE CT.	OT 3 SOUTHFORK UNREC): COMM SW COR, RUN E FT WHITE 46.86 FT TO A PT ON E R/W SR-47, RUN N ALOI	NG R/W
2. General description of improvements: RF-ROOF	1318 66 FT FOR POR CONT N 661 60 FT F 658	.13 FT, S
Owner Information or Lessee information if the Lesse     a) Name and address: <u>BARGAR CHARLES JC</u> b) Name and address of fee simple titleholder     c) Interest in property OWNER	e contracted for the improvements: 998-2338, HN II BARGAR CHUN CHA 232 SW JADE COURT FT WHITE, FL 32038 (if other than owner) N/A	6-1691,
4. Contractor Information	ROOFING PROS USA II 6650 SOUTH PINE AVE OCALA. FL 34480	
a) Name and address: RICHARD DORMAN/I b) Telephone No.: 352-581-7333	HOOFING PHOS USA II	
5. Surety Information (if applicable, a copy of the payme	ent bond is attached):	
a) Name and address: NA b) Amount of Bond: N/A		
c) Telephone No.: N/A		
6. Lender		
a) Name and address: N/A b) Phone No. N/A		
7. Person within the State of Florida designated by Own	er upon whom notices or other documents may be served as provided by Section	
713.13(1)(a)7., Florida Statutes:		
a) Name and address: N/A b) Telephone No.: N/A		
Section 713.13(I)(b), Florida Statutes: a) Name: N/A	ne following persons where a copy of the Lienor's Notice as provided in OF MA	
b) Telephone No.: N/A		
Expiration date of Notice of Commencement (the expire specified):	piration date will be 1 year from the date of recording unless a different date	
COMMENCEMENT ARE CONSIDERED IMPRO FLORIDA STATUTES, AND CAN RESULT IN YO 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 DORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST ANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE 11 ONTICE OF COMMENCEMENT.	
STATE OF FLORIDA COUNTY OF COLUMBIA 10	Chly Barga II	
Signature of Ow	rner of Yessee, or Owyer's or Lessee's Authorized Office/Director/Partner/Manager	
7	Charles J Bangar II Printed Name and Signatory's Title/Office	
The second secon	e, by means of Aphysical presence or Online notarization, a Florida Notary,	
this al day of Movember 20 a	4 0 1 2 2 1	
for	who is personally known OR produced identification	
(name of party on behalf of whom instrument was o	Type ID Driver Lic	
Notani Signature 122 4 Mat 0		<del></del> 1
July July	TAMZEN SIERRA CHRHANAL 12/2 Commission # HH 085154 Expres January 26, 2025	023