Inst. Number: 202512004223 Book: 1534 Page: 969 Page 1 of 1 Date: 2/28/2025 Time: 8:17 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
Tax Parcel Identification Number:	
30-6S-16-03987-002	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is proven	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
	W COR OF NW1/4 OF NW1/4, RUN E 832.65 FT FOR POB, CONT E 450
a) Street (Job) Address: 692 Hoberts Avenue F 2. General description of improvements: Residential F	Fort White, FL 32038 Reroof
b) Name and address of fee simple titleholder	oberts Avenue Fort White, FL 32038 (if other than owner)
c) Interest in property Owner 4. Contractor Information	
	- 111 N Orange Avenue, Suite 800 Orlando, Florida 32801
b) Telephone No.: 6829161077 5. Surety Information (if applicable, a copy of the payme a) Name and address:	ent bond is attached):
b) Amount of Bond:	
c) Telephone No.:	
7. Person within the State of Florida designated by Own 713.13(1)(a)7., Florida Statutes:	er upon whom notices or other documents may be served as provided by Section
b) Telephone No.:	
Section 713.13(l)(b), Florida Statutes: a) Name: b) Telephone No.:	OF
9. Expiration date of Notice of Commencement (the expis specified):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROIFINED FLORIDA STATUTES, AND CAN RESULT IN YOUNOTICE OF COMMENCEMENT MUST BE RECOINSPECTION. IF YOU INTEND TO OBTAIN FINATOM WORK OR RECORDING YOUR STATE OF FLORIDA COUNTY OF COLUMBIA 10	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. Johns Levels There or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Joshua Seevers
ī	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me	e, by means of physical presence or online notarization, a Florida Notary,
this 27th day of February 2825	, by:asN/A (Name of Person) as(Type of Authority)
. N/A	
for	who is personally known OR produced identification we have cuted) the Proof platform. Type ID DRIVER LICENSE
Notary Signature <u>Gesly</u> Denise Rascre	(Notary Stamp or Seal)