NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
33-3S-16-02434-030	
of the Florida Statutes, the following information is prov	ents will be made to certain real property, and in accordance with Section 713.13 rided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description): LOT 4 BLOCK	C CYPRESS LAKE 5/D 598-179, 864-279, 747-42, 794-1942, 947-1104, PB 1291-1995, DC 1304-1256, PB 1296-2208
a) Street (job) Address: 245 SW RIDGEVIEV	V PL, LAKE CITY
2. General description of improvements: RE-ROOF	
 b) Name and address of fee simple titleholder 	BURSON 245 SW HIDGEVIEW FLEARE CITICITE GEVEN
c) Interest in property OWNER 4. Contractor Information	DEING BROS USA II 6650 SOUTH PINE AVE OCALA, FL 34480
a) Name and address: RICHARD DORMAN/ROX	OFING PROS USA II
b) Telephone No.: 352-581-7333 5. Surety Information (if applicable, a copy of the payme	ent bond is attached):
a) Name and address: N/A	N/A N/A
b) Amount of Bond: N/A	(VA
c) Telephone No.: N/A 6. Lender	
a) Name and address: N/A	
b) Phone No. N/A	er upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:	N/A
a) Name and address: N/A	IVA
b) Telephone No.: N/A	
Section 713.13(I)(b), Florida Statutes:	following person to receive a copy of the Lienor's Notice as provided in
a) Name: N/A	OF N/A
b) Telephone No.: N/A	
is specified):	ration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROP FLORIDA STATUTES, AND CAN RESULT IN YOU	E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, R PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST NCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA Signature of Owner	Sunch Burson Leans et or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
) Pri	DOUGIAS BURSA HAWES OWNER nted Name and Signatory's Title/Office
The foregoing instrument was acknowledged before me, b	ny means of physical presence or online notarization, a Florida Notary,
this // day of () FCFMPFR 2024	(Name of Person) (Type of Authority)
or	who is personally known OR produced identification
(name of party on behalf of whom instrument was exe	
ictary Signature There Aprelia	(Notary Stamo or Spal). Updated 12/2023
	TRACY L. MORELAND Commission # HH 417090 Expires July 4, 2027