Inst. Number: 202512021232 Book: 1549 Page: 1319 Page 1 of 1 Date: 9/17/2025 Time: 9:36 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:	
21-4S-16-03084-005	
21-43-10-03004-003	
THE UNDERSIGNED hereby gives notice that improvement of the Florida Statutes, the following information is pro-	ents will be made to certain real property, and in accordance with Section 713.13 vided in this NOTICE OF COMMENCEMENT.
	SADDLE RIDGE S/D. 696-321, 794-900, 849-900, WD 1372-239,
a) Street (job) Address: 5539 SW STATE ROAI 2. General description of improvements: re-roof	247. LAKE CITY
3. Owner Information or Lessee information if the Lesse	
 a) Name and address: <u>Steven Flores 5539 SW</u>; b) Name and address of fee simple titleholder 	STATE ROAD 247, LAKE CITY (if other than owner)
c) Interest in property Owner	
4. Contractor Information a) Name and address: Daniel Byrd 118 Suwannee A A Daniel Byrd 118 Suwannee A	ve Lake City Fl 32025
b) Telephone No.: 386-935-6559	
5. Surety Information (if applicable, a copy of the paym	ent bond is attached):
b) Amount of Bond:	- Andrew San Company
c) Telephone No.:	
b) Phone No.	ner upon whom notices or other documents may be served as provided by Section
7. Person within the State of Florida designated by Owr 713.13(1)(a)7., Florida Statutes:	ter apost whom notices of other documents may be served as provided by section
a) Name and address:	
b) Telephone No.:	
8. In addition to himself or herself, Owner designates the	ne following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(b), Florida Statutes:	OF
b) Telephone No.:	
	the state of the s
is specified):	piration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFLORIDA STATUTES, AND CAN RESULT IN YOUNOTICE OF COMMENCEMENT MUST BE RECINSPECTION. IF YOU INTEND TO OBTAIN FINCOMMENCING WORK OR RECORDING YOUR STATE OF FLORIDA COUNTY OF COLUMBIA	ett I
Signature of Ov	vner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
-	Printed Name and Signatory's Fitle/Office
	Printed Name and Signatory's True/Office
The foregoing instrument was acknowledged before m	e, by means of physical presence or online notarization, a Florida Notary,
this 12th day of Scale maker 20 2	5. by Steven fores as owner
this 12 day of September 20 2	(Name of Person ////, (Type of Authority)
for Steven Plones	alvo is perminally known OR produced identification
(name of party on behalf of whom instrument was	= = =
	■ Wiranda Denise Register ■
The state of the s	My Commission
Notary Signature VV	Updated 12/2023
	OF FAMILY