Inst. Number: 202412014435 Book: 1518 Page: 1462 Page 1 of 1 Date: 7/8/2024 Time: 12:48 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

| Tax Parcel Identification Number:  06-7S-16-04145-003  THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Sect of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT:  1. Description of property (legal description):  2. Description of property (legal description):  2. Seneral description of improvements:  3. Street (job) Address:  910 SW COLES CT. FORT WHITE FL 32038  2. General description of improvements:  3. Name and address:  3. Name and address:  3. Name and address SIEGEL STEVE 910 SW COLES CT. FORT WHITE FL 32038  4. Contractor Information  3. Name and address:  5. Surety Information (if applicable, a copy of the payment bond is attached):  3. Name and address:  5. Surety Information (if applicable, a copy of the payment bond is attached):  3. Name and address:  6. Lender  3. Name and address:  5. Phone No.:  6. Lender  3. Name and address:  5. Phone No.:  6. Lender  3. Name and address:  5. Phone No.:  6. Lender  3. Name and address:  6. Lender  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(a), Florida Statutes:  9. Name:  9. Na | VALOT 4 COLE'S UI  |
|--|--|
| THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Sect of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.  1. Description of property (legal description): COMMAT BE CORD OF BECT ROWN 1386-34-17.N 2015-27.17. WHOSE OF I FORTOW COMMENCEMENT.  2. General description of improvements: RE-ROOF  3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: SIEGEL STEVE 910 SW COLES CT. FORT WHITE FL 32038  b) Name and address: SIEGEL STEVE 910 SW COLES CT. FORT WHITE FL 32038  b) Interest in property OWNER  4. Contractor Information  a) Name and address: MACACK ROWNING INC SECRETIAL SECURIT CT TALLAMASSEE FL 32001  b) Telephone No.: 8508775516  5. Surety Information (if applicable, a copy of the payment bond is attached):  a) Name and address: b) Amount of Bond: c) Telephone No.:  6. Lender  a) Name and address: b) Phone No.  7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:   | VALOT 4 COLES UI   |
| THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Sect of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.  1. Description of property (legal description): COMMENT SECONCE SECTION WINDS AFFIX SECTION AND SECTION OF SECTIO | VALOT 4 COLE'S UI  |
| a) Street (job) Address: 910 SW COLES CT. FORT WHITE FL 32038  2. General description of improvements: RE-ROOF  3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: SIEGEL STEVE 910 SW COLES CT. FORT WHITE FL 32038  b) Name and address of fee simple titleholder (if other than owner)  c) Interest in property OWNER  4. Contractor Information  a) Name and address: NAMACCK ROOFING INC 502 CAPITALCIRCLE SE UNIT CT TALLAHASSEE FL 32201  b) Telephone No.: 8508775516  5. Surety Information (if applicable, a copy of the payment bond is attached):  a) Name and address: b) Amount of Bond: c) Telephone No.:  6. Lender  a) Name and address: b) Phone No.  7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:   |  |
| 2. General description of improvements: RE-ROOF  3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: SIEGEL STEVE 910 SW COLES CT. FORT WHITE FL 32038  b) Name and address of fee simple titleholder (if other than owner)  c) Interest in property OWNER  4. Contractor Information  a) Name and address:  b) Telephone No.: 8508775516  5. Surety Information (if applicable, a copy of the payment bond is attached):  a) Name and address:  b) Amount of Bond:  c) Telephone No.:  6. Lender  a) Name and address:  b) Phone No.  7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes:  a) Name and address:  b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:   |  |
| 3. Owner Information or Lessee information if the Lessee contracted for the improvements:  a) Name and address: SIEGEL STEVE 910 SW COLES CT. FORT WHITE FL 32038 b) Name and address of fee simple titleholder (if other than owner) c) Interest in property OWNER  4. Contractor Information a) Name and address: b) Telephone No.: 8508775516  5. Surety Information (if applicable, a copy of the payment bond is attached): a) Name and address: b) Amount of Bond: c) Telephone No.: 6. Lender a) Name and address: b) Phone No. 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:   | ***************************************  |
| a) Name and address: TADLOCK ROOFING INC 502 CAPITALCIRCLE SE UNIT C1 TALLAHASSEE FL 32301 b) Telephone No.: 8508775516  5. Surety Information (if applicable, a copy of the payment bond is attached): a) Name and address: b) Amount of Bond: c) Telephone No.: 6. Lender a) Name and address: b) Phone No. 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:  |  |
| b) Telephone No.: 8508775516  5. Surety Information (if applicable, a copy of the payment bond is attached):  a) Name and address: b) Amount of Bond: c) Telephone No.:  6. Lender  a) Name and address: b) Phone No.  7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:   |  |
| a) Name and address: b) Amount of Bond: c) Telephone No.:  6. Lender a) Name and address: b) Phone No. 7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: a) Name and address: b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(I)(b), Florida Statutes:   |  |
| c) Telephone No.:  6. Lender  a) Name and address:  b) Phone No.  7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes:  a) Name and address:  b) Telephone No.:  8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(1)(b), Florida Statutes:  |  |
| <ul> <li>6. Lender <ul> <li>a) Name and address:</li> <li>b) Phone No.</li> </ul> </li> <li>7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: <ul> <li>a) Name and address:</li> <li>b) Telephone No.:</li> </ul> </li> <li>8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(I)(b), Florida Statutes:</li> </ul>   | AMA (45 - 110 - 11 |
| <ul> <li>b) Phone No</li></ul>   |  |
| <ul> <li>7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided 713.13(1)(a)7., Florida Statutes: <ul> <li>a) Name and address:</li> <li>b) Telephone No.:</li> </ul> </li> <li>8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided Section 713.13(I)(b), Florida Statutes:</li> </ul>  |  |
| <ul> <li>b) Telephone No.:</li></ul>   | l by Section   |
| Section 713.13(I)(b), Florida Statutes:  |  |
| a) Name:OF   | - 000- 64 1- 000- 64   |
| 9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a difference is specified):   | ent date   |
| WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTIC COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 7: FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPENOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.  | 13.13 <i>,</i><br>ERTY; A  |
| STATE OF FLORIDA COUNTY OF COLUMBIA  10,   |  |
| Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partr  | ner/Manager  |
| Charles Care and I   |  |
| Printed Name and Signatory's Title/Office  |  |
|  |  |
| The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, a Flo   | orida Notary,  |
| this 8 day of JUNE 2024 by: Steve Steed as Williams of Person) (Type of Autho  |  |
| for who is personally known OR produced identifica   | · · · · · · · · · · · · · · · · · · ·  |
| (name of party so behalf of whom instrument was executed)  Type ID  DANIELLE KRIS MY COMMISSION #  EXPIRES: May  |  |