Inst. Number: 202512003252 Book: 1533 Page: 1051 Page 1 of 1 Date: 2/17/2025 Time: 12:07 PM James M Swisher Jr Clerk of Courts, Columbia County, Florida Doc Mort: 0.00 Int Tax: 0.00 Doc Deed: 0.00

|  | Clerk's Office Stamp   |
|--|--|
| Tax Parcel Identification Number:  |  |
| 33-3S-16-02434-014 (9665)  |  |
| THE UNDERSIGNED hereby gives notice that improvem of the Florida Statutes, the following information is pro-   | nents will be made to certain real property, and in accordance with Section 713.13 ovided in this NOTICE OF COMMENCEMENT.  |
| Description of property (legal description): LOT 14     a) Street (Job) Address:   | BLOCK A CYPRESS LAKE S/D. 821-425, 939-834, WD 1424-1505, PDUCK CT, LAKE CITY  |
| <ul> <li>b) Name and address of fee simple titleholder</li> <li>c) Interest in property <u>Owner</u></li> </ul>  | 169 SW WOOD DUCK CT, LAKE CITY r (If other than owner)   |
| Contractor Information     Name and address: Florida Premier Roofing     No.: 407-969-3530     Surety Information (if applicable, a copy of the payment)       | 10245 E Cofonial Dr. Orlando Fl 32817  |
| a) Name and address: b) Amount of Bond:  |  |
| b) Phone No.   | ner upon whom notices or other documents may be served as provided by Section  |
| 713.13(1)/a17., Florida Statutes:  | ner upon whom houses of other documents may be served as provided by Section   |
| B. in addition to himself or herself, Owner designates the<br>Section 713.13(I)(b), Florida Statutes:  | e following person to receive a copy of the Lienor's Notice as provided in   |
| a) Name:<br>b) Telephone No.:  | OF   |
| WARNING TO OWNER: ANY PAYMENTS MADE<br>COMMENCEMENT ARE CONSIDERED IMPROPE<br>FLORIDA STATUTES, AND CAN RESULT IN YOU<br>NOTICE OF COMMENCEMENT MUST BE RECORD | E BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF<br>ER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13,<br>IR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A<br>RDED AND POSTED ON THE JOB SITE BEFORE THE FIRST |
| COMMENCING WORK OR RECORDING YOUR N  |  |
| STATE OF FLORIDA COUNTY OF COLUIABIA SIgnalure of Owner  | Patricia. Q. Caldwell ir or Lesseo, or Owner's or Lesseo's Authorized Office/Director/Partner/Manager  |
|  |  |
| =-   | Patricia Caldwell  |
| •  | nied Name and Signatory's Title/Office   |
| The foregoing Instrument was acknowledged before me, b   | by means of Sphysical presence or Sonline notarization, a Florida Notary.  (Name of Person)  (Type of Authority)   |
| the foregoing instrument was acknowledged before me, b   | oy means of Signatory's Title/Office  oy means of Sphysical presence or Sonline notarization, a Florida Notary.  (Name of Person)  Who (spectage like of Special Land)   |