

COLUMBIA COUNTY BUILDING DEPARTMENT LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055 Phone: 386-758-1008 Fax: 386-758-2160

l,	Jacob Kirsch	(license holder name), lice	nsed qualifier	
for	Compass Builders & Associates Corp	(company name), do certify that	
the below referenced person(s) listed on this form is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.				
Print	ed Name of Person Authorized	Signature of Authorized	Person	
1. Ste	ven Winsberg	1. Stern Unis	Dely	
2.		2.	,	
3.		3.		
4.		4.		
5.		5.		
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits. If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.				
	se Holders Signature (Notarized)	CBC1253775 License Number	03/03/2025 Date	
NOTARY INFORMATION: STATE OF: COUNTY OF: Miami-Dade				
The above license holder, whose name is				
NOTAL	Creata VILLAMI RAL	Motory Public Steas of Florida Commission # 84 42794 Expires on 49 31 3227 (Seal/Stamp)		

Notarized remotely online using communication technology via Proof.



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LICENSED QUALIFIER AUTHORIZATION

I, Jacob Kirsch	(license holder name), licensed qualifier			
for Compass Bullders & Associates Corp	(company name), do certify that			
the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.				
Printed Name of Person Authorized	Signature of Authorized Person			
1. Steven Winsberg	1. Stry of Willen			
2.	2.			
3.	3.			
4.	4.			
5.	5.			
I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits. If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.				
Shot Kinh	CBC1253775 03/03/2025			
Licensed Qualifiers Signature (Notarized)	License Number Date			
NOTARY INFORMATION: STATE OF: Florida COUNTY OF: Miami-Dade				
The above license holder, whose name is				
Notarized remotely online using communication technology via Proof.				