Inst. Number: 202312014304 Book: 1495 Page: 2485 Page 1 of 1 Date: 7/31/2023 Time: 10:10 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:	
00-00-00-12877-000 (41409)	
of the Florida Statutes, the following information is pre-	
1. Description of property (legal description): E DIV. LOTS 10 & 11 BLOCK 2 THOMAS PARK SID. 966-2350. a) Street (job) Address: 1079 NE LAKE DR. LAKE CITY	
2. General description of improvements: RE-ROOF	
3. Owner Information or Lessee information if the Less	see contracted for the improvements: HE LAKE DR LAKE CITY, FL 32065
 b) Name and address of fee simple titlehold 	er (if other than owner)
c) Interest in property	
4. Contractor Information a) Name and address: Richard Dorman/	Roofing Pros USA II 6650 S Pine Ave Ocala FL 34460
 Surety Information (if applicable, a copy of the pays 	ment bond is attached):
a) Name and address:	
c) Telephone No.:	
6 tander	
b) Phone No	wner upon whom notices or other documents may be served as provided by Section
713 13/11/a17 Florida Statutes:	
a) Name and address:	
b) Telephone No.:	
a was a selled 1 to 1 - 1 d - 5 - 6 de de de de	the following person to receive a copy of the Lienor's Notice as provided in OF
b) Telephone No.:	
 Expiration date of Notice of Commencement (the is specified): 	expiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPERIORIDA STATUTES, AND CAN RESULT IN Y NOTICE OF COMMENCEMENT MUST BE RE INSPECTION. IF YOU INTEND TO OBTAIN FOR COMMENCING WORK OR RECORDING YOU STATE OF FLORIDA	ADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, YOUR PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A SECONDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE UR NOTICE OF COMMENCEMENT. Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
The foregoing instrument was acknowledged before	Printed Name and Signatory's Title/Office me, a Florida Notary, this
	, i
· · · · · · · · · · · · · · · · · · ·	Authority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification	Type W455-275-55-1280
Notary Signature	Notary Stamp or Seal: TAMZEN SIERRA CHITTUM Commission # NH 085154 Expires January 26, 2025