DATE 11/19/2008

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000027487

APPLICANT DWAYNE SPICER PHONE 386.364.6464

ADDRESS POB 460 LIVE OAK FL 32064

OWNER NORTH FLORIDA LIVESTOCK MARKET PHONE

ADDRESS 12171 S US HWY 441 LAKE CITY FL 32025

CONTRACTOR PAUL SPICER PHONE 386.364.6464

LOCATION OF PROPERTY 41-S TO NORTH FLORIDA LIVESTOCK MARKET ON THE LEFT BEFORE BAILEY'S FARM CENTER.

TYPE DEVELOPMENT COMM REROOF/BLDG ESTIMATED COST OF CONSTRUCTION 12000.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT REAR SIDE

NO. EX.D.U. 1 FLOOD ZONE DEVELOPMENT PERMIT NO.

PARCEL ID 27-5S-17-09413-000 SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 32.00

		CCC048156		
Culvert Permit No.	Culvert Waiver	Contractor's License Number		Applicant/Owner/Contractor
FDOT-EXISTING	X-08-376		JTH	
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: NOC ON FILE.

Check # or Cash CASH REC'D.

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by

Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by

Framing date/app. by Rough-in plumbing above slab and below wood floor date/app. by

Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by

Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by

M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by

Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by

M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE $ 60.00 CERTIFICATION FEE $ 0.00 SURCHARGE FEE $ 0.00

MISC. FEES $ 0.00 ZONING CERT. FEE $ FIRE FEE $ 0.00 WASTE FEE $

FLOOD DEVELOPMENT FEE $ FLOOD ZONE FEE $ CULVERT FEE $ **TOTAL FEE** 60.00

INSPECTORS OFFICE CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED TO BE IN ACTIVE PROGESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

Columbia County Building Permit Application

For Office Use Only Application # 0811-32 Date Received 11/19 By JW Permit # 27487

Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____

FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____

Comments _____

☑ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Parent Parcel # _____

☐ Dev Permit # _____ ☐ In Floodway ☑ Letter of Auth. from Contractor ☐ F W Comp. letter

IMPACT FEES: EMS _____ Fire _____ Corr ON file Road/Code _____

School _____ = TOTAL _____

Septic Permit No. 1-08-376 Fax 386-364-4044

Name Authorized Person Signing Permit Dwayne Spicer Phone 386-364-6464

Address P.O Box 460, Live Oak, Fla. 32064

Owners Name Jeff Clemons. N. FL Livestock Market, Inc Phone _____

911 Address 12171 S. U.S. Hwy. 441

Contractors Name Spicer Construction Inc. Phone 386 364-6464

Address P.O. Box 460, Live Oak Fla 32064

Fee Simple Owner Name & Address N/A

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address N/A

Mortgage Lenders Name & Address N/A

Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Progress Energy

Property ID Number 27-5S-17-09413-000 Estimated Cost of Construction 12,000.00

Subdivision Name _____ Lot ____ Block ____ Unit ____ Phase ____

Driving Directions 441 south to Building on Left One mile Before I-75..

Number of Existing Dwellings on Property 1

Construction of Re Roof steel Building Front half Total Acreage 32 Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 20'

Actual Distance of Structure from Property Lines - Front _____ Side _____ Side _____ Rear _____

Number of Stories 1 Heated Floor Area _____ Total Floor Area _____ Roof Pitch 1/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

Columbia County Building Permit Application

TIME LIMITATIONS OF APPLICATION : An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment
According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:
YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

X _____
Owners Signature

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit.

X _____
Contractor's Signature (Permitee)

Contractor's License Number CCC048156
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 18th **day of** November **20** 08

Personally known ✓ **or Produced Identification** _____

Claudia Wagman
State of Florida Notary Signature (For the Contractor)

SEAL:

CLAUDIA WAGMAN
Comm# DD0637315
Expires 3/9/2011
Florida Notary Assn., Inc

Page 2 of 2 (Both Pages must be submitted together.)

Revised 1-10-08

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID EE SPICE-1

DATE (MM/DD/YYYY) 11/18/08

PRODUCER

Franklin Insurance Agency, Inc.
P. O. Box 3145
Tallahassee FL 32315
Phone: 850-681-0433 Fax: 850-222-8075

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

Spicer Construction, Inc
P. O. Box 460
Live Oak FL 32064

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Auto-Owners Insurance	18988
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [X] PRO-JECT [ ] LOC	BINDER	10/22/08	10/22/09	EACH OCCURRENCE	$ 500000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300000
						MED EXP (Any one person)	$ 10000
						PERSONAL & ADV INJURY	$ 500000
						GENERAL AGGREGATE	$ 1000000
						PRODUCTS - COMP/OP AGG	$ 1000000
		AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	$
						BODILY INJURY (Per person)	$
						BODILY INJURY (Per accident)	$
						PROPERTY DAMAGE (Per accident)	$
		GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT	$
						OTHER THAN AUTO ONLY: EA ACC	$
						AGG	$
		EXCESS/UMBRELLA LIABILITY OCCUR [ ] CLAIMS MADE DEDUCTIBLE RETENTION $				EACH OCCURRENCE	$
						AGGREGATE	$
							$
							$
							$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS / OTH-ER	
						E.L. EACH ACCIDENT	$
						E.L. DISEASE - EA EMPLOYEE	$
						E.L. DISEASE - POLICY LIMIT	$
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

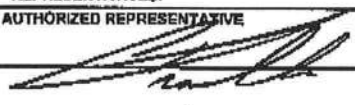
COLUMBI

Columbia County Building Dept.
fax #386-758-2160
135 NE Hernando Ave., Ste.B-21
Lake City FL 32055

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



CERTIFICATE OF LIABILITY INSURANCE

Date: 11/18/2008

Producer: Lion Insurance Company
2739 U.S. Highway 19 N.
Holiday, FL 34691
727-938-5562

This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

Insured: South East Personnel Leasing, Inc.
2739 U.S. Highway 19 N.
Holiday, FL 34691

Insurers Affording Coverage		NAIC #
Insurer A:	Lion Insurance Company	11075
Insurer B:		
Insurer C:		
Insurer D:		
Insurer E:		

Coverages

The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		GENERAL LIABILITY				Each Occurrence	$
		☐ Commercial General Liability				Damage to rented premises (EA occurrence)	$
		☐ ☐ Claims Made ☐ Occur				Med Exp	$
		☐				**Personal Adv Injury**	$
		☐				General Aggregate	$
		General aggregate limit applies per:				Products - Comp/Op Agg	$
		☐ Policy ☐ Project ☐ LOC					
		AUTOMOBILE LIABILITY				Combined Single Limit (EA Accident)	$
		☐ Any Auto				Bodily Injury (Per Person)	$
		☐ All Owned Autos				Bodily Injury (Per Accident)	$
		☐ Scheduled Autos				Property Damage (Per Accident)	$
		☐ Hired Autos					
		☐ Non-Owned Autos					
		☐					
		☐					
		EXCESS/UMBRELLA LIABILITY				Each Occurrence	
		☐ Occur ☐ Claims Made				Aggregate	
		☐ Deductible					
A		**Workers Compensation and Employers' Liability**	WC 71949	01/01/2008	01/01/2009	X WC Statutory Limits ☐ OTHER	
		Any proprietor/partner/executive officer/member excluded?				E.L. Each Accident	$1,000,000
		If Yes, describe under special provisions below.				E.L. Disease - Ea Employee	$1,000,000
						E.L. Disease - Policy Limits	$1,000,000
		Other	**Lion Insurance Company is A.M. Best Company rated A- (Excellent). AMB # 12616**				

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 22-28-010

Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. that are leased to the following "Client Company":

Spicer Construction, Inc.

Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. active employee(s) , while working in Florida.

Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.

A list of the active employee(s) leased to the Client Company can be obtained by faxing a request to (727) 937-2138 or by calling (727) 938-5562.

FAX: 386-364-4044 & 386-758-2160 / ISSUE 11-18-08 (TD)

Begin Date 6/26/2003

CERTIFICATE HOLDER

COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE HERNANDO AVENUE, STE B-21

LAKE CITY FL 32055

CANCELLATION

Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

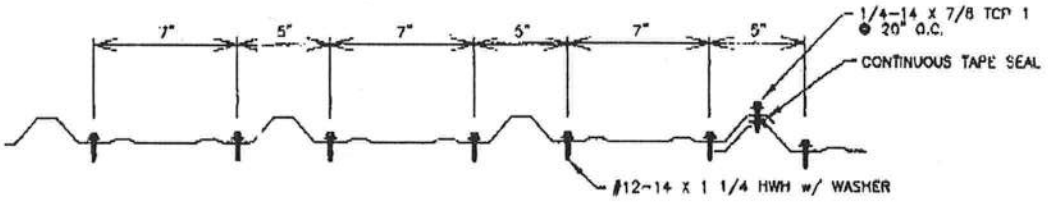
Jack A. Powers

Gulf Coast Supply & MFG, Inc. PBR 26GA
LOAD TABLE OVER OPEN FRAMING

PBR 26 GA. ALLOWABLE UNIFORM LOADS (PSF) OVER OPEN FRAMING

SPAN TYPE	LOAD TYPE	SPAN (ft)								
		3.0	3.5	4.0	4.5	5.0	5.5	6.0	6.5	7.0
SINGLE	LIVE LOAD	74.9	55.0	40.4	28.4	20.7	15.6	12.0	9.4	7.5
	NEGATIVE WIND LOAD	99.9	73.4	49.4	34.7	25.3	19.0	14.6	11.5	9.2
2-SPAN	LIVE LOAD	73.6	54.3	41.7	33.0	26.8	22.2	18.6	15.9	13.7
	NEGATIVE WIND LOAD	74.9	55.0	42.1	33.3	27.0	22.3	18.7	16.0	13.8
3-SPAN	LIVE LOAD	91.4	67.5	51.9	41.2	33.4	27.6	22.6	17.8	14.2
	NEGATIVE WIND LOAD	93.6	68.8	52.7	41.6	33.7	27.9	23.4	19.9	17.2
4 SPAN	LIVE LOAD	85.5	63.2	48.6	38.5	31.2	25.8	21.7	18.5	15.1
	NEGATIVE WIND LOAD	87.4	64.2	49.2	38.8	31.5	26.0	21.9	18.6	16.1

NOTE-
1. ALLOWABLE LOADS ARE BASED ON UNIFORM SPAN LENGTHS and Fy=50-ksi.
2. LIVE LOAD IS LIMITED BY BENDING,SHEAR, COMBINED SHEAR & BENDING, WEB CRIPPLING AND DELECTION OF L/180.
3. NEGATIVE WIND LOAD IS LIMITED BY BENDING,SHEAR, COMBINED SHEAR & BENDING AND DELECTION OF L/120.
4. NEGATIVE WIND LOAD DEFLECTION HAS BEEN INCREASED BY 30% PER FBC 2004 TABLE 1604.3.
5. NEGATIVE WIND LOAD DOES NOT CONSIDER FASTENER PULLOUT OR PULL OVER.
6. THE WEIGHT OF THE PANEL HAS NOT BEEN DEDUCTED FROM THE ALLOWABLE LOADS.



SCREW PATTERN FOR ROOF & WALL APPLICATIONS: ALL AREAS

APR 0 6 2006

Gulf Coast Supply & MFG

PRODUCT EVALUATION REPORT

PBR Roof Panel over Open Framing

FL #6359

Evaluator:
Terrence E. Wolfe, P.E. # 44923
2405-a S. Houston Ave., Suite 500
Humble, TX 77396

Validator:
Locke Bowden, P.E.
Florida Registration #49704
200 Eton Road
Montgomery, AL 36109

MAY 16 2006

Reference: 9B-72.070(4), F.A.C.

MANUFACTURER:

Gulf Coast Supply and Manufacturing, Inc.
Rt. 1 Box 112
Horseshoe Beach, FL 32648
352-498-7852

SUBJECT:

Cold-formed, through-fastened, steel roof panels.

PANEL DESCRIPTION:

PBR, 26 Ga. (.0185"), 36" wide, Min. Fy=80 ksi, through fastened, structural metal roof panel. PBR is applied over open framing.

CODE CRITERIA:

Florida Building Code 2004
Chapter 15: Roof Assemblies and Rooftop Structures
Chapter 16: Structural Loads
Chapter 22: Steel

TECHNICAL DOCUMENTATION SUPPORTING COMPLIANCE STATEMENT

A. DRAWINGS

1. Erection Drawings

B. TESTS

1. Test report numbers --117-0108-06 by Force Engineering & Testing, Inc. for
   a) UL 580-94, per FBC, Uplift Resistance of Roof Assemblies
   b) UL 1897-98, per FBC, Uplift Tests for Roof Covering Systems

C. MATERIAL CERTIFICATIONS

1. United States Steel Corporation ASTM A792 AZ-55 Grade 80 Sheet Coil, .018 min coated steel.

D. LOAD TABLE

1. PBR 26ga design uplift/gravity load table over open framing. Per The North American pecification for the Design of Cold-form Steel Structural Members (AISI-NASPEC)

INSTALLATION REQUIREMENTS: See uploaded erection drawings

LIMITATIONS AND CONDITIONS OF USE FOR NON-HVHZ:

Maximum Roof Component Uplift Pressure: -54.25 @ 5' 0" o.c.

Minimum Roof Slope limitations: 1/2:12

Substrate Description:	Min. 16ga designed by a Florida P.E.
Substrate Attachment:	Designed by Florida P.E.
Fire Barrier:	Class B fire exposure rating in accordance with FBC Section 1505.3.
Underlayment:	Vinyl or reflective foil faced fiberglass batt insulations that have a flame spread rating of no more than 25 and a smoke development rating of not more than 450.

DESIGN PROCEDURE:

Based on the dimensions of the structure, appropriate loads are determined using Chapter 16 of the FBC for roof cladding wind loads. These component wind loads for roof cladding are compared to the allowable negative/positive pressures listed in the load table for the PBR roof panel. The design professional shall select the appropriate erection details to reference in his drawings for proper fastener attachment to his structure and analyze the panel fasteners for pullout and pullover. Support framing must be in compliance with FBC Chapter 22 for steel, and Chapter 16 for structural loading.

CERTIFICATE OF INDEPENDENCE: See upload attachments

AUTHORIZED REPRESENTATIVE:

Terrence E. Wolfe, P.E.
FL #44923

```
N1/2 OF NE1/4 OF SE1/4 & S1/2     NORTH FL LIVESTOCK MARKET INC  27-5S-17-09413-000              Columbia County  2008 R
OF SE1/4 OF NE1/4 EX 4 AC OFF     PO BOX 3235                                                        CARD 001 of 002
W SIDE & EX COMM NW COR OF        LAKE CITY, FL 32056                          PRINTED 10/21/2008  9:41          BY  JEFF
S1/2 OF SE1/4 OF NE1/4, RUN E                                                  APPR     7/07/2005 DF
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BUSE 005900 ARENA              AE? N       6440 HTD AREA     75.440 INDEX    27517.00 DIST 3              PUSE  002900 WHOLESALE OUTLE
MOD   4 COMMERCIAL   BATH                  6850 EFF AREA     30.930 E-RATE     100.000 INDX   STR  27- 5S- 17
EXW  25 MOD METAL    FIXT            9     211871 RCN                          1980 AYB    MKT AREA 02                144,186 BLDG
 10% 19 COMMON BRK   BDRM                   63.00 %GOOD     133,478 B BLDG VAL  1980 EYB    (PUD1                       29,780 XFOB
RSTR 09 RIDGE FRME   RMS             4     ----------------------------------------------    AC       32.000            154,000 LAND
RCVR 01 MINIMUM      UNTS                  #FIELD CK:                                        #    NTCD                            0 AG
  %     N/A          C-W%                  #LOC:   --                                        #    APPR CD                         0 MKAG
INTW 04 PLYWOOD      HGHT                  #                                                 #    CNDO                      327,966 JUST
  %     N/A          PMTR                  # +-----------60----------+                      #    SUBD                            0 CLAS
FLOR 03 CONC FINSH   STYS                  # IBAS1993                 I                      #    BLK
  %     N/A          ECON                  # I                        I                      #    LOT                             0 SOHD
HTTP 04 AIR DUCTED   FUNC                  # I                        I                      #    MAP# 130                        0 ASSD
A/C  03 CENTRAL      SPCD                  # 3                        3                      #                                    0 EXPT
QUAL 05 05           DEPR 06               # 9                        9                      #    TXDT    003                     0 COTXBL
FNDN    N/A          UD-1     N/A          # I                        I                      #
SIZE    ALL          UD-2     N/A          # I                        I                      # -------------- BLDG TRAVERSE -------------
CEIL    N/A          UD-3     N/A          # +-----30----+-----30----+-------40------+       # BAS1993=W60 S39 AOF1993=S41   E30 LBA1993=
ARCH    N/A          UD-4     N/A          # IAOF1993    ILBA1993    IKTA1993        I       # E30 KTA1993=E40   N41 W40 S41$ N41 W30 S41
FRME 05 STEEL        UD-5     N/A          # I           I           I               I       # $ N41 W30$ E60N39$.
KTCH    N/A          UD-6     N/A          # I           I           I               I       #
WNDO    N/A          UD-7     N/A          # 4           4           4               4       #
CLAS    N/A          UD-8     N/A          # 1           1           1               1       #
OCC     N/A          UD-9     N/A          # I           I           I               I       #
COND 03 03             %      N/A          # I           I           I               I       #----------------- PERMITS ----------------
SUB   A-AREA  %  E-AREA   SUB VALUE        # +-----30----+-----30----+-------40------+       #  NUMBER     DESC          AMT    ISSUED
BAS93   2340 100   2340       45595        #                                                 # 18941    M H              125 11/09/2001
AOF93   1230 110   1353       26365        #                                                 #
LBA93   1230 110   1353       26365        #                                                 # ------------------ SALE ------------------
KTA93   1640 110   1804       35153        #                                                 # BOOK   PAGE     DATE                  PRICE
                                            #                                                 #    910   1848  9/05/2000 U I          250000
                                            #                                                 # GRANTOR THOMAS WALDROP DBA NORTH FLORIDA L
                                            #                                                 # GRANTEE NORTH FLORIDA LIVESTOCK MARKET INC
                                            #                                                 #
                                            #                                                 # GRANTOR
TOTAL   6440       6850      133478         ----------------------------------------------    GRANTEE
-------EXTRA FEATURES------------------------------------ FIELD CK: ---------------------------------------------
AE BN  CODE      DESC       LEN   WID HGHT QTY QL   YR  ADJ        UNITS UT      PRICE   ADJ UT PR   SPCD %    %GOOD  XFOB VALUE
Y     0294   SHED WOOD/VI                    1    0000 1.00       1.000 UT   29280.000   29280.000           100.00      29,280
Y     0296   SHED METAL                      1    1993 1.00       1.000 UT     500.000     500.000           100.00         500
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    LAND   DESC       ZONE  ROAD {UD1 {UD3 FRONT DEPTH  FIELD CK:
AE  CODE              TOPO  UTIL {UD2 {UD4  BACK   DT     ADJUSTMENTS            UNITS UT      PRICE   ADJ UT PR    LAND VALUE
N 004400 PACK/STMKT  A-1    0002                      1.00 1.00 1.00 1.25      32.000  AC    3800.000     4750.00       152,000
                           0002 0003
Y 009945 WELL/SEPT   A-1    0002                      1.00 1.00 1.00 1.00       1.000  UT    2000.000     2000.00         2,000
                           0002 0003
X005 - MH USED AS STORAGE
 2008
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N1/2 OF NE1/4 OF SE1/4 & S1/2     NORTH FL LIVESTOCK MARKET INC  27-5S-17-09413-000           Columbia County  2008 R
OF SE1/4 OF NE1/4 EX 4 AC OFF     PO BOX 3235                                                       CARD 002 of 002
W SIDE & EX COMM NW COR OF        LAKE CITY, FL 32056                   PRINTED 10/21/2008  9:41          BY  JEFF
S1/2 OF SE1/4 OF NE1/4, RUN E                                           APPR     7/07/2005 DF
BUSE 000800 MOBILE HME       AE? Y        840 HTD AREA    109.900 INDEX    27517.00 DIST 3          PUSE  002900 WHOLESALE OUTLE
MOD   2 MOBILE HME  BATH      2.00        840 EFF AREA     31.871 E-RATE   100.000 INDX   STR  27- 5S- 17
EXW  26 ALM SIDING  FIXT                26772 RCN                             1985 AYB    MKT AREA 02               144,186 BLDG
 %     N/A          BDRM         2      40.00 %GOOD     10,708 B BLDG VAL     1985 EYB     (PUD1                      29,780 XFOB
RSTR 03 GABLE/HIP   RMS                                                                    AC        32.000        154,000 LAND
RCVR 01 MINIMUM     UNTS               FIELD CK:                                           NTCD                            0 AG
 %     N/A          C-W%               LOC:   --                                           APPR CD                         0 MKAG
INTW 05 DRYWALL     HGHT                                                                   CNDO                      327,966 JUST
 %     N/A          PMTR                 +------------------60------------------+           SUBD                            0 CLAS
FLOR 14 CARPET      STYS        1.0      IBAS2001                                I          BLK
 10% 08 SHT VINYL   ECON                 1                                       1          LOT                             0 SOHD
HTTP 04 AIR DUCTED  FUNC                 4                                       4          MAP# 130                        0 ASSD
A/C  03 CENTRAL     SPCD                 I                                       I                                          0 EXPT
QUAL 05 05          DEPR 09              +------------------60------------------+           TXDT     003                    0 COTXBL
FNDN    N/A         UD-1     N/A
SIZE    N/A         UD-2     N/A                                                         -------------- BLDG TRAVERSE -------------
CEIL    N/A         UD-3     N/A                                                         BAS2001=W60 S14 E60 N14$.
ARCH    N/A         UD-4     N/A
FRME 01 NONE        UD-5     N/A
KTCH 01 01          UD-6     N/A
WNDO    N/A         UD-7     N/A
CLAS    N/A         UD-8     N/A
OCC     N/A         UD-9     N/A
COND 03 03             %     N/A                                                         ----------------- PERMITS ----------------
SUB   A-AREA  %  E-AREA   SUB VALUE                                                        NUMBER      DESC            AMT     ISSUED
BAS01    840 100    840       10708

                                                                                         ------------------ SALE ------------------
                                                                                         BOOK   PAGE     DATE                  PRICE

                                                                                         GRANTOR
                                                                                         GRANTEE

                                                                                         GRANTOR
TOTAL    840        840       10708                                                      GRANTEE
-------EXTRA FEATURES------------------------------- FIELD CK:
AE BN  CODE        DESC      LEN   WID HGHT QTY QL    YR  ADJ        UNITS UT      PRICE   ADJ UT PR   SPCD %    %GOOD  XFOB VALUE

    LAND    DESC         ZONE  ROAD {UD1 {UD3 FRONT DEPTH  FIELD CK:
AE  CODE                 TOPO  UTIL {UD2 {UD4  BACK   DT     ADJUSTMENTS             UNITS UT     PRICE   ADJ UT PR    LAND VALUE
 2008
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AC# 3873240

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L080724011

DATE	BATCH NUMBER	LICENSE NBR
07/24/2008	087003421	CRC040926

The RESIDENTIAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2010

SPICER, PAUL DARRYL
SPICER CONSTRUCTION INC
619 GOLDKIST AVE SW
LIVE OAK FL 32060

CHARLIE CRIST
GOVERNOR

CHUCK DRAGO
INTERIM SECRETARY

DISPLAY AS REQUIRED BY LAW

AC# 3872890

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L080724007

DATE	BATCH NUMBER	LICENSE NBR
07/24/2008	087003421	CCC048156

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2010

SPICER, PAUL DARRYL
SPICER CONSTRUCTION INC
619 GOLDKIST AVE SW
LIVE OAK FL 32060

CHARLIE CRIST
GOVERNOR

CHUCK DRAGO
INTERIM SECRETARY

DISPLAY AS REQUIRED BY LAW

AC# 3873132

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L080724010

DATE	BATCH NUMBER	LICENSE NBR
07/24/2008	087003421	CGC018156

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2010

SPICER, PAUL DARRYL
SPICER CONSTRUCTION INC
619 GOLDKIST AVE SW
LIVE OAK FL 32060

CHARLIE CRIST
GOVERNOR

CHUCK DRAGO
INTERIM SECRETARY

DISPLAY AS REQUIRED BY LAW

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with Chapter 713, the following information is protected in this Notice of Commencement.

1. Description of Property: 27-5S-17-09413-000

2. General Description of Improvement: Re-Roof

3. Owner Information:

   a. Name: North Fl Livestock Market / Jeff Clemons
   Address: 12171 S. U.S. 441
   Interest in Property: Owner

   b. Fee Simple Titleholder (If other than owner)
   Name: _____
   Address: _____

Inst:200812020896 Date:11/19/2008 Time:4:14 PM
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1162 P:996

4. Contractor: Name: Spicer Construction, Inc.
   Address: P.O. Box 460 Live Oak, FL 32064

5. Surety: a. Name: _____
   Address: _____
   b. Amount of Bond: _____

6. Lender: Name: _____
   Address: _____

7. Persons within the state of Florida designated by owner upon whom notices or other documents may serve as provided by Florida Statutes, 713.13 (a) (7): Spicer Construction Inc.

8. In addition to himself, owner designates _____

to receive a copy of the Lienor's Notice as provided in Florida Statutes 713.13 (1) (b).

9. Expiration date of Notice of Commencement (expiration is 1 year from the date of recording unless a different date is specified): _____

X _____
Type Owners Name: Jeff Clemons

_____
Type Owners Name:

Prepared By: Sadie Pettrey
Address: P.O. Box 460 Live Oak, FL 32064
Telephone: (386) 364-6464

Sworn to and subscribed before me this 18th day of November 2008

_____
Signature

Print Notary's Name Claudia Wagman
Notary Public, State of Florida
Commission expiry and Number 3/9/2011
DD 0637315

Personally Know _____
Produced ID Drivers License
Did / Did not take an Oath _____

CLAUDIA WAGMAN
DD0637315
3/9/2011
Notary Assn., Inc