Inst. Number: 202512024838 Book: 1552 Page: 2429 Page 1 of 1 Date: 10/29/2025 Time: 12:12 PM 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:	
24-65-16-03707-033(16289)	
of the Florida Statutes, the following information is pro	ents will be made to certain real property, and in accordance with Section 713.13 wided in this NOTICE OF COMMENCEMENT.  1/2 LOT 13 GREAT SOUTHTIMBER UNPER) WAYN NE COR OFSW
1. Description of property (legal description): PUN S G a) Street (job) Address: 323 SW BEYOND ( 2. General description of improvements: RE-ROOF	CT. LAKE CITY. FL. 32024 FT, SAUD. 15 FT TO POB.
3. Owner Information or Lessee information if the Lesse	ee contracted for the improvements: - 323 SW BEYOND CT. LAKE CITY, FL. 32024
c) Interest in property OWNER	
Contractor Information     a) Name and address:      J&M RESIDENTIAL SERVICE	ES FL DIVISION, LLC 6020 PKWY DR N #500 CUMMING, GA. 30040
b) Telephone No.: 904-337-0509	
<ol> <li>Surety Information (if applicable, a copy of the paym a) Name and address: N/A</li> </ol>	nent bond is attached): N/A
b) Amount of Bond: N/A	
c) Telephone No.: N/A	
6. Lender	
a) Name and address: <u>N/A</u> b) Phone No. N/A	
7. Person within the State of Florida designated by Ow	ner upon whom notices or other documents may be served as provided by Section
713.13(1)(a)7., Florida Statutes:	N/A
a) Name and address: N/A	IVA
b) Telephone No.: N/A	
Section 713.13(I)(b), Florida Statutes:	the following person to receive a copy of the Lienor's Notice as provided in
a) Name: N/A b) Telephone No.: N/A	
ALIA	xpiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPROFILED FLORIDA STATUTES, AND CAN RESULT IN YOU NOTICE OF COMMENCEMENT MUST BE RECOMMENCEMENT MUST BE RECOMMENCEMENT.	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF OPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, DUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST IANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE R NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	
COUNTY OF COLUMBIA 10.	wner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Signature of O	wner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
	Harvey T Coleman  Printed Name and Signatory's Title/Office
	Printed Name and Signatory's Title/Office
	ne, by means of physical presence or online notarization, a Florida Notary,
this 29 day of OCTOBER 202	by: HARVEY COLEMAN as OWNER (Name of Person) (Type of Authority)
. AMANDA LAROSE	(Name of Person) (Type of Authority) who is personally known OR produced identification
for AMANDA LAROSE  (name of party on behalf of whom instrument was	wno is personally known OK produced identification
0 0	AMATHDAEAROSE L
Notary Signature Parole	Commission # HH 692647  My Comm. Expires Jun 26, 2029  (totary Spander frog National Notary Assn. Updated 12/2023