Inst. Number: 202512005859 Book: 1535 Page: 2587 Page 1 of 1 Date: 3/20/2025 Time: 8:16 AM James M Swisher Jr Clerk of Courts, Columbia County, Florida

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
34-6S-16-04056-137	
THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT	
1. Description of property (legal description): 34-6S-16-04056-137 a) Street (job) Address: 122 SW GREENWOOD TER, FORT WHITE, FL 32038	
2. General description of Improvements: Re-Roof	
3. Owner Information or Lessee Information if the Lesse	e contracted for the improvements: GREENWOOD TER, FORT WHITE, FL 32038
b) Name and address of fee simple titleholder (if other than owner)	
4. Contractor Information K&H Construction/Rock	ofing LLC 167 SE Cornet Court, Lake City, FL 32024
h) Telephone No : (386) 867-0155	
 Surety Information (if applicable, a copy of the paym) 	ent bond is attached):
a) Name and address:	
b) Amount of Bond:	
c) Telephone No.:	
6. Lender a) Name and address:	
L) Ohana No	
7. Person within the State of Florida designated by Owr	ner upon whom notices or other documents may be served as provided by Section
713 13(1)(a)7 Florida Statutes:	
b) Telephone No.:	
a the second or horself Owner designates the	ne following person to receive a copy of the Lienor's Notice as provided in
o) Name:	OF
b) Telephone No.:	
 Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): 	
WARRING TO OWNED. ANY PAYMENTS MAI	DE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF
a management and cast DECLIFT IN VI	NID DVAIME LANK & BENK HAISKO A CIAITIA 12 10 1000 1 101 500 1
STATE OF THE VOIL INTEND TO ORTAIN FIN.	ANCING, CONSULT TOUR LEADER OF AN ATTORITET SET SITE
COMMENCING WORK OR RECORDING YOUR	NOTICE OF COMMENCEMENT.
STATE OF FLORIDA	V. D. L. Marilla La
10	ally many many
Signature of Ow	ner or Lesspe, of Owner's or Lessee's Authorized Office/Director/Partner/Manager
Kelly Mauldin / Owner	
Printed Name and Signatory's Title/Office	
Pi	Inted Name and Signatory & Hite/Office
	e, a Florida Notary, this 4th day of March 2025 by:
The foregoing instrument was acknowledged before me	e, a Florida Notary, this 4 and day of 10 10 10 10 10 10 by:
/ 11 Ala Idia Duna	er for Self
CPILL MIGHTALLY as DWITE	
(Name of Person) (Type of Au	thority) (name of party of behalf of whom hosternoon
Personally Known OR Produced Identification Type	
Notary Signature	Notary Stamp or Seal Commission # HH 439553
	Expires September 15, 2027