Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Gerald Bragg P.O. Box 10000 Lake Buena Vista, FL 32830-1000

## DOC # 20230431252

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Rec Fee: \$10.00 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00 Phil Diamond, Comptroller Orange County, FL Ret To: SIMPLIFILE LC

## NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

| ٠.    | apior , ro,                 | Tronda Catago, are renowing inform   | ation is provided in                               | and reduce of commencement.  |     |
|-------|-----------------------------|--|--|--|-----|
| 1.    |                             | on of Property (legal description of p                                       |  |  |     |
|       | 4046425                     | - 1566 W BUENA VISTA DRIVE, 35   | -24-27-0000-00-00                                  | 3  |     |
| 2.    | General c                   | lescription of improvement   |  |  |     |
| _     | Plumbing                    |  |  |  |     |
| 3.    | Owner in                    | formation or Lessee information if   | the Lessee contra                                  | acted for the improvement  |     |
|       | Name                        | Walt Disney World Resort   |  |  |     |
|       | O                           | P.O. Box 10000, Lake Buena Vista   | , FL 32830   |  |     |
|       |                             | Property Owner   | - Diff all this are all this are                   | Name Heleda I and San  |     |
|       |                             | d address of fee simple titleholder  | (it diffrerent from c                              | Jwner listed above)  |     |
|       | Name                        |  |  |  |     |
| ,     | Address<br>Contracto        |  |  |  |     |
| ٠.    |                             |  |  |  |     |
|       | Name                        | Page Piping Inc  |  | Telephone Number (407) 828-0175  |     |
| _     | Address                     | P.O. Box 22180, Lake Buena Vista   | , FL 32830   |  |     |
| 5.    | Surety                      |  |  |  |     |
|       | Name                        |  |  | Telephone Number   |     |
| _     | Address                     |  |  | Amount of Bond \$  |     |
| б.    | Lender                      |  |  |  |     |
|       | Name                        |  |  | Telephone Number   |     |
| _     | Address                     |  |  |  |     |
| 7.    | Persons v                   | vithin the State of Florida designed<br>by Section 713.13(1)(b), Florida Sta | d by Owner upon v                                  | whom notices or other documents may be served  |     |
| as    | •                           | *                                      |  |  |     |
|       | Name                        | Megan Kelley, Facility Asset Manag   |  | Telephone Number 407-939-4963  |     |
| ۵     |                             | P.O. Box 10000, Lake Buena Vista   |  | ring to receive a copy of the Lienor's Notice as   |     |
|       |                             | Section 713.13(1)(b), Florida Statu  |  | ring to receive a copy of the Lienor's Notice as   |     |
| Ε.    | Name                        | Gerald Bragg   |  | Telephone Number   |     |
|       |                             | P.O. Box 10000, Lake Buena Vista   |  |  |     |
| n     |                             |  | · · · · · · · · · · · · · · · · · · ·              |  |     |
| y.    | Expiratio<br>Ded final have | n date of notice of commencemen  | t (the expiration da                               | te may not be before the completion of construction frecording unless a different date is specified) |     |
| aii   | a iiiai payi                | ment to the contractor, but will be 1 ye                                     | 7/30/2024  | recording diffess a different date is specified)   |     |
| w     | ARNING TO O                 | WNED: ANY DAYMENTS MADE BY THE O   |  | PIRATION OF THE NOTICE OF COMMENCEMENT ARE   |     |
| CC    | NSIDERED II                 | MPROPER PAYMENTS UNDER CHAPTER 7   | 713, PART I, SECTION                               | 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR   |     |
| PA    | YING TWICE                  | FOR IMPROVEMENTS TO YOUR PROPER  | TY. A NOTICE OF COM                                | MENCEMENT MUST BE RECORDED AND POSTED ON THE JOB<br>CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE   |     |
|       |                             | WORK OR RECORDING YOUR NOTICE OF   |  | CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE   |     |
| 11,   | nder nenalt                 | v of perium. I declare that I have r   | and the foregoing                                  | notice of commencement and that the facts  |     |
|       |                             | re true to the best of my knowledg   |  | notice of commencement and that the facts  |     |
|       |                             |  |  |  |     |
|       |                             |  |  |  |     |
|       |                             |  |  |  |     |
|       |                             |  |  |  |     |
|       |                             |  |  |  |     |
|       | Ger                         | ald Bragg  |  | Gerald Bragg / Project Rep. / FAM  |     |
|       | √Signa                      | ture of Owner of Lessee, or Owner's or                                       |  | Signatory's Printed Name/Title/Office  |     |
|       | Lessee's A                  | Authorized Officer/Director/Partner/Manager                                  |  |  |     |
| Th    | e foregoing                 | instrument was acknowledged before   | $_{\text{to me this}} 3/_{\overline{\mathcal{A}}}$ | day of Those by Genta Proc   |     |
| • • • | ie ioregonig                | mistrament was acknowledged belo   |  | modifives  | 10. |
| as    |                             | Authorized Signatory   | for  | Walt Disney World Resort   | Jū  |
| us    |                             | of authority, e.g., officer, treatee, attorney in                            |  | Name of party on behalf of whom instrumentwas executed   |     |
| J     | 1 .                         |  | ran ara  | reality of party of policin of Wildin manufactures exceeded  |     |
| ች     | thank.                      | 1~ X V   | 11   | L  |     |
| 4     | <b>YUN</b>                  |  | <i></i>  | FOHME MYCL   |     |
|       | Signa                       | slure of Notary Public - State of Florida                                    | ·  | Print, type, or stamp name of Notary Republic  |     |
|       |                             |  |  |  |     |
| F     | Personally kno              | wn OR Produced ID  |  | Natural Public State of Florida  |     |
| _     | Tunn of ID D                | f<br>dunant  |  | Notary Public State of Florida Heather M Kind  |     |
|       | Type of ID Pro              | Juceu  |  | 1 My Commission 9  |     |
|       |                             |  |  | тиниции НН 209610<br>Exp. 3/2/2026   |     |
|       |                             |  |  |  |     |