

Permit Number: BD23-0429  
 Folio/Parcel ID #: 02-24-27-0000-00-020  
 Prepared by: Phillip Mangiacopra 321-332-3990  
1200 Facilities Way, LBV, FL 32830  
 \_\_\_\_\_  
 Return to: Phillip Mangiacopra  
1200 Facilities Way, LBV, FL 32830  
phillip.a.mangiacopra@disney.com

**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 Statutes, the following information is provided in this Notice of Commencement.

1. **Description of property** (legal description of the property, and street address if available)  
1200 Facilities Way, LBV, FL 32830. 02-24-27-0000-00-020
2. **General description of improvement**  
General Construction
3. **Owner information or Lessee information if the Lessee contracted for the improvement**  
 Name Walt Disney World Resort  
 Address PO BOX 10,000, LAKE BUENA VISTA, FL 32830  
 Interest in Property Owner  
**Name and address of fee simple titleholder** (if different from Owner listed above)  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_
4. **Contractor**  
 Name Jim Williams Fence Company Telephone Number 863-688-1194  
 Address 934 East Rose Street, Lakeland FL 33801
5. **Surety** (if applicable, a copy of the payment bond is attached)  
 Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_
6. **Lender**  
 Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**  
 Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**  
 Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_
9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) 8/10/2024

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR 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 AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

[Signature] Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager  
Director Signatory's Title/Office

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August 2023 by Ketan Sardeshmukh  
 as Authorized Signatory for Textile Services  
Type of authority, e.g., officer, trustee, attorney in fact month/year name of person  
Maribel S. Hefeli Maribel S. Hefeli  
Signature of Notary Public - State of Florida Name of party on behalf of whom instrument was executed  
Print, type, or stamp commissioned name of Notary Public

Personally Known X OR Produced ID  
 Type of ID Produced \_\_\_\_\_  
Maribel S. Hefeli  
 Notary Public  
 State of Florida  
 Comm# HH001114  
 Expires 5/18/2024

