

Permit Number: \_\_\_\_\_  
Folio/Parcel ID #: 272435000000008  
Prepared by: \_\_\_\_\_  
\_\_\_\_\_  
Return to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DOC # 20230508742**  
09/06/2023 14:18 PM Page 1 of 1  
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 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)  
1568 W Buena Vista Drive, Bay Lake FL 32830
2. **General description of improvement**  
Function Test on Kitchen Equipment
3. **Owner information or Lessee information if the Lessee contracted for the improvement**  
Name Walt Disney World Resort  
Address P.O. Box 10000 Lake Buena Vista, FL 32830  
Interest in Property \_\_\_\_\_  
**Name and address of fee simple titleholder** (if different from Owner listed above)  
Name \_\_\_\_\_  
Address \_\_\_\_\_
4. **Contractor**  
Name Pye-Barker Fire & Safety, LLC Telephone Number 863-294-6600  
Address 5860 FL-544, Winter Haven, FL 33881
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 Melanie DeFaria, Sourcing & Procurement Telephone Number \_\_\_\_\_  
Address P.O. Box 10000 Lake Buena Vista, FL 32830
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 will be 1 year from the date of recording unless a different date is specified) \_\_\_\_\_

**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

Manager, Eng Svcs  
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 6<sup>th</sup> day of Sept, 2023 by David Peraza  
as Authorized Signatory for Walt Disney World Resort  
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]  
Signature of Notary Public - State of Florida

Print, type, or stamp commissioned name of Notary Public

Personally Known ☒ OR Produced ID \_\_\_\_\_  
Type of ID Produced \_\_\_\_\_

