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

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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

2. General description of improvement

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.

1. Description of Property (legal description of property, and street address if available)

4046468 - 1600 Avenue of the Stars, 30-24-28-0000-00-001

Owner information or Lessee information if the Lessee Name Walt Disney World Resort	contracted for the improvement
Name Walt Disney World Resort	contracted for the improvement
Address P.O. Box 10000, Lake Buena Vista, FL 32830	
Interest in Property Owner	
Name and address of fee simple titleholder (if diffrerent	from Owner listed above)
Name Address	
Contractor	
Name OTIS Elevator Co Inc.	Telephone Number 714-563-7117
Address	
Name	Tolonhono Numbau
Address	Telephone Number Amount of Bond \$
ender	Allocate of Botte &
Name	Telephone Number
Address	7 STABITIONS WATER
rovided by Section 713.13(1)(b), Florida Statues. Name Megan Kelley, Facility Asset Management (FAM Address P.O. Box 10000, Lake Buena Vista, Florida 328 in addition to himself or herself, Owner designates the	30-1000
vided by Section 713.13(1)(b), Florida Statues.	
Name Lyan Rivera Cabrera	Telephone Number
Address P.O. Box 10000, Lake Buena Vista, Florida 328	30-1000
MENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEM	NCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE
ed in it are true to the best of my knowledge and belief.	going notice of commencement and that the facts
ad in it are true to the best of my knowledge and belief.	going notice of commencement and that the facts . Lyan Rivera Cabrera / Project Rep. / FAM
Signature of Owner or Lessee, or Owner's or Lessee's Author zed Officer/Director/Partner/Manager	going notice of commencement and that the facts
and in it are true to the best of my knowledge and belief. Signature of Owner or Lessee, or Owner's or	Lyan Rivera Cabrera / Project Rep. / FAM Signalory's Printed Name/Title/Office 5 day of October 2023 , by Lyan Rivera Cabrera
Signature of Owner or Lessee, or Owner's or Lessee's Author zed Officer/Director/Partner/Manager	Lyan Rivera Cabrera / Project Rep. / FAM Signalory's Printed Name/Title/Office day of October 2023, by Lyan Rivera Cabrera month/year
Signature of Owner or Lessee, or Owner's or Lessee's Author zed Officer/Director/Partner/Manager foregoing instrument was acknowledged before me this	Lyan Rivera Cabrera / Project Rep. / FAM Signalory's Printed Name/Title/Office day of October 2023 by Lyan Rivera Cabrera month/year
Signature of Owner or Lessee, or Owner's or Lessee's Author zed Officer/Director/Partner/Manager foregoing instrument was acknowledged before me this	Lyan Rivera Cabrera / Project Rep. / FAM Signalory's Printed Name/Title/Office 5 day of October 2023 , by Lyan Rivera Cabrera month/year Walt Disney World Resort