

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

Document Number: **20230069385**  
Book Number: \_\_\_\_\_  
Page Number: \_\_\_\_\_

**AMENDMENT TO  
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 property, and street address if available) **DOC # 20240101830**  
4043513 - 4701 Caribbean Way, Bay Lake, 32830, 11-24-27-0000-00-001 02/21/2024 09:23 AM Page 1 of 1
- 2. General description of improvement**  
General Construction Rec Fee: \$10.00
- 3. Owner Information or Lessee information if the Lessee contracted for the improvement**  
Name Walt Disney World Resort Deed Doc Tax: \$0.00  
Address P.O. Box 10000, Lake Buena Vista, FL 32830 Mortgage Doc Tax: \$0.00  
Interest in Property Owner Intangible Tax: \$0.00  
Name and address of fee simple titleholder (if different from Owner listed above) Phil Diamond, Comptroller  
Orange County, FL  
Name Ret To: SIMPLIFILE LC  
Address \_\_\_\_\_
- 4. Contractor**  
Name MLC THEMING INC Telephone Number 407-938-0011  
Address 2700 Bonnet Creek Road, Lake Buena Vista, FL 32830
- 5. Surety**  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_
- 6. Lender**  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
- 7. Persons within the State of Florida designed by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes.**  
Name Megan Kelley, Facility Asset Management (FAM) Telephone Number 407-939-4963  
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
- 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes.**  
Name Cody Krueger Telephone Number \_\_\_\_\_  
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
- 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)  
5/31/2024

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 1, 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.

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

  
\_\_\_\_\_  
Signature of Owner or Lessee, or Owner's or  
Lessee's Authorized Officer/Director/Partner/Manager

Cody Krueger / Project Rep. / FAM


\_\_\_\_\_  
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this

19<sup>th</sup> day of 02/2024, by Cody Krueger  
month/year

as \_\_\_\_\_ Authorized Signatory \_\_\_\_\_  
Type of authority, e.g., officer, trustee, attorney in fact

for \_\_\_\_\_  
Name of party on behalf of whom instrument was executed

  
\_\_\_\_\_  
Signature of Notary Public, State of Florida

  
\_\_\_\_\_  
Print, type, or stamp name of Notary Republic

Personally known ☒ OR Produced ID \_\_\_\_\_

Type of ID Produced \_\_\_\_\_

