Permit Number:Folio/Parcel ID #:Prepared by:	Deed Doc Tax. \$0.00
Return to:	Orange County, FL Ret To: SIMPLIFILE LC
NOTICE OF	COMMENCEMENT
State of Florida, County of Orange The undersigned hereby gives notice the	hat improvement will be made to certain real property, and in accordance
1. Description of property (legal des	following information is provided in this Notice of Commencement. cription of the property, and street address if available)
Four Seasons Tennis Center 10128 Dream  2. General description of improvem	
Convert one existing clay tennis court to	o four (4) hard surface pickleball courts.
Name Orlando TRS LLC DBA Four Season	
Address 10100 Dream Tree Blvd Lake Bud	ena VIsta, FL 32836
Interest in Property	titleholder (if different from Owner listed above)
Name	thenolder (if different from Owner listed above)
Address	
4. Contractor	
Name Poli Construction Inc.	Telephone Number 4074038230  5 Orlando FL 32819
Address 7512 Dr.Phillips Blvd Suite 50-725	5 Orlando FL 32819
5. <b>Surety</b> (if applicable, a copy of the p	
Name	Telephone Number
Address	Amount of Bond \$
6. Lender	<del>-</del> 1 1 1 1 1
Name	Telephone Number
Address	
	da designated by Owner upon whom notices or other documents m
be served as provided by §713.13	
	Telephone Number
Address	
Notice as provided in §713.13(1)(b	
Name	Telephone Number
Address	
<ol><li>Expiration date of notice of communication unless a different date is specified)</li></ol>	mencement (the expiration date will be 1 year after the date of recording
CONSIDERED IMPROPER PAYMENTS UNDE ULT IN YOUR PAYING TWICE FOR IMPROVEN ORDED AND POSTED ON THE SITE OF THE I	Y THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT OF CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN WENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE MPROVEMENT BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE
	Lve/ GA
ature of Owner or Lessee, or Owner's or Lessee's	
orization, this <u>A</u> day of <u>Pavan</u>	ed before me by means of [ <b>b</b> ] physical presence or [O] online by <u>Thomas</u> <u>Aernhauer</u>
month/year	name of person
NOTARY Dublic	for Thomas Itunhaull
Type of authority owner officer, trustee, att	
112	PRISCILA NOE LAPUENTI
Signature of Notary Public - State of FI	

Commission # HH 488291
My Comm. Expires Mar 3, 2028
Bonded through National Notary Assn.