Permit Number: Olio/Parcel ID #: Prepared by: Walt Disney World Resort Return to: Jerry Burkett / Manny Dumas 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 according the undersigned hereby gives notice that improvement will be made to certain real property, and in according the undersigned hereby gives notice that improvement will be made to certain real property, and in according the undersigned hereby gives notice that improvement will be made to certain real property, and in according the undersigned hereby gives notice that improvement will be made to certain real property, and in according the undersigned hereby gives notice that improvement states of the undersigned hereby gives notice that improvement is provided in this Notice of Commencement. Description of property (legal description of the property, and street address if available) SSR Cast services Building 1851 Community Dr. LBV 32830, ID# 28-24-28-0000-00-01 Fire Panel Replacement Owner information or Lessee information if the Lessee contracted for the Improvement Name wArt DisNey words Nesson and address of fee simple titleholder (if different from Owner listed above) Name Address Po Box 10000 LAKE BUENX VISTA FL 32830 Interest in Property Owner Name Address Address of fee simple titleholder (if different from Owner listed above) Name Address Survey (if applicable, a copy of the payment bond is attached) Name Telephone Number 407-388-5142 Address Po Box 10000 LAKE BUENX VISTA FL 32830-1000 In addition to himself or herself, Owner designated by Owner upon whom notices or other document be served as provided by \$713.13(1)(a)7, Florida Statutes. Name SOURCING & PROCUREMENT ADMIN Telephone Number 407-828-3582 Address Po Box 10000 LAKE BUENX VISTA FL 32830-1000 In addition to himself or herself, Owner designates the following to receive a copy of the Lienon Notice as provided in \$713.13(1)(a)7, Florida Statutes. Name MANN	l Page 1
Prepared by: Walt Dianey World Resort Return to: Jerry Burkett / Manny Dumas OBOX 10000 AKE BUENA VISTA FL 32830-1000 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 accordith Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement. Description of property (legal description of the property, and street address if available) SSR Cast services Building 1851 Community Dr. LBV 32830, ID# 28-24-28-0000-00-01 Seneral description of improvement Fire Panel Replacement Owner information or Lessee information if the Lessee contracted for the improvement Name Walt DISNEY WORLD RESORT Address PG BOX 10000 LAKE BUENA VISTA FL 32830 Interest in Property Owner Name and address of fee simple titleholder (if different from Owner listed above) Name Address Contractor Name Control Systems INC. Address 4600 140th Ave N. Suite 220 Clerarwater, FL 33762 Surety (if applicable, a copy of the payment bond is attached) Name Address Address Address Address Persons within the State of Florida designated by Owner upon whom notices or other documen be served as provided by §713.13(1)(a)7, Florida Statutes. Name SOURCING & PROCUREMENT ADMIN Address PO BOX 10000 LAKE BUENA VISTA FL 32830-1000 In addition to himself or herself, Owner designates the following to receive a copy of the Lienon Notice as provided in \$713.13(1)(b), Florida Statutes. Name Manny Dumas Oxives For Sens Services Address PO BOX 10000 LAKE BUENA VISTA FL 32830-1000 Expiration date of notice of commencement (the expiration date will be 1 year from the date of receive and provided by Grant Provided Provid	
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Fire Panel Replacement 3. Owner information or Lessee information if the Lessee contracted for the improvement Name WALT DISNEY WORLD RESORT Address PO BOX 10000 LAKE BUENA VISTA FL 32830 Interest in Property Owner Name and address of fee simple titleholder (if different from Owner listed above) Name Address Contractor Name Control Systems INC. Address 4600 140th Ave N. Suite 220 Clerarwater, FL 33762 Surety (if applicable, a copy of the payment bond is attached) Name Address Address Amount of Bond \$ Lender Name Address Address Persons within the State of Florida designated by Owner upon whom notices or other documen be served as provided by §713.13(1)(a)7, Florida Statutes. Name SOURCING & PROCUREMENT ADMIN Name BOURCING & PROCUREMENT ADMIN AddressPO BOX 10000 LAKE BUENA VISTA FL 32830-1000 In addition to himself or herself, Owner designates the following to receive a copy of the Lienor Notice as provided in §713.13(1)(b), Florida Statutes. Name MANNY DUMAS OKW/8G FOS ENG SERVICES AddressPO BOX 10000 LAKE BUENA VISTA FL 32830-1000 Expiration date of notice of commencement (the expiration date will be 1 year from the date of recounless a different date is specified) ING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMEN CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN UNIT NO FOR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE ROED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. If YOU INTEND TO OBTAIN FINANCING, CONSTOUR LENDER OR ANATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT MUST BE ROED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. If YOU INTEND TO OBTAIN FINANCING, CONSTOUR LENDER OR ANATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT MUST BE GOOW OF THE POST OF TRIBOTORY OF T	
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	re
Authorized Signature for Watt Discussion name of person Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed	<u> </u>
Mary O. Hollman	u 1
Signature of Natary Public – State of Florida Print, type, or state of Manager Print, type and the Print, type or state of Print, type or state of Natary P	Duk!-

OR Produced ID ____

Stat Corr

Amissioned partitle of Notar State of Florida Comm# HH025632 Expires 9/7/2024