Permit Number:		04/18/2024	1240225584 111:53 AM Page 1 of 1 310 00	
Folio/Parcel ID #:		D I D		
Folio/Parcel ID #:		Mortgage i		
Trepared byTODB G. C	<u> </u>	Intangible		
100000000000000000000000000000000000000			nd, Comptroller	
Return to: PO BOX 10000		D-4 T 01	MPLIFILE LC	
LAKE BUENA VISTA, FL 328	330			
ALOT	TOE OF COMMENCEM			
	ICE OF COMMENCEM	IENI		
State of Florida, County of Or		vill be made to certain real prop	erty and in accordance	
		ion is provided in this Notice of		
	(legal description of the prop	perty, and street address if avai		
2. General description of in REPLACE(01) 6" BFV AN	mprovement	ALAMA DETERMINATION DE PRINCIPAL DE PRINCIPA	41140441444444444	
3. Owner information or Le	essee information if the Le	ssee contracted for the impr	ovement	
NameWalt Disney Parks &	& Resorts US Inc.			
Address P.O. BOX 10000	LAKE BUENA VISTA FL 32	830		
THE RESERVE TO SAME	IFD			
		rent from Owner listed above)		
Name				
4. Contractor				
Name GRUNAU FIRE	PROTECTION	Telephone Num	ber_407-857-1800	
	ANGE DR. STE 150, ORLAN		24:30mmundatii	
5. Surety (if applicable, a co				
		Telephone Num	ber	
Address		Amount of Bond	\$	
6. Lender				
	• 000000000	Telephone Num	ber	
Address				
be served as provided	e of Florida designated by by §713.13(1)(a)7, Florida \$ RCING & PROCURMENT A	Owner upon whom notices of Statutes. ADMIN. Telephone Num	or otner documents ma lber407-828-3582	
	LAKE BUENA VISTA, FL 32			
		es the following to receive a	copy of the Lienor's	
	713.13(1)(b), Florida Statut	tes.		
Name TODD C. GREENI	E LAKE BUENA MOTA EL OG	Telephone Num	<u>iber407-701-6171</u>	
	LAKE BUENA VISTA, FL 32			
		expiration date will be 1 year fro	om the date of recording	
unless a different date is	specified)			
E CONSIDERED IMPROPER PAYME SULT IN YOUR PAYING TWICE FOR CORDED AND POSKED ON THE JO	EMTS UNDER CHAPTER 713, PAI MPROVEMENTS TO YOUR PRO MISITE BEFORE THE FIRST INSI	R THE EXPIRATION OF THE NOTICE RT I, SECTION 713.13, FLORIDA STA OPERTY. A NOTICE OF COMMENCE PECTION. IF YOU INTEND TO OBTA RK OR RECORDING YOUR NOTICE (ATUTES, AND CAN EMENT MUST BE IN FINANCING, CONSULT	
			MAK	
ature of Owner or Lessee, or Owner	s or Lessee's Authorized Officer/Di	rector/Partner/Manager S	ignatory's Title/Office	
foregoing instrument was ac	knowledged before me this	17 day of April 2024 by	Todd Greene	
Authorative	Signature for		ame of person	
Type of authority, e.g., officer,	trustee, attorney in fact	Name of party on behalf of whom in	strument was executed	
5 ich	lol dans	Eril H. Live	n- Maldonade	
Signature of Notary Public	- State of Florida	Print, type, or stamp commissi	oned name of Notary Public	
Personally Known OR	Produced ID			
Type of ID Produced		MY COMMIS	VERA MALDONADO SION # HH 128056 September 8, 2025	
		Bonded Thru No	tary Public Underwriters	