Permit Number:		PO 70000967		DOC # 20240371145 06/26/2024 09:29 AM Page 1 of 1	
Folio/Parcel ID #:TAX ID: 28-24-29-2087-09-001				Rec Fee: \$10.00	
Prepared by: Michael Hiller	man			Deed Doc Tax: \$0.00	
Prepared by: <u>Michael Hiller</u> 650 Gem Cor	nmerce Ct.			Mortgage Doc Tax: \$0.00	
Apopka, FL, 3	32703			Intangible Tax: \$0.00	
Return to: Michael Lamber				Phil Diamond, Comptroller	
PO Box 10000				Orange County, FL Ret To: SIMPLIFILE LC	
Lake Buena Vist	a, FL				
NC	TICE OF COM	MENCEME	Т		
State of Florida, County of					
				ain real property, and in accordance	
				nis Notice of Commencement.	
1. Description of propert TAX ID: 28-24-29-2087	⁷ -09-001, 1280 Mille	of the propert ers Rd	y, and street add	dress if available)	
2. General description of Transport and install 43	k4 Backboard, insta	all outlets and	CPI Cabinets, In	nstall Grounding System	
3. Owner information or Name_Walt Disney Wo	rld Darka and Daga	rto		-	
Address PO Box 1000	0, Lake Buena Vista	a, FL, 32830			
Interest in Property		. ,			
Name and address of	fee simple titleho	Ider (if differe	nt from Owner lis	sted above)	
				,	
Address					
1 Contractor					
Name Colwill Enginee	ring Electrical, Inc.		Tele	phone Number	
Address650 Gem Com	merce Ct, Apopka,	FL, 32703		phone Number	
5. Surety (if applicable, a	copy of the paymen	t bond is attac	ched)		
				phone Number	
Address				unt of Bond \$	
6. Lender					
Name			Tele	Telephone Number	
Address					
7. Persons within the St	ate of Florida desi	gnated by Ov	vner upon who	m notices or other documents ma	
be served as provide	d by §713.13(1)(a)7	7, Florida Sta	tutes.		
Name			Tele	phone Number	
Name Address <u>PO Box 1000</u>	0, Lake Buena Vista	a, FL, 32830		-	
8. In addition to himself	or herself, Owner	designates t	he following to	receive a copy of the Lienor's	
Notice as provided in	§713.13(1)(b), Flo	rida Statutes			
Name			Tele	phone Number	
Address PO Box 10000), Lake Buena Vista	a, FL, 32830		-	
9. Expiration date of not	ice of commencer	ment (the exp	iration date will b	be 1 year from the date of recording	
unless a different date					
E CONSIDERED IMPROPER PAY SULT IN YOUR PAYING TWICE FO CORDED AND POSTED ON THE	MENTS UNDER CHAPT OR IMPROVEMENTS T JOB SITE BEFORE THE	TER 713, PART I O YOUR PROPE E FIRST INSPEC	, SECTION 713.13, I RTY. A NOTICE OF TION. IF YOU INTE	COMMENCEMENT MUST BE ND TO OBTAIN FINANCING, CONSULT DUR NOTICE OF COMMENCEMENT.	
Domin	al D. Ya			Authorized Signatory	
nature of Owner or Lessee, or Own	er's or Lessee's Authoriz	zed Officer/Direct	or/Partner/Manager	Signatory's Title/Office	
e · · · · ·					
e foregoing instrument was a				i presence or [
arization, this <u>20th</u> day of	<u>May_2024</u> by	Dominick	lota		
	month/year	name of p	erson		
Officer		for	Walt	Disney Parks & Resorts, Inc.	
Type of authority: owner, offi	cer. trustee attornev in f			alf of whom instrument was executed	
Type of dutionty. owner, on	in a dotoo, anomoy in	N	and of pury of ben		
Daviderge	Needer		Davida G.		
Signature of Notary Pub	lic – State of Florida		Print, type, or sta	amp commissioned name of Notary Public	

Personally Known ____OR Produced ID _____ Type of ID Produced

DAVIDA G. HEEDER otary Public - State of Florida Commission (f. 18154144 Expression /Sate 31, 2027

Notarized remotely online using communication technology via Proof.

Note ×.