Permit Number;				
Folio/Parcel ID #:				
Prepared by: Walt Disney World Resort PO Box 10000 Lake Buena Vista, FL 32830-1000				
Return to: Walt Disney World Resort				
PO Box 10000 Lake Buena Vista, FL 32830-1000				
Attn: Hassan Rahaman				

DOC # 20250015902 01/09/2025 08:25 AM Page 1 of 1

Rec Fee: \$10.00 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00 Phil Diamond, Comptroller Orange County, FL Ret To: SIMPLIFILE LC

PO Box 10000 Lake Buena Vista, FL	32830-1000	· · · · · ·	
Attn: Hassan Rahaman	-		
NOTE	E OF COMMENCEM	EMT	
State of Florida, County of Oras		ENI	
The undersigned hereby gives	notice that improvement wi	ill be made to certain real p	property, and in accordance
with Chapter 713, Florida Statu	tes, the following information	on is provided in this Notic	e of Commencement.
1 Description of property (le	gal description of the prope	erty, and street address if a	available)
ID 693 LIVING SEAS 2020 AVEN	UE OF THE STARS DR, BAY LA	KE, FL 32830, Tax ID: 30-24-28	3-0000-00-001
General description of implemental control of implemental contr			
Owner information or Less Name Walt Disney World Resort	see information if the Les	ssee contracted for the ir	mprovement
Address PO Box 10000 Lake B	uena Vista, FL 32830		
Interest in Property			
Name and address of fee	simple titleholder (if differ	ent from Owner listed abov	ve)
Name			
Address			
4. Contractor		Telephone Nu	mbor 407-934-8084
Name Maddox Electrical Address PO Box 22164, 1555 Dop	ou De Loke Buses Vieta El 32930	i elephone No	THIDE! 401-204-0004
5. Surety (if applicable, a copy	of the navment hand is at	ached)	
Name		Telephone Nu	ımber
Address		Amount of Bor	nd \$
6 Lender			
Name		Telephone No	umber
Address			
7. Persons within the State of	of Florida designated by	Owner upon whom notice	es or other documents ma
be served as provided by	§713.13(1)(a)7, Florida St	atutes. Telephone Alt	umber 407-939-4963
Name Address PO Box 10000 Lake B	uena Vista El 32830	i elephone i v	amber
8. In addition to himself or h	erself. Owner designates	the following to receive	a copy of the Lienor's
Notice as provided in 8713	3.13(1)(b), Florida Statute:	s.	
Name Hassan Rahaman		Telephone Na	umber 321-299-2855
Address			
9. Expiration date of notice of		piration date will be 1 year	r after the date of recording
unless a different date is spe	ecified)	 	
RNING TO OWNER: ANY PAYMENTS E CONSIDERED IMPROPER PAYMEN' SULT IN YOUR PAYING TWICE FOR IN CORDED AND POSTED ON THE SITE IANCING, CONSULT WITH YOUR LENI	TS UNDER CHAPTER 713, PAR APROVEMENTS TO YOUR PRO OF THE IMPROVEMENT BEFOR	T I, SECTION 713.13, FLORIDA PERTY. A NOTICE OF COMME RE THE FIRST INSPECTION. IF	NOTATIVIES, AND CAN NOEMENT MUST BE YOU INTEND TO OBTAIN
COMMENCEMENT.			Authorized Signatory
- Jane			Signatory's Title/Office
nature of Owner or Lessee, or Owner's o			
e foregoing instrument was acknitarization, this 7 day of Januar			ace or [O] online
Λ m	onth/year name o	f person	
Type of authority: owner, offices, to	rustee, attorney in fact	Name of party on behalf of who	d Farks and Keson om instrument was executed
~ 1.0	2°	1 . 1	0 1.
XIM QDOW T	1mday	inasau	runday
Signature of Notary Public -	State of Florida	Print, type, or stamp corbi	missioned name of Notary Public
Personally Known XOR P	roduced ID		LINDSAY PUNDAY
Type of ID Produced	. Daggood 15	Notary	Public - State of Fiorica
. , , , , , , , , , , , , , , , , , , ,		1 (3€ (37 Je) Con	amission # HR 501112 1
Form content revised: 10/16/23		a "Bonded thro	mm. Expires was 7, 2025 ugh National Natary 4590.
, component residue, to total			Sand the sand in the Sand