| | DOC # 20250031120 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| | 01/16/2025 07:46 AM Page 1 of 1 |
| Permit Number: | Rec Fee: \$10.00 Deed Doc Tax: \$0.00 |
| Folio/Parcel ID #: | Mortgage Doc Tax: \$0.00 |
| Prepared by: Braden Snyder | Intangible Tax: \$0.00 |
| 1365 Avenue of the Stars | Phil Diamond, Comptroller |
| Lake Buena Vista, FL 32830 | Orange County, FL |
| Return to: Braden Snyder | Ret To: CSC INC |
| 1365 Avenue of the Stars | |
| Lake Buena Vista, FL 32830 | |
| NOTICE OF COMMENCEMENT | |
| State of Florida, County of Orange | a to contain real property, and in accordance |
| The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance | |
| with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement. 1. Description of property (legal description of the property, and street address if available) | |
| 1114 Cayman Way, Lake Buena Vista, FL 32830 | street address ii available) |
| General description of improvement Install signage. | |
| 3. Owner information or Lessee information if the Lessee contracted for the improvement Name Walt Disney Imagineering | |
| Address 1365 Avenue of the Stars, Lake Buena Vista, FL 3283 | 0 |
| Interest in Property_Fee Simple | |
| Name and address of fee simple titleholder (if different from Owner listed above) | |
| Name N/A | , |
| Address N/A | |
| 4. Contractor | |
| Name Kentavo | Telephone Number 407-748-5040 |
| Address 1160 Greenskeep Drive, Suite H, Kissimmee, FL 3474 | |
| 5. Surety (if applicable, a copy of the payment bond is attached) | |
| Name Not Applicable | Telephone NumberN/A |
| Address N/A | Amount of Bond \$ Not Required |
| 6. Lender | |
| Name_NONE | Telephone NumberN/A |
| Address N/A | |
| 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may | |
| be served as provided by §713.13(1)(a)7, Florida Statutes. | |
| Name Rich Owens | Telephone Number 407-788-3500 |
| Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena V | /ista, FL 32830-0321 |
| 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's | |
| Notice as provided in §713.13(1)(b), Florida Statutes. | |
| Name WDI Contract Accounting | Telephone Number407-938-3105 |
| Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena | /ista. FL 32830-0321 |
| 9. Expiration date of notice of commencement (the expiration of | tate may not be before the completion of |
| construction and final payment to the contractor, but will be 1 years | ear from the date of recording unless a |
| different date is specified) | al from the date of recording arriess a |
| | |
| WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN | |
| RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE | |
| RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT | |
| WITH YOUR LENDER OR ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. | |
| I certify that this Notice of Commencement has been filed for recording with Orange County. | |

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

The foregoing instrument was acknowledged before me this 16 day of_

CAROLYN BELLING
Notary Public - State of Florida
Commission Fl H 272996
My Comm. Expires Lu: 12, 2026
Bonded through National Notary Assn.

Portfolio PM Exec

name of person

Jan by Patrick Purser

Name of party on behalf of whom instrument was executed

Print, type, or stamp commissioned name of Notary Public

month/year

for Walt Disney Imagineering

Signatory's Title/Office

Personally Known _

Type of ID Produced

as Portfolio Project Management Executive

Signature of Notary Public - State of Florida

Type of authority, e.g., officer, trustee, attorney in fact

__OR Produced ID _