Permit Number: Permit Number:
Polio/Parcel Identification Number:
Prepared by and Return to:
Walt Disney World Resort - FAM
Attn: Lauren Mcdowell P.O. Box 10000

Lake Buena Vista, FL 32830-1000

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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

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 accordance with Chapter
713, Florida Statues, the following information is provided in this Notice of Commencement.

1. Description of Property (legal description of property, and street address if available)

4047669 - 4560 N WORLD DR, 11-24-27-0000-00-006

2. General o	description of improvement	
Mechanic	cal Work	
3. Owner in	formation or Lessee information if the Lessee of	contracted for the improvement
Name	Walt Disney World Resort	
Address		
Interest i	n Property Owner	
Name an	nd address of fee simple titleholder (if diffrerent t	from Owner listed above)
Name		
Address		
Contracto	of .	
Name	CT LILLY HVAC, INC.	Telephone Number (407) 957-9988
Address		
Surety		
Name		Telephone Number
Address		Amount of Bond \$
. Lender		, and an or bond of
Name		Telephone Number
Address		relepitotte Nutribet
	within the State of Florida designed by Owner u	pon whom notices or other documents may be served
	by Section 713.13(1)(b), Florida Statues.	,
Name	Megan Kelley, Facility Asset Management (FAM)	Telephone Number 407-939-4963
	P.O. Box 10000, Lake Buena Vista, Florida 3283	
		following to receive a copy of the Lienor's Notice as
	Section 713.13(1)(b), Florida Statues.	
Name	Lauren Mcdoweil	Telephone Number
Address	P.O. Box 10000, Lake Buena Vista, Florida 3283	0-1000
TE BEFORE T OMMENCING ! nder penalt	HE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINAN WORK OR RECORDING YOUR NOTICE OF COMMENCEME	F COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB ICING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE NT. Joing notice of commencement and that the facts
Ar	ve Davell	Lauren Mcdowell / Project Rep. / FAM
	ture of Owner or Lessee, or Owner's or	Signatory's Printed Name/Title/Office
Lessee's A	Authorized Officer/Director/Partner/Manager	
he foregoing	instrument was acknowledged before me this	23 day of Jan 2025, by Lauren Modave
3	Authorized Signatory for	Walt Disney World Resort
	e of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrumentwas executed
Signa	Harris of Notary Public - State of Florids	Print, type, or stamp name of Notary Republic
Personally kno Type of ID Proc		LINDSAY PUNDAY Hotary Public - State of Fiorida
		Commission # HH 501112 My Comm. Expires Mar 7, 2028 Bonded through National Notary Assn.