Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Gaby Alvarenga P.O. Box 10000 Lake Buena Vista, FL 32830-1000

Type of ID Produced \_\_\_

## **DOC # 20250228950** 04/18/2025 14:17 PM 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

Notary Public - State of Florida Commission # HH 501112 My Comm. Expires Mar 7, 2028

Bonded through National Notary Assn.

## NOTICE OF COMMENCEMENT

State of Florida, County of Orange The undersigned hereby gives notice that improvement wil Chapter 713, Florida Statues, the following information is p	Il be made to certain real property, and in accordance with provided in this Notice of Commencement.
1. Description of Property (legal description of property,	, and street address if available)
1208426.R.F - 783 TIMBERLINE DR, 2724121514000	101
2. General description of improvement	
General Construction 3. Owner information or Lessee Information if the Les	see contracted for the improvement
	see contracted for the hisprovement
Name Disney Vacation Club Management Corp.	100
Address P.O. Box 10000, Lake Buena Vista, FL 328	30
Interest in Property Owner Name and address of fee simple titleholder (if diffre	erent from Owner listed above)
Name	
Address	
4. Contractor	
Name BOYER BUILDING CORPORATION	Telephone Number 407-702-3299
Address 6675 WESTWOOD BLVD, ORLANDO, FL	32821
5. Surety	
Name	Telephone Number
Address	Amount of Band \$
6. Lender	Talankan Missikas
Name	Telephone Number
Address  7. Persons within the State of Florida designed by Ow	ner upon whom notices or other documents may be served
as provided by Section 713.13(1)(b), Florida Statues.	,
Name Megan Kelley, Facility Asset Management (	FAM) Telephone Number 407-939-4963
Address P.O. Box 10000 Lake Buena Vista, Florida	. 32830-1000
<ol> <li>In addition to himself or herself, Owner designates provided by Section 713.13(1)(b), Florida Statues.</li> </ol>	the following to receive a copy of the Lienor's Notice as
•	Telephone Number
Name Gaby Alvarenga	
Address P.O. Box 10000, Lake Buena Vista. Florida 32830-1000  9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)	
<u>10</u>	0/31/2025
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 AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.	
Stated in it are that to the best of my inventory	****
011	
	Gaby Alvarenga / Project Rep. / FAM
Signature of Owner or Lessee, or Owner's or	Signatory's Printed Name/Title/Office
Lessee's Authorized Officer/Director/Partner/Manager	
The foregoing instrument was acknowledged before me the	is 18 day of April 2025, by Gaby Alvaranga
as Authorized Signatory	for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrumentwas executed
Livesey Runder	Lindsay Runday
Signature of Notary Publici- State of Florida  Personally known OR Produced ID	
T - AID D - Aland	LINDSAY PUNDAY