NOTICE OF COMMENCEMENT FS 713.13

| PEI | RMIT# | | TAX PARCEL#: 02- | <u>-25-27-000</u> 0-0060-000 <u>0</u> | | | | | |
|--|--|------------------------|--|---|-------------|------------------------------|---|----|--|
| STA | ATE OF_ | _Florida | COUNTY OF_ | _ | | | | | |
| The undersigned hereby gives notice that improvement(s) 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. | Legal description of property: All-Star Cast Facility 1601 W Buena Vista Drive, Bay Lake, FL 32830 | | | | | Prepared by: Adam Geggatt | | | |
| 2. | | Description of Improve | ement(s): | | | | 1601 W. Buena Vista Drive Lake Buena Vista, FL 32830 | | |
| 3. | Hvac Rep Owner: | Name: Walt I | Disney World Properties – Eileen Ferguson . Box 10000, Lake Buena Vista FL 32830-1000 | | 000 | | | | |
| | | Phone: 312-5 | 12-9684 | Fax: 407-939-6865 | | | | | |
| | a. b. | | operty: OWNER ldress of fee simple titleholder (if other than owner) N/A Phon | | | Phone: | one: | | |
| 4. | Contractor: | | gay 0 39 th Strect, Orlando Fl | ay 39 th Street, Orlando Fl 32839 | | | DOC # 20250279259 05/13/2025 09:38 AM Page 1 of 1 Rec Fee: \$10.00 | | |
| _ | 5 . | Phone: (407)- | | Fax | | Mortgage | c Tax: \$0.00 e Doc Tax: \$0.00 e Tax: \$0.00 | | |
| 5. | Surety | Name and Ad | dress | Fax: | | Phil Dian | nond, Comptroller County, FL | | |
| 6. | Lender: | Name and Add | dress | , <u>u</u> | | | SIMPLIFILE LC | | |
| 7. | Phone: Fax: 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by section 713.13(1) (a) 7, Florida Statutes. Name Procurement Services Design & Construction Telephone Number 407-828-3582 Address P.O. Box 10150, Lake Buena Vista, FL 32830-1000 Fax Number 407-828-3521 | | | | | | | | |
| 8. | In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice provided in 713.13(1)(b), Florida Statutes: Name Raul Malave-Rentas, All-Star Resorts Engineering Services Telephone Number 407-939-7052 Address P.O. Box 1000, Lake Buena Vista, FL 32830-1000 Fax Number 407-939-6865 | | | | | | | | |
| 9. | Expiration | date of Notice of Con | nmencement (the expira | ution date is one (1) year fro | om the date | e of recording | gunless a different date is specified); | | |
| 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. | | | | | | | | | |
| Eileen Ferguson | | | | | | | | | |
| (Signature of Owner)(Note: per §713.13(1) (g), Florida Statutes (PRINT OWNER'S NAME) "Owner must sign and no one else may be permitted to sign in his or her stead." | | | | | | | | | |
| by Who | tilee | n Ferguson | rsonally known to me | oregoing instrument was | | | e me this 12^{40} day of $May 20$ as identification, and | 25 | |
| Nola | w An ry signatur | J/m_ | | County Certification | | | | | |
| Yavier Sanchez Torres Notary Public State of Florida Xavier Sanchez Torres | | | | | | | | | |
| (sea | 1) | | Му Солом НН 1938 Ехр. 11/6 | 18810 <i>n</i> | | | | | |