Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Sam Potter 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 Chapter 713, Florida Statues, the following information is provided in this Notice of Commencement.	e with
Description of Property (legal description of property, and street address if available) 4047716 - 1550 Seven Seas Drive, 11-24-270000-00-012	

	lescription of improvement	
Owner in	Construction formation or Lessee Information if the Lessee co	ontracted for the improvement
Name	Disney Vacation Club Management Corp.	
	P.O. Box 10000, Lake Buena Vista, FL 32830	
Interest in	Property Owner	
Name an	d address of fee simple titleholder (if diffrerent fr	om Owner listed above)
Name		
Address Contracto		
		Telephone Number
Name	POLI CONSTRUCTION INC 7512 DR PHILLIPS BOULEVARD, SUITE 50-725	
Address Surety	7512 DR FHILLIFS BOOLEVAND, GOILE SO TES	
Name		Telephone Number
Address		Amount of Bond S
Lender		
Name		Telephone Number
8 4 4		
Persons \	within the State of Florida designed by Owner up by Section 713.13(1)(b), Florida Statues.	pon whom notices or other documents may be served
Name	Megan Kelley, Facility Asset Management (FAM)	Telephone Number 407-939-4963
Addroos	D O Boy 10000 Lake Suena Vista, Florida 32830	0-1000
in additio	on to himself or herself, Owner designates the fo Section 713.13(1)(b), Florida Statues.	ollowing to receive a copy of the Lienor's Notice as
Name	Sam Potter	Telephone Number
	P.O. Box 10000, Lake Buena Vista, Florida 32830	0-1000
VYING TWICE TE BEFORE 1 OMMENCING Oder Benal	FOR IMPROVEMENTS TO YOUR PROPERTY, A NOTICE OF MEFIRST INSPECTION, IF YOU INTEND TO OBTAIN FINAN WORK OR RECORDING YOUR NOTICE OF COMMENCEMEN BY NOT DEFIUTY, I declare that I have read the foreg	TION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOI CING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE NT. Joing notice of commencement and that the facts
ated in it a	re true to the best of my knowledge and belief.	Sam Potter / Project Rep. / FAM
Sign: Lessee's	ture of Owner of Lessee, or Owner's or Authorized Officer/Director/Partner/Manager	Signatory's Printed Name/Title/Office
he toregoing	g instrument was acknowledged before me this	5 day of June 201 by Sam Potter
s	Authorized Signatory for	Walt Disney World Resort
L	e of authority, e.g., officer, trustee, afforney in fact A Manual Community of Florida ature of Notary Public- State of Florida	Name of party on behalf of whom instrumentwas executed Linds ay Punday Print, type, or stamp name of Notary Public
Personally kno	OR Produced ID	LINDSAY PUNDAY
Type of ID Pro	oduced	Notary Public - State of Florid Commission # HH 501112 My Comm. Expires Mar 7, 202 Bonded through National Notary Ass