

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

Document Number: 20240413726
Book Number: _____
Page Number: _____

**AMENDMENT TO
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 Statutes, the following information is provided in this Notice of Commencement.

1. **Description of Property** (legal description of property, and street address if available) **DOC # 20250341166**
4047322 - 4600 N WORLD DR, 11-24-27-0000-00-006 06/11/2025 13:56 PM Page 1 of 1
2. **General description of improvement** Rec Fee: \$10.00
General Construction Deed Doc Tax: \$0.00
3. **Owner information or Lessee information if the Lessee contracted for the improvement** Mortgage Doc Tax: \$0.00
Name Walt Disney World Resort Intangible Tax: \$0.00
Address P.O. Box 10000, Lake Buena Vista, FL 32830 Phil Diamond, Comptroller
Interest in Property Owner Orange County, FL
Name and address of fee simple titleholder (if different from Owner listed above) Ret To: SIMPLIFILE LLC
Name _____
Address _____
4. **Contractor**
Name Faden Builders Telephone Number 352-735-9805
Address 1194 Camp Avenue, Mt Dora, FL 32757
5. **Surety**
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
Name _____ Telephone Number _____
Address _____
7. **Persons within the State of Florida designed by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes.**
Name Megan Kelley, Facility Asset Management (FAM) Telephone Number 407-939-4963
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes.**
Name Arthur McCloskey Telephone Number _____
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)
11/28/2025

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.



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

Arthur McCloskey / Project Rep. / FAM

Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this

11 day of June 2025, by Arthur McCloskey
month/year

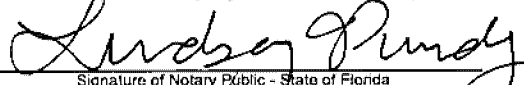
as Authorized Signatory

for

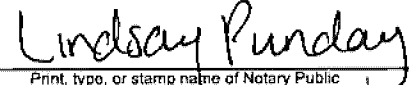
Walt Disney World Resort

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

Name of party on behalf of whom instrument was executed



Signature of Notary Public - State of Florida



Print, type, or stamp name of Notary Public

Personally known _____ OR Produced ID _____

Type of ID Produced _____

