Permit Number: Polio/Parcel Identification Number:
Prepared by and Return to:
Walt Disney World Resort Attn: Jose Sanchez Palau
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

Bonded through National Notary Assn.

NOTICE OF COMMENCEMENT

State of Florida,	County of	of (Orange
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State of Florida, County of Orange The undersigned hereby gives notice that improvement will be made to certain rea Chapter 713, Florida Statues, the following information is provided in this Notice o				
Description of Property (legal description of property, and street address if available)				
Marketplace E50 - World of Disney, 1680 E Buena Visa Dr, Lake 2. General description of improvement	e Buena Vista (282428000000020)			
World of Disney West Entrance Trellis Demolition				
3. Owner information or Lessee information if the Lessee contracted for the	improvement			
Name Walt Disney World Resort				
Address P.O. Box 10000, Lake Buena Vista, FL 32830				
Interest in Property Owner Name and address of fee simple titleholder (if diffrerent from Owner listed a	above)			
Name Address				
4. Contractor				
Name Buena Vista Construction Company	Totophone Number (321) 228 2104			
Address 3291A E Vista Blvd, Lake Buena Vista, FL 32830	Telephone Number (321) 228-2194			
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 notice 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 8. In addition to himself or herself, Owner designates the following to receive	ve a copy of the Lienor's Notice as			
provided by Section 713.13(1)(b), Florida Statues.	•••			
Name Jose Sanchez Palau	Telephone Number (407) 496-5849			
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000				
9. Expiration date of notice of commencement (the expiration date may not be and final payment to the contractor, but will be 1 year from the date of recording un				
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF T CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORID PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT M SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WIT COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	A STATUTES, AND CAN RESULT IN YOUR MUST BE RECORDED AND POSTED ON THE JOB			
Under penalty of perjury, I declare that I have read the foregoing notice of co stated in it are true to the best of my knowledge and belief.	mmencement and that the facts			
	: Palau/Construction Planner/FAM			
Lessee's Authorized Officer/Director/Partner/Manager				
The foregoing instrument was acknowledged before me thisday of	month/year by Jose Sanchez Palam			
as Authorized Signatory for V	Vall Disney World Resort			
- · · · · · · · · · · · · · · · · · · ·	on behalf of whom instrumentwas executed			
Lundsen Rugden lin	dsay Pynday			
Signature of Notary Public - State of Florida Print, type,	or stamp name of Notary Republic			
Personally knownOR Produced ID	>20 To .			
Type of ID Produced	Notary Public - State of Florida Commission # HH 501112			
· ·	My Comm. Expires Mar 7, 2028			