DOC # 20140618196 B: 10844 P: 7502 12/08/2014 08:11 AM Page 1 of 1

Rec Fee: \$10.00 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00

Martha O. Haynie, Comptroller Orange County, FL

Ret To: CSC INC

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 the property, and street address if available) 919 W. Savannah Circle, Lake Buena Vista, FL 32830 2. General description of improvement DAK - Pagani Trail Overlook Graphics - Install new graphics for animal viewing 3. Owner information or Lessee information if the Lessee contracted for the improvement Name Walt Disney Imagineering
Address P.O. Box 10321, Lake Buena Vista, FL 32830 Interest in Property Fee Simple Name and address of fee simple titleholder (if different from Owner listed above) Name N/A Address N/A 4. Contractor Name Design Communications, Ltd.
Address 10611 Satellite Blvd., Orlando, FL, 32837 Telephone Number 407-856-9661 5. Surety (if applicable, a copy of the payment bond is attached) Name Not Applicable Telephone Number N/A Address N/.A Amount of Bond \$ Not Required Lender Name NONE Telephone Number N/A Address N/A Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes. Name Russell Stokes Telephone Number<u>407-560-7858</u> Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321 In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name Contract Accounting Telephone Number 407-560-7858 Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321 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) 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 OF IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB STEP DEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY DEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. Dir. of Procurement Signature of Owner or Lessee, of Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office The foregoing instrument was acknowledged before me this 5^{μ} day of $\frac{2019}{5}$ by by Russell Stokes name of person for Walt Disney Imagineering as Director of Procurement trustee attorney in fact Name of party on behalf of whom instrument was executed pe of authority, e.g... officer sako G. SANTIA 60 MILAGLOS Signature of Notary Public Print, type, or stamp commissioned name of Notary Public of F orida ✓ OR Produced ID Personally Known

Notary Public State of Florida Milagros G Santiago My Commission FF 124809 Expires 06/30/2018

Form content revised: 10/17/12

Type of ID Produced

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

DOC# 20140621433 B: 10845 P: 5774 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



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 Statues, the following information is provided in this Notice of Commencement. Description of property (legal description of the property, and street address if available) See Attacjed General description of improvement Roofing Owner information or Lessee information if the Lessee contracted for the improvement 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 different from Owner listed above) Name Address 4. Contractor Name Atlas Apex Roofing LLC Telephone Number 407-859-3797 Address 281 NE 32nd St, Oakland Park, FL 33334 5. Surety (if applicable, a copy of the payment bond is attached) Telephone Number Amount of Bond \$ Address 6 Lender Name Telephone Number Address 7. Persons within the State of Fiorida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes. Name Judy Wells, Facility Asset Management (FAM) Telephone Number (407) 939-4631 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. Telephone Number (407)828-3159 Name Jon Ruth 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) 02/23/2015 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 day of Dec. 2014, by Jon The foregoing instrument was acknowledged before me this _ Authorized Signatory Walt Disney World Resort Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

OR

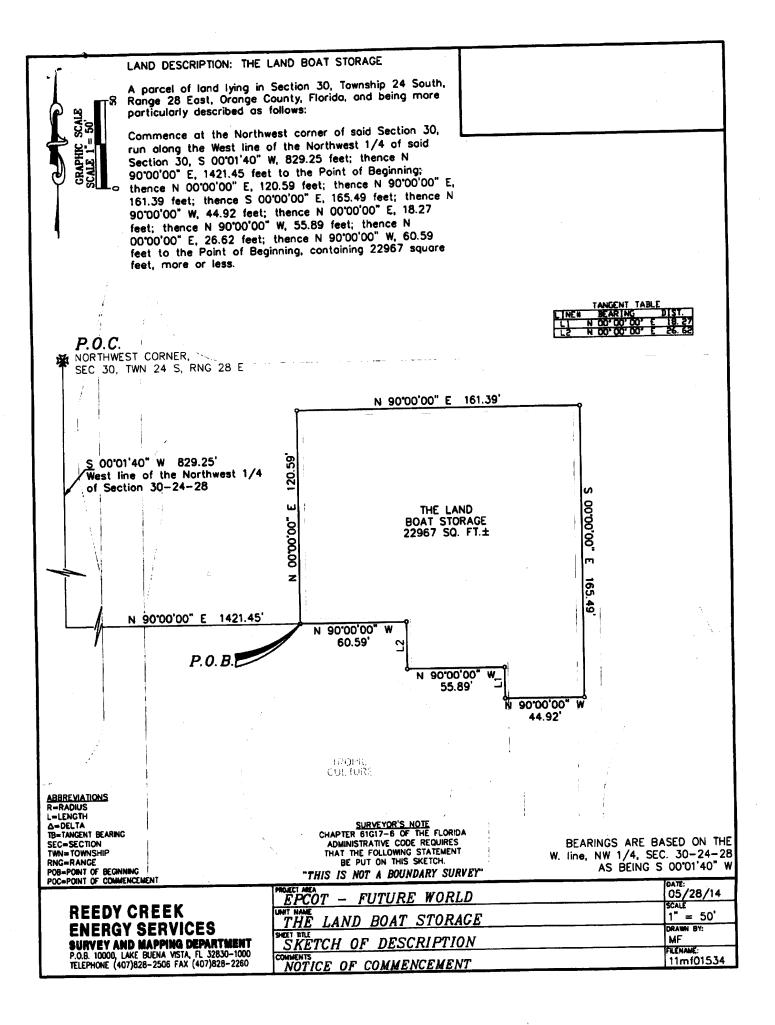
Type of ID Produced

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Notary Public Str

Bonnie L Craig

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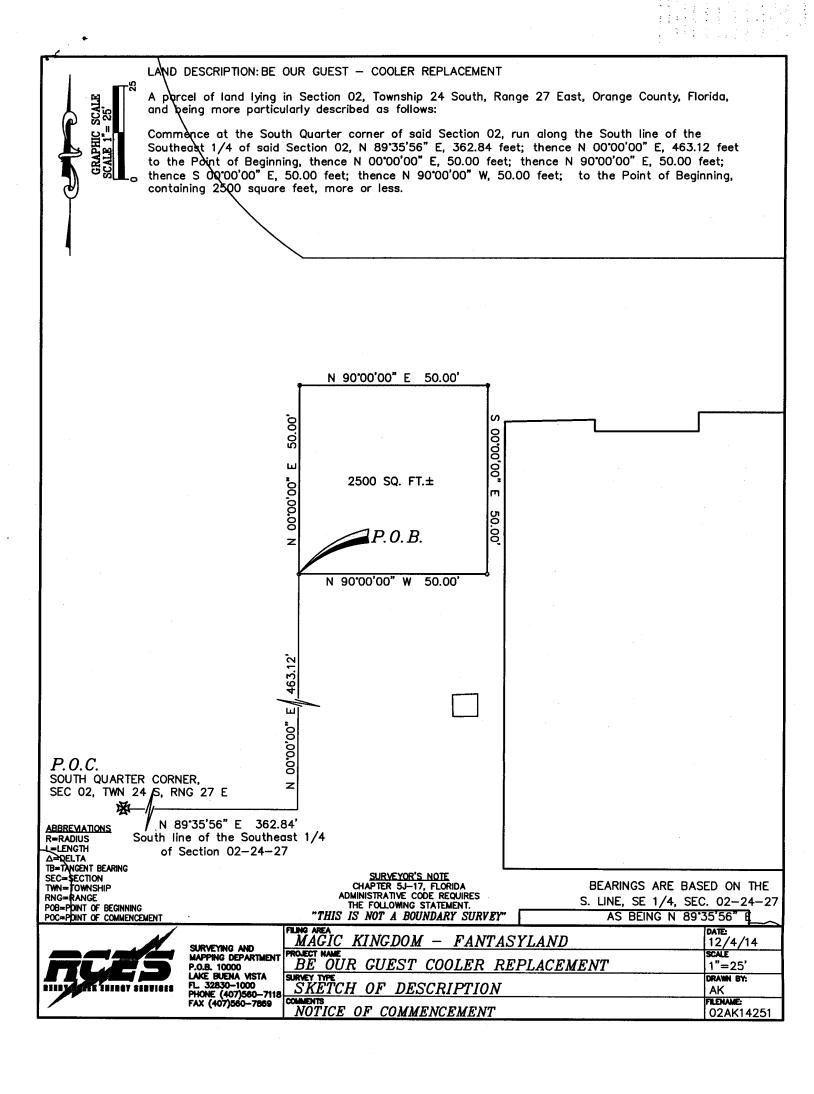


DOC# 20140621434 B: 10845 P: 5776 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO

Prepared by/record and return to: Walt Disney World Resort Attn: Judy Wells P.O. Box 10000 Lake Buena Vista, FL 32830-1000



			Permit No. (ax Folio No.	Address and the Control of the Contr
			NOTICE OF COMMENCEMENT	•
	State	e of Flo	orida, County of Orange	÷
	The with	under: Chapt	signed hereby gives notice that improvements will be made to certain real property, and ter 713, Florida Statutes, the following information is provided in this notice of commend	d in accordance cement.
	1,	Desc	cription of property: Legal Description attached	
	2.	Gene	eral description of improvements: Mechanical	
	3.	Own	ner Information:	•
		(a)	Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buens Vista, F	TL 32830
		(b)	Interest in property: Owner	
		(c)	Name and address of fee simple titleholder (if other than Owner):	
	4.	(a)	Contractor (name and address): C.T. Lilly 7 E. 17th Street, St. Cloud FL. 34769	
		(b)	Contractor's phone number: 407-957-9988	
	5.	Sure	· sly:	
		(a)	Name and address:	
		(b)	Phone number: Amount of Bond:	
	6.	(a) (b)	Lender (name and address); Lender's phone number:	
	7 ×	(a)	Persons within the State of Florida designated by Owner upon whom notices or other may be served as provided by Section <u>713.13</u> (1)(a)7., Florida Statues; (name and Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena V.	address);
		(b)	Phone numbers of designated persons: (407) 828-3582	
8.		(a)	In addition to himself or herself, Owner designates Steve Luttrell	of Magic Kingdom
		(b)	to receive a copy of the Lienor's Notice as provided in Section 713:13 (1)(b), Florid Phone number of person or entity designated by owner: 407-824-6606	ja Statutes.Davda
	9.		ration date of notice of commencement (the expiration date is 1 year from the date of ss a different date is specified): 11/24/15	recording
	OF C SECT IMPR POST CON	OMMI TION 7 LOVEN TED O SULT	TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF ENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, F13.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR MENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECONDUCTOR SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RE	PART I, RDED AND FINANCING,
	YOU	R NOT	TICE OF COMMENCEMENT.	
		ترسد	Mellel 718mm hur men /1	Count Exercise Sances
			Signature of Owner Signatory's Printed Name/Tit	MCMas
	The fo	pniogen	instrument was acknowledged before me this 25" day of November 2014 by Stephin	hatfell .00
			Authorized Signatory Walt Disney World Reso	ort
		(Type o	of authority, e.g.; officer, sustee, altomay-in-fact) (name of party on behalf of whom instrument	was executed)
		_	PHILLIP YOWER	
		Si	Synature of Notery Public - State of Florida (Print, Type, or Stamp Commissioned Name	of Notary Public)
		Parent	nally Known OR Produced ID	
			of ID Produced	Notary Public State of Florida
	Veri	ification	pursuant to Section 92.525 Florida Statutes: Under penalties of parjury, I declare that have read	Philip Yohner My Commission FF 150347
			ng and the file facts stated with are true to the best of my knowledge and belief.	Dipires 08/12/2018
		THE STATE OF THE S	Signature of Natural Person	Signing Above



DOC# 20140621435 B: 10845 P: 5778 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO

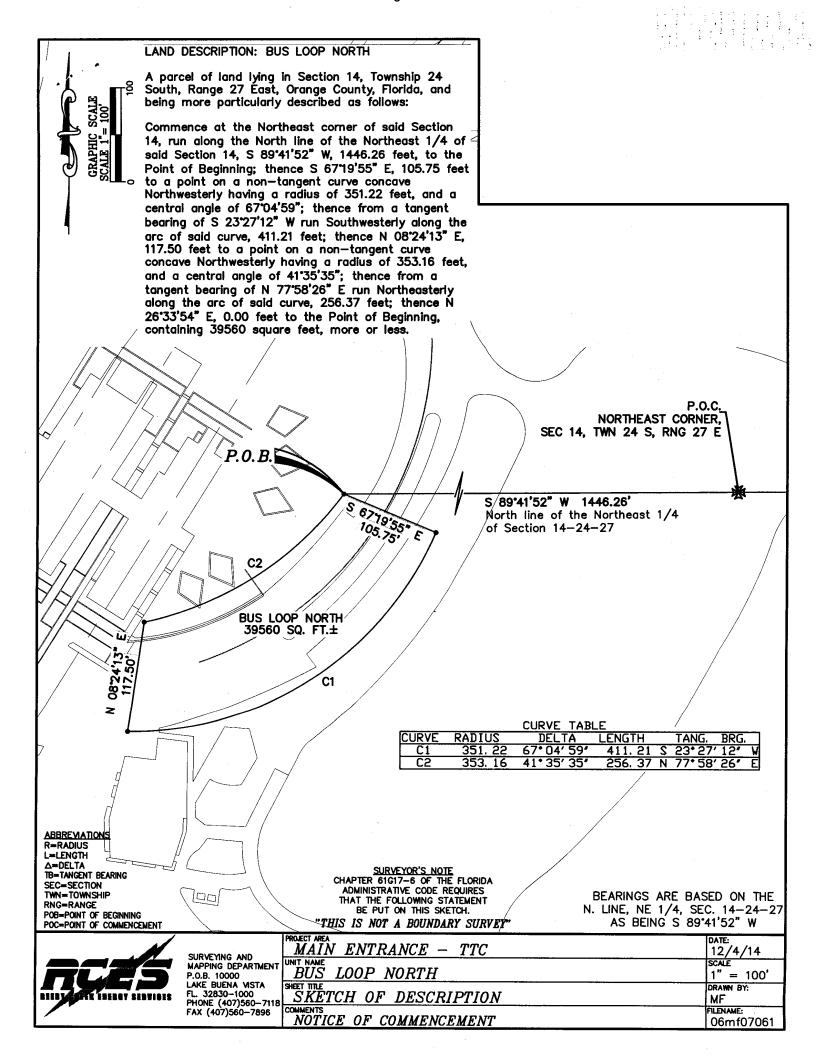
Tax Folio No.

Prepared by/record and return to: Walt Disney World Resort Attn: Judy Wells P.O. Box 10000 Lake Buena Vista, FL 32830-1000

Permit No.



		NOTICE	E OF COMMEN	CEMENT				
		orida, County of Orange						
		signed hereby gives notice that imp ter 713, Florida Statutes, the following					1	
1.	Des	cription of property: Legal Description	n atlached					
2.	Gen	eral description of improvements: E	lectrical and Tie D	own				
3.	Own (a)	ner Information: Name and address: Walt Disney \	World Resort, P.C	. Box 10000, Lake 8	uena Vista, I	FL 328 30		
	(b)	Interest in property: Owner Name and address of fee simple t	itleholder (if other	than Owner):				
4.	(a)	Contractor (name and address): E	BVCC 3291 Dopey Drive	, Lake Buena Vista F	L 32830			•
	(b)	Contractor's phone number: 407-	828-1869					
.	Sura (a) (b) (c)	ety: Name and address: Phone number: Amount of Bond:				202		
δ.	(a) (b)	Lender (name and address): Lender's phone number:						
7.	(a) (b)	Persons within the State of Florida may be served as provided by Sec Dave Ellia, Sourcing & Procurem Phone numbers of designated per	ction <u>713.13</u> (1) ent Administration	a)7., Florida Statues n, P.O. Box 10000, L	: (name and	address):	830-1000	
ý	(a) (b)	In addition to himself or herself, O to receive a copy of the Lienor's i Phone number of person or entity	Notice as provide			of Magic K da Statutes.Dav	•	
9.		iration date of notice of commence as a different date is specified): 11/		on date is 1 year from	n the date of	recording		
OF C SEC IMPI POS CON	COMMITTION INTO THE COMMITTER COMMIT	TO OWNER: ANY PAYMENTS M/ ENCEMENT ARE CONSIDERED II 713.13 , FLORIDA STATUTES, AN MENTS TO YOUR PROPERTY. A I IN THE JOB SITE BEFORE THE F WITH YOUR LENDER OR AN ATT	MPROPER PAYN D CAN RESULT I NOTICE OF COM IRST INSPECTK	IENTS UNDER CHA IN YOUR PAYING T MENCEMENT MUS ON. IF YOU INTEND	PTER 713, I WICE FOR T BE RECO TO OBTAIN	PART I, RDED AND I FINANCING,	SE .	
YOU	IR NQ	TICE OF COMMENCEMENT.		/ 1	k ;	141		<i>)</i> :
	Æ	To Kall de	**	Helves Le	1764	1/4900	Liverette	WE SERVICE,
تعصيد		Signature of Owner	***	Signatory's Print	ed Name/Ti	tie/Office		
The	foregoing	ner's Authorized officer/Director/Panner/Manager) prinstrument was acknowledged before me ill	his 25 day of No	VENBER, 20 14	.ouSreph	ce Luttell	, RS	·
		Authorized Signatory			y World Res			
	(Type	of authority, e.g., officer, invsice, sillorney-in-fact)		(name of party on behalf of				
				PHILLIP	YOHNED			
	8	figurature of Notary Public - State of Florida		(Print, Type, or Slamp Con	nmissioned Neme	of Notary Pubic)	AVAAAAA	~~~~
	Type o	of ID Produced pursuant to Section 92.525, Florida Statu ng and that the other stated both size for the control of the contro			have read	(4)	Notary Public State Phillip Yohner My Commission FF Expires 08/12/2018	of Florida
,,,,,		M. Cul Z		Signature of Na	hiral Person	Signing Ahay	্বতের প্রস্থান কর্ম কর্ম কর্ম কর্ম কর্ম কর্ম কর্ম কর্ম	
-				SiAllernia of Ma		· Aidimid Vnoa		
2757 C. 1								
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Walt Disney World Resort Attn: Don Hudson P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20140621436 B: 10845 P: 5780 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



Permit No.			

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

The undersigned hereby gives notice that improvements 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.

- Description of property: SEE ATTacked. 1.
- General description of improvements: Healani al 2.
- 3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
- (a) Contractor (name and address): Lake Buena Vista Fire Protection INC PO Box 22369 Lake Buena Vista Florida 32830
 - (b) Contractor's phone number: 321-228-4235
- 5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - Amount of Bond: (c)
- (a) 6. Lender (name and address):
 - Lender's phone number: (b)
- 7. (a) 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 Statues: (name and address): Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - (b) Phone numbers of designated persons: (407) 828-3582
- 8. In addition to himself or herself, Owner designates of Facilities Services (a) Lonnie D. Hall to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes.DavDa
 - Phone number of person or entity designated by owner: 407-827-4997
 - Expiration date of notice of commencement (the expiration date is 1 year from the date of recording 9. unless a different date is specified): 12/05/15

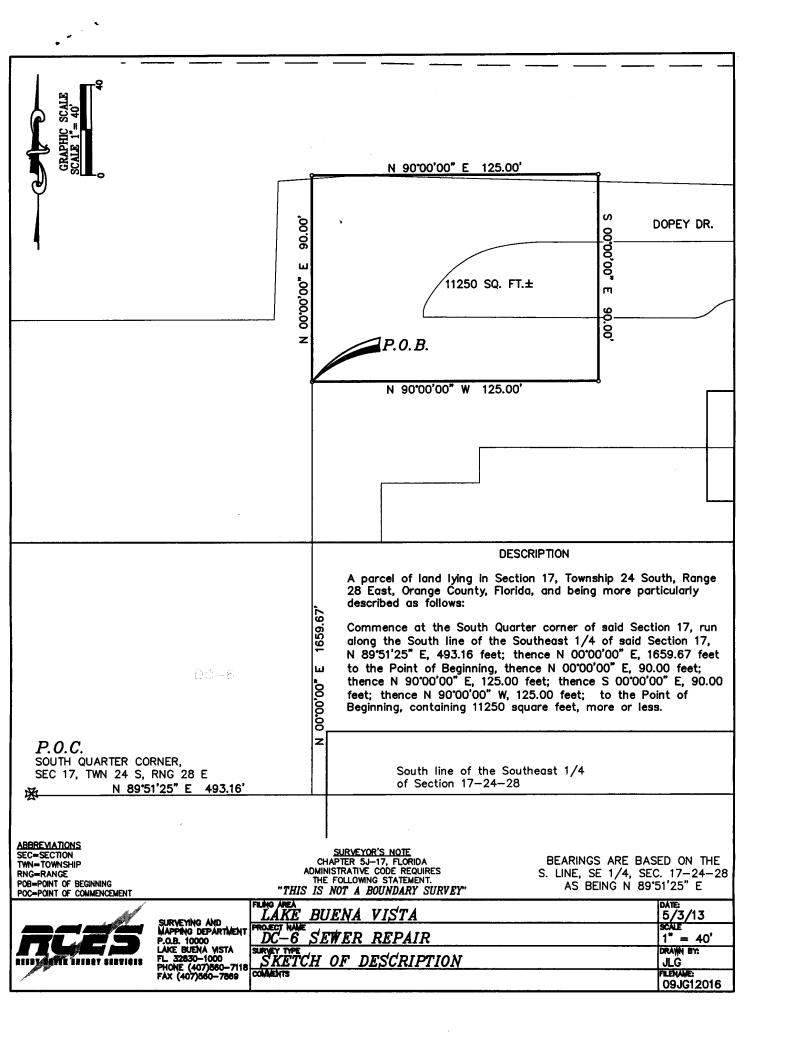
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED 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 UR NOTICE OF COMMENCEMENT

MARABEN WDW HVOSON proco Signature of Owner Signatory's Printed Name/Title/Office Authorized officer/Director/Pa by Sound Hudson Authorized Signatory Walt Disney World Resort

Namey A Kohiman Ny Commission Est OR Produced ID on EE 211485 09/07/2016 Florida Statutes: Under penalties of perjury, I declare that I have read 92.525

acts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing Above



Walt Disney World Resort

8.

Attn: Don Hudson P.O. Box 10000 Lake Buena Vista, FL 32830-1000

DOC# 20140621437 B: 10845 P: 5782 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



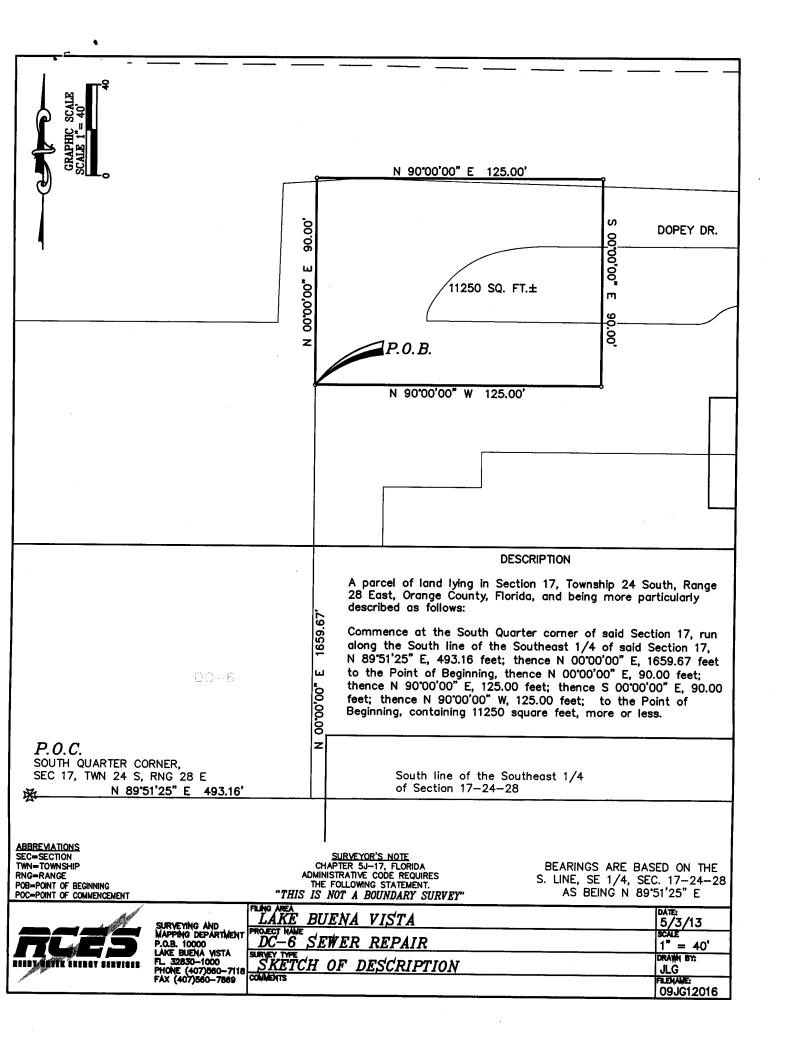
		Permit No.	T _i
		NOTICE OF COMMI	ENCEMENT
Sta	te of F	Florida, County of Orange	
The with	unde n Chap	ersigned hereby gives notice that improvements will upter 713, Florida Statutes, the following information	be made to certain real property, and in accordance is provided in this notice of commencement.
1.		escription of property: SEE ATTACHET	8
2.	Ger	eneral description of improvements: I \mathcal{H} Echd	vical
3.	Ow	wner Information:	
	(a)	Name and address: Walt Disney World Resort, F	² .O. Box 10000, Lake Buena Vista, FL 32830
	(b)	• • •	
	(c)	Name and address of fee simple titleholder (if oth	er than Owner):
4.	(a)	Vista Florida 32	ta Fire Protection INC PO Box 22369 Lake Buena 830
	(b)	Contractor's phone number: 321-228-4235	
5.		rety:	
	(a) (b)		
	(c)	Amount of Bond:	
6.	(a) (b)	,	
7.	(a)	Persons within the State of Florida designated by	Owner upon whom notices or other documents
		may be served as provided by Section 713.13 (I)(a)7., Florida Statues: (name and address):
	(b)		on, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
	(a)	In addition to himself or herself, Owner designate:	
	(4)	to receive a copy of the Lienor's Notice as provide	led in Section 713.13 (1)(b), Florida Statutes.DavDa
	(b)	Phone number of person or entity designated by o	wner: 407-827-4997
9.	Expir unles	piration date of notice of commencement (the expiration date of notice of commencement (the expiration): 12/05/15	tion date is 1 year from the date of recording
WAR	NING .	TO OWNER: ANY PAYMENTS MADE BY THE ON	WNER AFTER THE EXPIRATION OF THE NOTICE
OF C	OMME	ENCEMENT ARE CONSIDERED IMPROPER PAY	MENTS UNDER CHAPTER 713, PART I,
IMPR	OVEM	<u>713.13</u> , FLORIDA STATUTES, AND CAN RESULT MENTS TO Y <u>OUR</u> PROPERTY. A NOTICE OF COI	MMENCEMENT MUST BE RECORDED AND
PØST	EDQ	ON THE JOE SITE BEFORE THE FIRST INSPECTI	ON. IF YOU INTEND TO OBTAIN FINANCING,
YOUR		TIGE OF COMMENCEMENT.	RE COMMENCING WORK OR RECORDING
ŕ	\ _v _		Donne Maria mana (and (and (and))
		Signature of Owner	Signatory's Printed Name/Title/Office
	(or Owne	ner's Authorized officer/Director/Partner/Manager)	
The for	egoing i	instrument was acknowledged before me this day of	Dec 20 Hoy DONAND HUSSON, 25
		Authorized Signatory	Walt Disney World Resort
í	(Type of	of authority, e.g., officer, trustee, attorney-in-fact)	(name and a trained of whom instrument was executed)
	71	ary U. Tokeman	Notary Public State of Florida
		gnature of filtrary Public - State of Florida	Nancy A Kohlman (Print yea care length of the control of the cont
F	ersona.	ally Known V OR Produced ID	Expires 09/07/2016

OR Produced ID

foregoing and that the facts stated in it are true to the best of my knowledge and belief.

22.525 ,Florida Statutes: Under penalties of perjury, I declare that I have read

_ Signature of Natural Person Signing Above



Walt Disney World Resort

Attn: Don Hudson P.O. Box 10000

Lake Buena Vista, FL 32830-1000

Permi

DOC# 20140621438 B: 10845 P: 5784 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



t No.	

NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvements 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.

Description of property See ATTACHED 1.

- General description of improvements: 2.
- 3 Owner Information:
 - Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - Name and address of fee simple titleholder (if other than Owner): (c)
- Contractor (name and address): Lake Buena Vista Fire Protection INC PO Box 22369 Lake Buena (a) 4. Vista Florida 32830
 - (b) Contractor's phone number: 321-228-4235
- Surety: 5.
 - Name and address: (a)
 - Phone number: (b)
 - Amount of Bond: (c)
- Lender (name and address): 6. (a)
 - Lender's phone number: (b)
- Persons within the State of Florida designated by Owner upon whom notices or other documents 7. (a) may be served as provided by Section 713.13 (1)(a)7., Florida Statues: (name and address): Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - Phone numbers of designated persons: (407) 828-3582 (b)
- In addition to himself or herself, Owner designates Lonnie D. Hall of Facilities Services (a) to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes.DavDa
 - Phone number of person or entity designated by owner: 407-827-4997
 - Expiration date of notice of commencement (the expiration date is 1 year from the date of recording 9. unless a different date is specified): 12/05/15

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 HOTICE OF COMMENCEMENT.

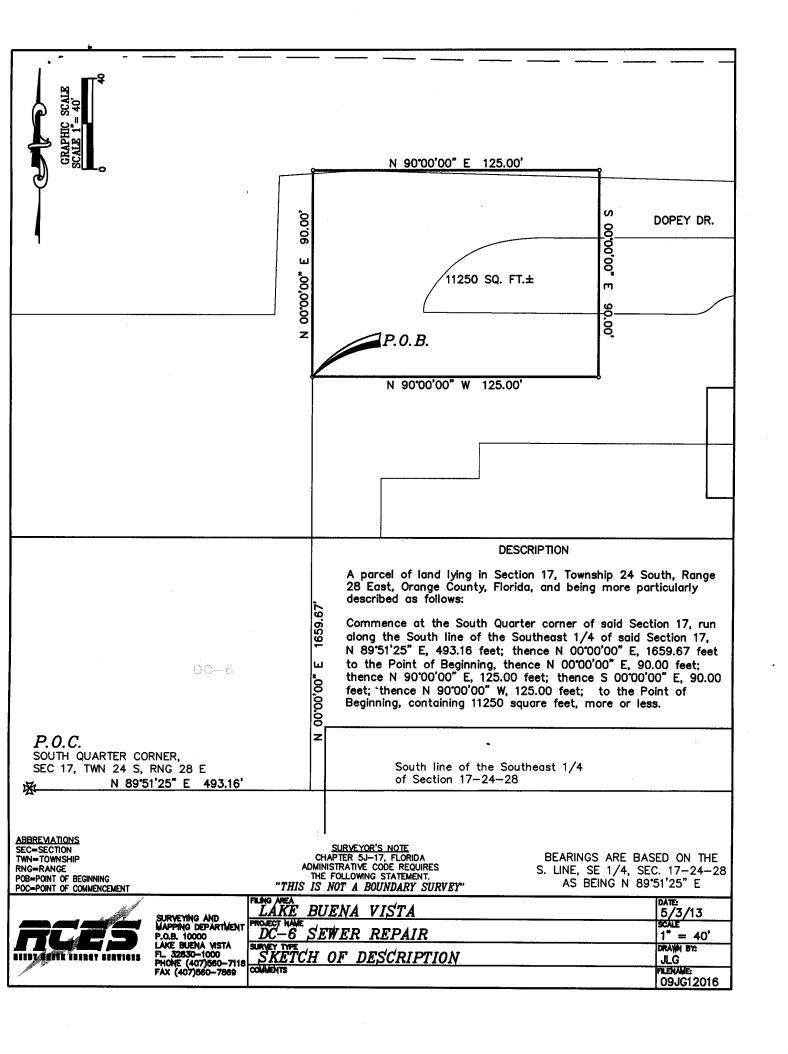
DONALO HUOSZA MANAGER WOW Signature of Owner Signatory's Printed Name/Title/Office The foregoing instrument was acknowledged before me this .2014. by Dowald Hudson

Authorized Signatory

Personally Known Type of ID Produced Walt Disney World Resort Notary Public State of Florida Nemov Name Di Rean Public) my Commission EE 211485 Expires 09/07/2016

ant to Section 92.525 ,Floride Statutes: Under penalties of perjury, I declare that I have read facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing Above



Permit Number:

Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Renee Wolfe P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20140621439 B: 10845 P: 5786 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha 0. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO

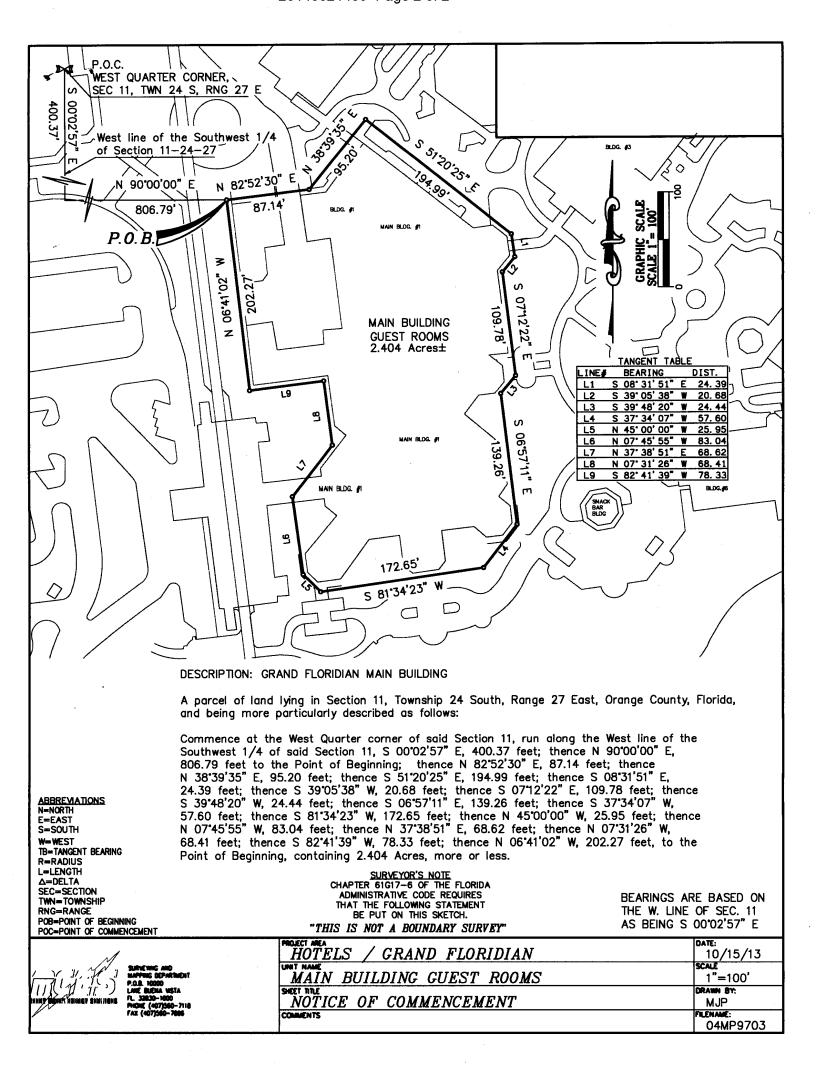


NOTICE OF COMMENCEMENT

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 Statues, the following information is provided in this Notice of Commencement.

	escription of property (legal description of the property ee Attached	erty, and street address if available)
	eneral description of improvement	
_	oom Rehab.	
_	wner information or Lessee information if the Lesse	ee contracted for the improvement
	Name Walt Disney World Resort	Au an
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	1
	nterest in Property Owner	
	Name and address of fee simple titleholder (if diffe	rent from Owner listed above)
	Name	
	Address	
	ontractor	Talanhana Niverbar 407 056 0074
	Name Southeastern Design & Electrical	Telephone Number 407-856-8871
	Address 1031 Salsona Ave., Kissimmee, FL 34774	
	urety (if applicable, a copy of the payment bond is atta	
	Name	
	Address	Amount of Bond \$
	ender	Talambana Niumban
	Name	Telephone Number
	Address	vner upon whom notices or other documents may be
		•
	erved as provided by Section 713.13(1)(b), Florida S	
	Name Judy Wells, Facility Asset Management (FAM)	
	Address P.O. Box 10000, Lake Buena Vista, Florida 32	
		ne following to receive a copy of the Lienor's Notice as
-	ovided by Section 713.13(1)(b), Florida Statutes. Name Renee Wolfe	Tolophone Number (407)939 3301
		Telephone Number (407)828-2301
	Address P.O. Box 10000, Lake Buena Vista, Florida 32	piration date may not be before the completion of construction
	•	m the date of recording unless a different date is specified)
YING IE JO TORI	TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND THE SECOND INTENDED TO SECOND YOUR NOTICE BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE.	regoing notice of commencement and that the facts
K	Mate Mate	UE D. CUTURE/PM
	gnature of Owner or Lessee, or Owner's or	Signatory's Printed Name/Title/Office
	s's Authorized Officer/Director/Partner/Manager regoing instrument was acknowledged before me this	5th day of Dec /2014, by MICHELE CUTLE
		_ month/year
.	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
	Discollens	LizCollins
	Signature of Notery Public - State of Florida	Print, type, or stamp name of Notary Public
Perso	onally Known OR Produced ID	Notary Public State of Florida
Туре	of ID Produced	Liz Collins My Commission FF 162548 Expires 10/11/2018



Walt Disney World Resort Attn: Andrew Highsmith P.O. Box 10000 Lake Buena Vista, FL 32830-1000

DOC# 2014062144	0 B: 10845 P: 5788
12/09/2014 12:25: Rec Fee: \$18.50	42 PM Page 1 of 2
Martha O. Haynie,	Comptroller
Orange County, FĹ MB – Ret To: WALT	DISNEY WORLD CO



Permit No	Tax Folio No.
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NOTICE OF COMMENCEMENT

State of Florida, County of Orange

The undersigned hereby gives **notice** that improvements 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: See ATTACHED
- 2. General description of improvements: Hechanical
- 3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
- 4. (a) Contractor (name and address): LBV Fire Protection Inc / 5371 Shady Wood LN, Orlando, FL 32819
 - (b) Contractor's phone number: 407/293-4869
- 5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
- 6. (a) Lender (name and address):
 - (b) Lender's phone number:
- 7. (a) Persons within the State of Florida designated by Owner upon whom **notices** or other documents may be served as provided by Section <u>713.13</u> (1)(a)7., Florida Statues: (name and address):

 Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - (b) Phone numbers of designated persons: (407) 828-3582
- 8. (a) In addition to himself or herself, Owner designates Andrew Highsmith of Disney Hollyword to receive a copy of the **Lienor's Notice** as provided in Section 713.13 (1)(b), Florida Statutes.DavDa
 - (b) Phone number of person or entity designated by owner: 407-560-5494
 - 9. Expiration date of **notice** of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 11/26/2015

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.

Signature of Owner

(or Owner's Authorized officer/Director/Partner/Manager)

Signatory's Rhinted Name/T

The foregoing instrument was acknowledged before me this 26 day of Nov.

____, 20_ ht, by ANDREW Highsmith, as

Authorized Signatory

thority, e.g., dfficer Austee, attorney-in-fact)

Walt Disney World Resort

(name of party on behalf of whom instrument was executed)

Signature of Notary Public State of Florida

Personally Known OR

OR Produced ID

Type of ID Produced

(Print, Type Common Common Man Gradua RDF)

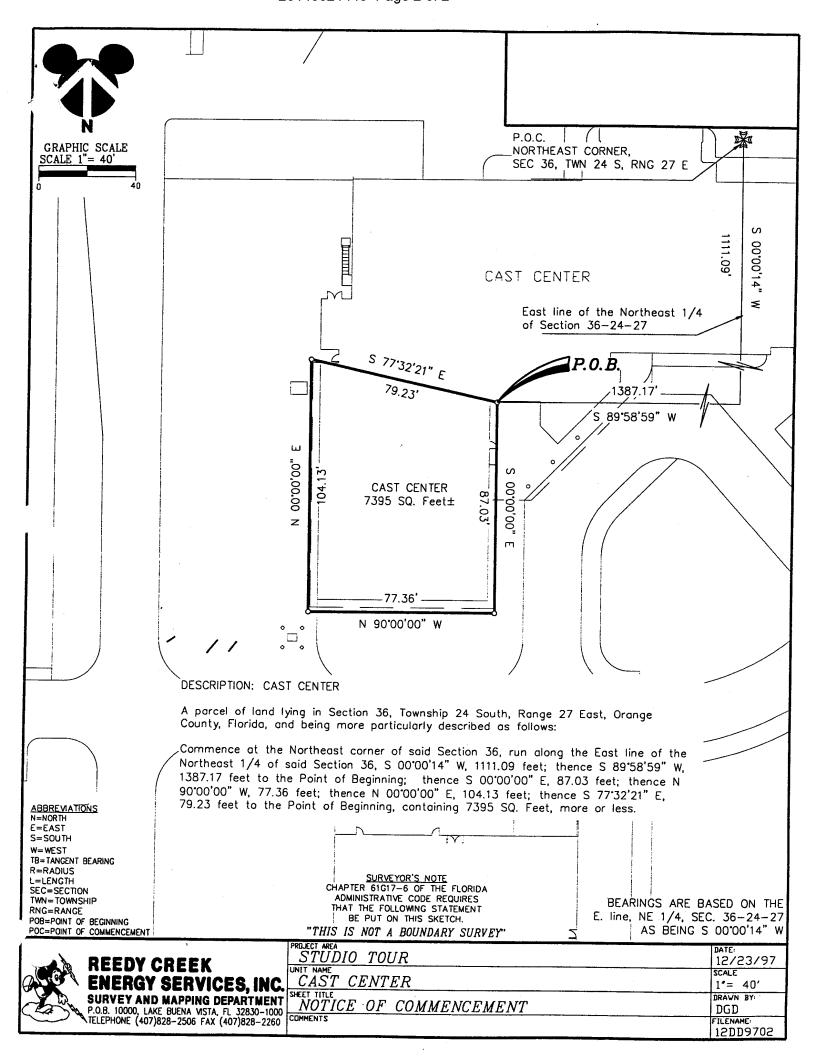
Commission # EE 860765

My Commission Expires

December 26, 2016

Verification pursuant to Section 92.525, Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

___ Signature of Natural Person Signing A



Walt Disney World Resort Attn: Andrew Highsmith P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOC# 20140621441 B: 10845 P: 5790 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



Permit No.	Tax Folio No

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

The undersigned hereby gives **notice** that improvements 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: SEE ATTACHES
- 2. General description of improvements: Mechanical
- 3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
- 4. (a) Contractor (name and address): LBV Fire Protection Inc / 5371 Shady Wood LN, Orlando, FL 32819
 - (b) Contractor's phone number: 407/293-4869
- 5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
- 6. (a) Lender (name and address):
 - (b) Lender's phone number:
- 7. (a) Persons within the State of Florida designated by Owner upon whom **notices** or other documents may be served as provided by Section <u>713.13</u> (1)(a)7., Florida Statues: (name and address): **Dave Ellis**, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - (b) Phone numbers of designated persons: (407) 828-3582
- 8. (a) In addition to himself or herself, Owner designates Andrew Highsmith of Disney Hollywords to receive a copy of the **Lienor's Notice** as provided in Section 713.13 (1)(b), Florida Statutes.DavDa
 - (b) Phone number of person or entity designated by owner: 407-560-5494
 - 9. Expiration date of **notice** of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 11/26/2015

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.

Signature of Owner Signature of Owner Signature of Owner Signatury's Printed Name/Title/Office

(or Owner's Armorized officer/Director/Partner/Manager)

The foregoing instrument was acknowledged before me this 24 day of Nov , 20 14 , by W D new High SM Head

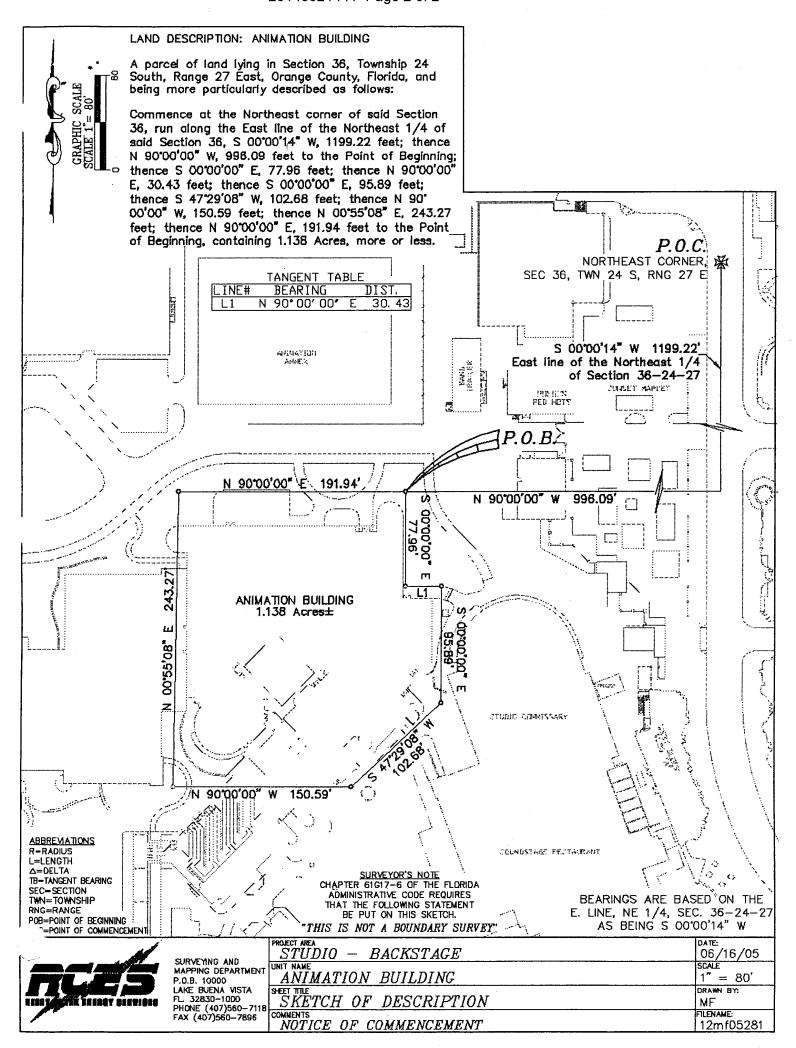
Authorize	ed Signato	ry		
(Type of authority, e.g. o	officer trustee,	attorney	n-fact)	
Marix	/Arbha/	att	_	
Signature of Notary Hublic - State of Florida				
Personally Known		OR	Produced ID	
Type of ID Produced				

(Print, Print, Commission # EE 860765 Commission Expires Commission Expires Print)

Walt Disney World Resort

Verification pursuant to Section 92.525, Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

_ Signature of Natural Person Signing Above



Walt Disney World Resort Attn: Andrew Highsmith P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOC# 20140621442 B: 10845 P: 5792 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



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Tax Folio No.

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

Permit No.

The undersigned hereby gives notice that improvements 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.

- Description of property: SEE ATTACKED 1.
- General description of improvements: Mechanical 2.
- **Owner Information:** 3
 - Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
- Contractor (name and address): LBV Fire Protection Inc / 5371 Shady Wood LN, Orlando, FL 32819 4. (a)
 - (b) Contractor's phone number: 407/293-4869
- 5. Surety:
 - Name and address: (a)
 - Phone number: (b)
 - Amount of Bond: (c)
- Lender (name and address): 6. (a)
 - Lender's phone number: (b)
- Persons within the State of Florida designated by Owner upon whom notices or other documents 7. (a) may be served as provided by Section 713.13 (1)(a)7., Florida Statues: (name and address): Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - Phone numbers of designated persons: (407) 828-3582 (b)
- of Disney Hollywogs 8. In addition to himself or herself, Owner designates Andrew Highsmith (a) to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes.DavDa
 - Phone number of person or entity designated by owner: 407-560-5494 (b)
 - Expiration date of notice of commencement (the expiration date is 1 year from the date of recording 9 unless a different date is specified): 11/26/2015

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.

Signature of Owner

(or Owner's Authorized officer/Director/Partner/Manager)

day of NDV. The foregoing instrument was acknowledged before me this

v-in-fact)

Authorized Signatory

Walt Disney World Resort

LORRIE A. GEBHARDT Commission # EE 860765 My Commission Expires

ublic - State of Florida

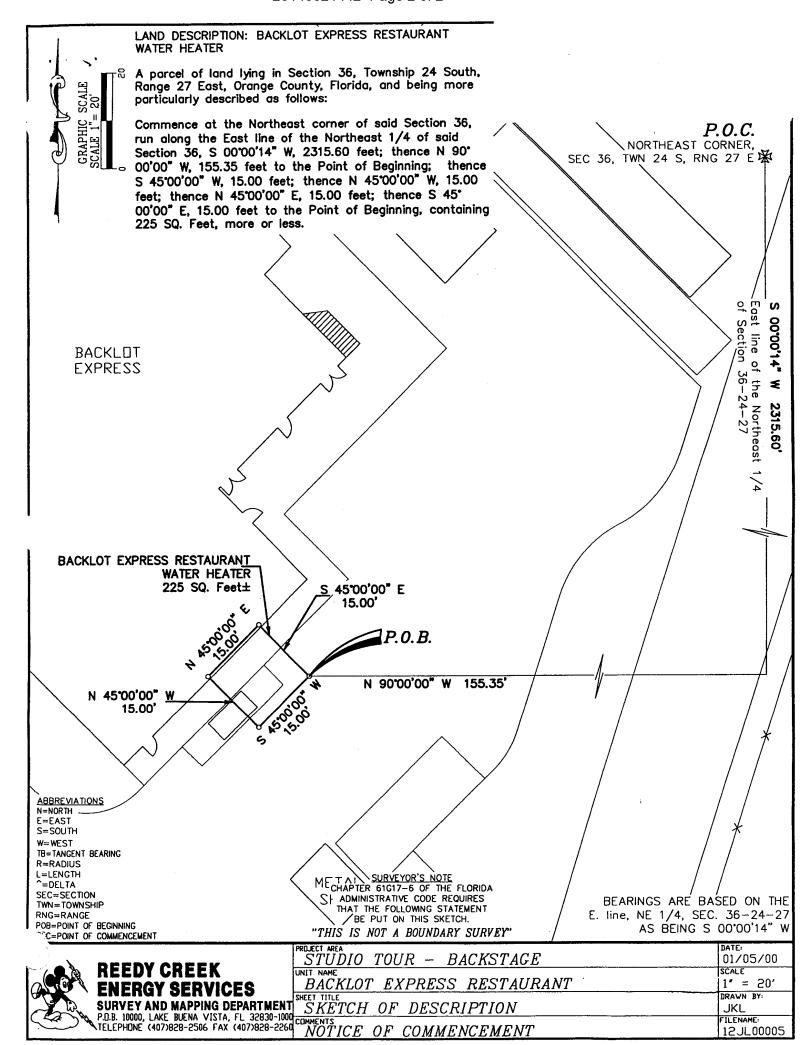
authority

Personally Known OR Produced ID

Type of ID Produced

Verification pursuant to Section 92.525 ,Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing Above 10



Walt Disney World Resort Attn: Andrew Highsmith P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20140621443 B: 10845 P: 5794 12/09/2014 12:25:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



	Lan			
			Permit No.	1 ax Folio No
			NOTICE OF COMMEN	ICEMENT
	Stat	e of Fl	orida, County of Orange	
			signed hereby gives notice that improvements will beter 713, Florida Statutes, the following information is	
	1.	Des	cription of property: Sec Attaches.	•
	2.	Gen	neral description of improvements: Heckauc	al .
	3.	Owr (a)	ner Information: Name and address: Walt Disney World Resort, P.	D. Box 10000, Lake Buena Vista, FL 32830
		(c)	Interest in property: Owner Name and address of fee simple titleholder (if other	r than Owner):
	4.	(a)	Contractor (name and address): LBV Fire Protection	on Inc / 5371 Shady Wood LN, Orlando, FL 32819
		(b)	Contractor's phone number: 407/293-4869	
5. Surety:(a) Name and address:(b) Phone number:(c) Amount of Bond:				
	6.	(a) (b)	Lender (name and address): Lender's phone number:	
	7.	(a) (b)	Persons within the State of Florida designated by 0 may be served as provided by Section 713.13 (1) Dave Ellis, Sourcing & Procurement Administration Phone numbers of designated persons: (407) 828-	n(a)7., Florida Statues: (name and address): n, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
8.		(a) (b)	In addition to himself or herself, Owner designates to receive a copy of the Lienor's Notice as provide Phone number of person or entity designated by or	ed in Section 713.13 (1)(b), Florida Statutes.DavDa
	9.		iration date of notice of commencement (the expirates a different date is specified): 11/26/2015	ion date is 1 year from the date of recording
(5 II F	OF C SECT MPR POST	OMMITION Z ROVEN TED O SULT	TO OWNER: ANY PAYMENTS MADE BY THE OWNERCEMENT ARE CONSIDERED IMPROPER PAYMENTS, FLORIDA STATUTES, AND CAN RESULT MENTS TO YOUR PROPERTY. A NOTICE OF COMENTHE JOB SITE BEFORE THE FIRST INSPECTION WITH YOUR LENDER OR AN ATTORNEY BEFORE TICE OF COMMENCEMENT.	MENTS UNDER CHAPTER 713, PART I, IN YOUR PAYING TWICE FOR IMENCEMENT MUST BE RECORDED AND ON. IF YOU INTEND TO OBTAIN FINANCING,
Hadrey Hadrey		and the Marine	Hodrew Highsmith /Mgr. 10HS	
		, -	Signature of Owner	Signatory's Printed Name/Title(Office
٦	The fo		ner's Aut horized officer/Director/Partner/Manager) I instrument was acknowledged before me this all day of	DOV 20 14 by ANDREW Highsmith, as
			Authorized Signatory	Walt Disney World Resort
		(Type o	of authority (e.g., difficer, trustee, attor/ey-in-fact)	(name of the control

 $\label{eq:local_point} \mbox{Verification pursuant to Section} \quad \mbox{$\frac{92.525}{$}$} \quad \mbox{, Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.}$

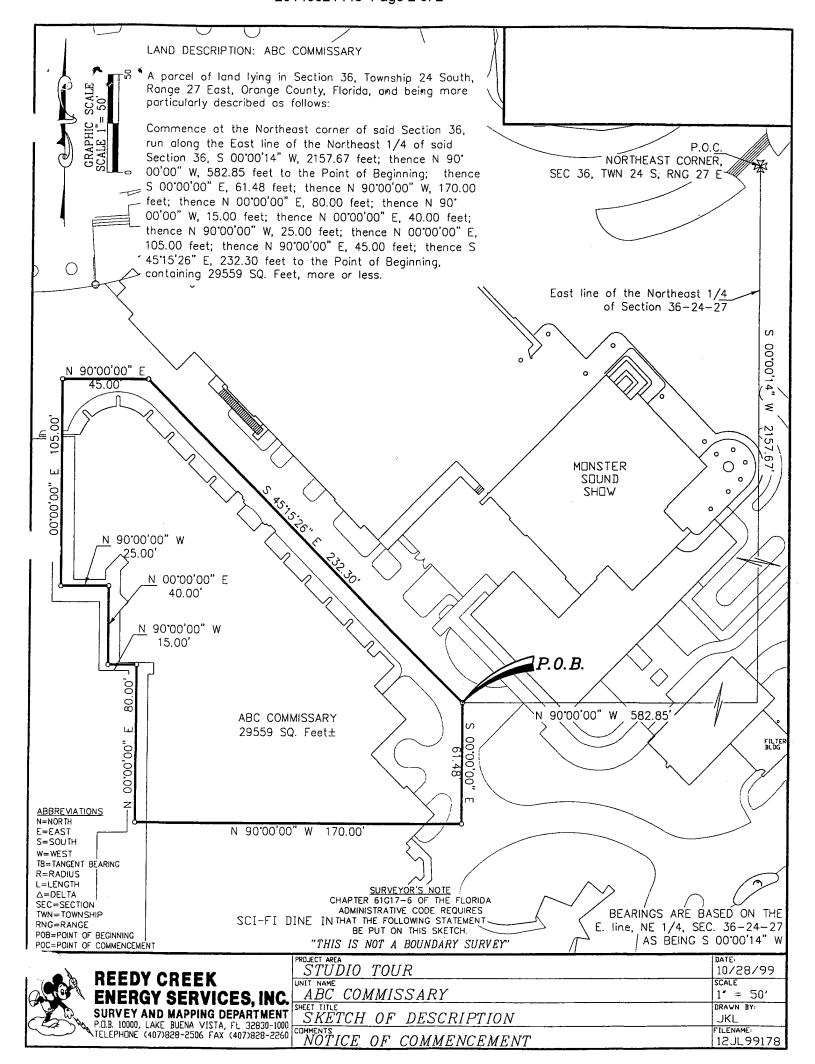
Produced ID

OR

Personally Known

Type of ID Produced

Signature of Natural Person Signing Ap



	rmit Number:	DOCH 20140622448 B: 10845 P: 8898
Folio	lio/Parcel ID #:epared by: D. PAUL ROBERTSON	Rec Ess. 410 00.35 Hill Page 1 of 1
•		Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: GRUNAU COMPANY INC
		MB - Ret To: GRUNAU COMPANY INC
Retu	turn to: D. PAUL ROBERTSON	33))) 3)(7 -1045-1045-1045) (1-10-104-104)
	NOTICE OF COMMENCEMENT	
	ate of Florida, County of Orange	node to cortain real preparty, and in accordance
	e undersigned hereby gives notice that improvement will be n h Chapter 713, Florida Statutes, the following information is p	
	Description of property (legal description of the property, a MAGIC KINGDOM, HAUNTED MANSION, BAY LAKE, FL	nd street address if available)
2 (General description of improvement	02021
۷. ۲	FIRE SPRINKLER CONSTRUCTION	
	Owner information or Lessee information if the Lessee of Name WALT DISNEY WORLD	ontracted for the improvement
	Address PO BOX 10,000, LAKE BUENA VISTA, FL 32830	
	Interest in Property	
	Name and address of fee simple titleholder (if different fr Name	·
	Address	
	Contractor Name GRUNAU COMPANY INC.	Telephone Number 407-857-1800
	Address 11,300 SPACE BOULEVARD, ORLANDO, FL 328	37
5. \$	Surety (if applicable, a copy of the payment bond is attached	d)
	NameAddress	Telephone Number
		Amount of Bond \$
	Lender	Talanhana Numbar
	NameAddress	releprione Number
	Persons within the State of Florida designated by Owne	r upon whom notices or other documents may
٠.	be served as provided by §713.13(1)(a)7, Florida Statute	es.
		Telephone Number
	Address	
8.	In addition to himself or herself, Owner designates the Notice as provided in §713.13(1)(b), Florida Statutes.	-
	Name	Telephone Number
9.	Address Expiration date of notice of commencement (the expirate	ion date may not be before the completion of
J.	construction and final payment to the contractor, but will be different date is specified)	1 year from the date of recording unless a
ARE RES	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER T LE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART SULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROP CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPE TH YOUR LEWIER OR AN ATTORNEY BEFORE COMMENCING WORK	I, SECTION 713.13, FLORIDA STATUTES, AND CAN ERTY. A NOTICE OF COMMENCEMENT MUST BE CTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT OR RECORDING YOUR NOTICE OF COMMENCEMENT.
	/ 100 Holes	Charles Crometine swee
Sign	nature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Direc	tor/Partner/Manager Signatory's Title/Office
The	be foregoing instrument was acknowledged before me this 2	day of 12/2014 by STEVE CUTTRELL
1110		month/year name of person
as _		WALT DISNEY WORLD RESORT
	Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed
_		PHILLIP YOHNER
		Print, type, or stamp commissioned name of Notary Public
	ersonally KnownOR Produced ID pe of ID Produced	Notary Public State of Florida Phillip Yohner My Commission FF 150347 Expires 08/12/2018
_		

Form content revised: 10/17/12

FolioParcel ID #: Prepared by: Return to: Abby Brandenburg Return to: Abby Brandenburg Return to: Abby Brandenburg Siss AVENUE OF THE STARS/PO BOX 10321 LAKE BUENA VISTA, FL 32830 MOTICE 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 prograts statutes, the following information is provided in this Notice of Commencement. 1. Description of prograts statutes, the following information is provided in this Notice of Commencement. 1. Description of prograts and the statutes of the statu	Permit Number:	DOC # 20140622631 B: 10845 P: 9407
Return to: Abby Erandenburg 1356 AVENUE OF THE STARS/PO BOX 10321 LAKE BUENA VISTA, FL 32830 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 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 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 improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, and street address if available) 1. REFERENCE ATTACHMENT "A FOR ADDRESSES" 2. General description of improvement 1. National Machine Property MA Madisher Machine Madisher Machine	Folio/Parcel ID #:	12/10/2014 09:46 AM Page 1 of 2
Return to: Abby Brandenburg 1365 AVENUE OF THE STARS/PO BOX 10321 LAKE BUENA VISTA, FL 32830 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 the property, and street address if available) REFERENCE ATTACHMENT "A" FOR ADDRESSES 2. General description of improvement INSTALL RUNNING TRAIL SIGNS 3. Owner information or Lessee information if the Lessee contracted for the improvement Name WALT DISNEY IMAGINEERING Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Interest in Property, Ma. Name and address of fee simple titleholder (if different from Owner listed above) Name NA Address 4. Contractor Name SIGN PRODUCERS, INC Name SIGN PRODUCERS, INC Name SIGN PRODUCERS, INC Name SIGN PRODUCERS, INC Name NA Address 5. Surely (if applicable, a copy of the payment bond is attached) Name NA Address 6. Lendor Name NA Address C. Lendor Name	Prepared by:	
Integrible Tax: S0.00		· · · · · · · · · · · · · · · · · · ·
1365 AVENUE OF THE STARS/PO BOX 10321		
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 the property, and street address if available) REFERENCE ATTACHMENT "A" FOR ADDRESSES 2. General description of improvement in Instruction of property (legal description of the property, and street address if available) REFERENCE ATTACHMENT "A" FOR ADDRESSES 2. General description of improvement in Instruction of Property (legal description of improvement in Instruction of Property MI/A Name and address of Foe See information if the Lessee contracted for the improvement Name WALT DISNEY IMAGINEERING Address 10 EX 10321, LAKE BUENA VISTA, FL 32830-0321 Interest in Property MI/A Name and address of fee simple titleholder (if different from Owner listed above) Name NA Address 555 WEST LANDSTREET RD. ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name NA Address 555 WEST LANDSTREET RD. ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name NA Address 565 WEST LANDSTREET RD. ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name NA Address 57 Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes. Name RUSSELL STOKES Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Telephone Number 407-560-7697 Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Telephone N	1265 AVENUE OF THE STARS/DO DOY 10221	—— Martha O. Haynie, Comptroller
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 the property, and street address if available) REFERENCE ATTACHMENT "A" FOR ADDRESSES 2. General description of improvement INSTALL RUNNING TRAIL SIGNS 3. Owner information or Lessee information if the Lessee contracted for the improvement Name WALT DISNEY IMAGINEERING Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Interest in Property NIA Name and address of fee simple titleholder (if different from Owner listed above) Name_NIA Address 4. Contractor Name SIGN PRODUCERS, INC. Address 555 WEST LANDSTREET RD., ORLANDO, FL 32824 Contractor Name Sign PRODUCERS, INC. Address Amount of Bond \$ Telephone Number Address 5. Surety (if applicable, a copy of the payment bond is attached) Name NIA Address 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes. Name RUSSELL STOKES Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name BETH DOUGHERTY - CONTRACT ACCOUNTING Name BETH DOUGHERTY - CONTRACT ACCOUNTING Telephone Number 407-560-3660 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 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) WARNING TO Owner or Lessee, or Owner Software Provided Defended Provided Provided State of Provided State of Provided Provided State of Provided Provided State of Provided Provided State of Provided Provided P	LAKE DIJENA MICTA EL 22920	Grange Seamy, 1 E
State of Florida, County of Crange 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 the property, and street address if available) REFERENCE ATTACHMENT 'A' FOR ADDRESSES 2. General description of improvement INSTALL RUNNING TRAIL SIGNS 3. Owner information or Lessee information if the Lessee contracted for the improvement Name Walt. T DISNEY IMAGINEERING Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Interest in Property NIA Name and address of fee simple titleholder (if different from Owner listed above) Name, NIA Address 4. Contractor Name SIGN PRODUCERS, INC. Address 555 WEST LANDSTREET RD., ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name NIA Address 6. Lender Name NIA Address 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(1), Florida Statutes. Name RUSSELL STOKES Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name BUSSELL STOKES Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name Bussell Stokes Name Bussell Stokes Name Bussell Stokes Name Bussell Stokes Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partn	LAKE BUENA VISTA, FL 32630	Ret To: CSC INC
State of Florida, County of Crange 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 the property, and street address if available) REFERENCE ATTACHMENT 'A' FOR ADDRESSES 2. General description of improvement INSTALL RUNNING TRAIL SIGNS 3. Owner information or Lessee information if the Lessee contracted for the improvement Name Walt. T DISNEY IMAGINEERING Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Interest in Property NIA Name and address of fee simple titleholder (if different from Owner listed above) Name, NIA Address 4. Contractor Name SIGN PRODUCERS, INC. Address 555 WEST LANDSTREET RD., ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name NIA Address 6. Lender Name NIA Address 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(1), Florida Statutes. Name RUSSELL STOKES Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name BUSSELL STOKES Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name Bussell Stokes Name Bussell Stokes Name Bussell Stokes Name Bussell Stokes Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partn	NOTICE OF COMMENCE.	
The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 173. Florida Statutes, the following information is provided in this Notice of Commencement. 1. Description of property (legal description of the property, and street address if available) REFERENCE ATTACHMENT "A" FOR ADDRESSES 2. General description of improvement INSTALL RUNNING TRAIL SIGNS 3. Owner information or Lessese information if the Lessee contracted for the improvement Name WALT DISNEY IMAGINEERING Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 Interest in Property N/A Name and address of fee simple titleholder (if different from Owner listed above) Name. N/A Address 555 WEST LANDSTREET RD., ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name N/A Address Amount of Bond \$ 6. Lender Name N/A Address Amount of Bond \$ 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by \$713.13(1)(a)7, Florida Statutes. Name RUSSELL STOKES Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in \$713.13(1)(a)7, Florida Statutes. Name BETH DOUGHERTY - CONTRACT ACCOUNTING Address FO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 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) WARNING TO OWNER: ANY PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUES, AND CAN RESULT IN YOU REVISION OF THE OWNER AND CAN PAYMENTS UNDER COMMENCEMENT INSPECTION. IF YOU interior To owner on Lessee, or Owner's of Lessee's Authorized Officer/Director/Patrier/Manager Signature of Burlay Public - State of Plorida Print, type, or stamp commissioned rame of Notice Proprise of P		ENT
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4. Contractor Name SIGN PRODUCERS, INC. Address 555 WEST LANDSTREET RD., ORLANDO, FL 32824 5. Surety (if applicable, a copy of the payment bond is attached) Name NI/A Address Amount of Bond \$ 6. Lender Name NI/A Address Telephone Number Name RUSSELL STOKES Telephone Number Name RUSSELL STOKES Name RUSSELL STOKES Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name BETH DOUGHERTY - CONTRACT ACCOUNTING Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 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) WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PAST1, 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 STEE BEFORE THE FIRST INSPECTION, If YOU INTEND TO SAIM FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. Under penalty of perjury 1 declare that have read the foregoing notice of commencement and that the facts stated in it are true to the total payment to the control of the payment was acknowledged before me this for goalthority, go., officin, trules altorate altorate of payment was executed with the payment of payment was acknowledged before me this for jointh payment was executed for payment was payment was acknowledged before the proving payment of payment was executed with the payment of payment was ackno		***
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5. Surety (if applicable, a copy of the payment bond is attached) Name N/A Address Amount of Bond \$ 6. Lender Name N/A Address 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes. Name RUSSELL STOKES Telephone Number 407-560-7697 Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name BETH DOUGHERTY - CONTRACT ACCOUNTING Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321 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) WARNING TO CWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PARTI, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYNING 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 INTERN TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCEMENT. Under penalty of perjury. I declars that y have read the foregoing notice of commencement and that the facts stated in it are true to the THEST OF THE HIRST THE STEPTION OF THE MOST THE FORM THE PAYNING THE PROPERTY OF THE MOST THE FIRST THE PRIST THE PRI		FL 32824
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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 may knowledge and belief. Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office The foregoing instrument was acknowledged before me this day of by Russell Stokes monthlyear name of person Type of authority, 40., officer, trustee attorney in fact Walt Disney Imagineering Name of party on behalf of whom instrument was executed MILAGIOS G. SIMTIAGO Print, type, or stamp commissioned name of Notary Public Personally Known OR Produced ID Notary Public State of Florida		
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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, declare that / have read the foregoing notice of commencement and that the facts stated in it are true to the test of have knowledge and belief. Director Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person as Director, Sourcing & Procurement Type of authority, e.g., officer, trustee attorney in fact Signature of Notary Public - State of Plorida Personally Known OR Produced ID Notary Public State of Florida	different date is specified)	
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, declare that / have read the foregoing notice of commencement and that the facts stated in it are true to the test of have knowledge and belief. Director Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person as Director, Sourcing & Procurement Type of authority, e.g., officer, trustee attorney in fact Signature of Notary Public - State of Plorida Personally Known OR Produced ID Notary Public State of Florida	WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AF	TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT
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, declare that have read the foregoing notice of commencement and that the facts stated in it are true to the best of the knowledge and belief. Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person as Director, Sourcing & Procurement Type of authority, and, officer, trustee attorney in fact Signature of Obtary Public - State of Prorida Personally Known OR Produced ID Notary Public State of Florida	ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, I	PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN
Under penalty of perjury, 1 declare that /have read the foregoing notice of commencement and that the facts stated in it are true to the facts of the test of the knowledge and belief. Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person as Director, Sourcing & Procurement for Walt Disney Imagineering Name of party on behalf of whom instrument was executed MIAGLOS G. SMITIAGO Print, type, or stamp commissioned name of Notary Public State of Florida		
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 test of my knowledge and belief. Signature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person Type of authority, ag., officer, trustee attorney in fact Signature of Notary Public - State of Prorida Personally Known OR Produced ID Notary Public State of Florida		
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office Oy Russell Stokes Month/year name of person Name of party on behalf of whom instrument was executed MILAGIOS G. SIMTIAGO Print, type, or stamp commissioned name of Notary Public Personally Known OR Produced ID Notary Public State of Florida	WITH TOOK LENDER OR AN ATTORNET BEFORE COMMENCING IN	TORK OR RECORDING TOOK NOTICE OF COMMENCEMENT.
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes month/year name of person Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office Oy Russell Stokes Month/year name of person Name of party on behalf of whom instrument was executed MILAGIOS G. SIMTIAGO Print, type, or stamp commissioned name of Notary Public Personally Known OR Produced ID Notary Public State of Florida	linder penalty of periury I declare that Vhave read the	foregoing notice of commencement and that the
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes The foregoing instrument was acknowledged before me this day of by Russell Stokes	facts stated in it are true to the trust of the knowledge:	and belief
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes Manager Director Direc		
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this day of by Russell Stokes Manager Director Direc		Director
The foregoing instrument was acknowledged before me this day of by Russell Stokes as Director, Sourcing & Procurement Type of authority, e.g., officer, trustee attorney in fact Signature of Notary Public - State of Plorida Personally Known OR Produced ID The foregoing instrument was acknowledged before me this day of by Russell Stokes Malt Disney Imagineering	Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office	r/Director/Partner/Manager Signatory's Title/Office
as Director, Sourcing & Procurement Type of authority, e.g., officer, trustee attorney in fact Signature of Obtary Public State of Plorida Personally Known OR Produced ID		O4 Dec 2014
as Director, Sourcing & Procurement Type of authority, e.g., officer, trustee attorney in fact Signature of Obtary Public State of Porida Personally Known OR Produced ID Name of party on behalf of whom instrument was executed MILAGIOS G. SMITIAGO Print, type, or stamp commissioned name of Notary Public Notary Public State of Florida	The foregoing instrument was acknowledged before me th	15 1 day 01 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Type of authority, e.g., officer, trustee attorney in fact Name of party on behalf of whom instrument was executed MILAGIOS G. SHMTIAGO Print, type, or stamp commissioned name of Notary Public Personally Known OR Produced ID Notary Public State of Florida	Disease Commission 2 Days were	
Signature of Votary Public State of Prorida Personally Known OR Produced ID MILAGROS G. SAMTIAGO Print, type, or stamp commissioned name of Notary Public Notary Public State of Florida	as Director, Sourcing & Procurement	
Signature of Otary Public State of Porida Print, type, or stamp commissioned name of Notary Public Personally KnownOR Produced ID	tipe of authority, e.g., officer, trustee afforney in fact	
Personally KnownOR Produced ID Notary Public State of Florida	1 way & tous	MILAGEOS 6. SHILLAGO
	Signature of Notary Public -{State of Porida	Print, type, or stamp commissioned name of Notary Public
	Damana Harkanana Man Barata Inn	**************************************

Form content revised: 9/26/11; format revised 9/18/12

ATTACHMENT "A"

DESCRIPTION OF PROPERTY

LOCATION "1" – 1700 Epcot Resorts Blvd., Bay Lake, FL

LOCATION "2" – 2100 Epcot Resorts Blvd., Bay Lake, FL

LOCATION "3" – 4401 Floridian Way, Bay Lake, FL

LOCATION "4" - 1600 Seven Seas Drive, Bay Lake, FL

LOCATION "5" – 1850 Century Dr., Bay Lake, FL

LOCATION "6" – 1960 Broadway, Lake Buena Vista, FL

LOCATION "7" – 1251 Riverside Drive, Lake Buena Vista, FL

LOCATION "8" – 2201 Orleans Drive, Lake Buena Vista, FL

LOCATION "9" – 900 Cayman Way, Bay Lake, FL

LOCATION "10" - 1050 Century Drive, Bay Lake, FL

LOCATION "11" - 1001 West Buena Vista Dr., Bay Lake, FL

LOCATION "12" – 4510 Ft. Wilderness Trail, Bay Lake, FL

LOCATION "13" – 901 Timberline Dr., Bay Lake, FL

LOCATION "14" – 1510 North Cove Rd., Lake Buena Vista, FL

*** END OF ATTACHMENT "A" ***

D	maid Nivershow	DOC # 20140622651 B: 10845 P: 9451
Per	mit Number:	12/10/2014 09:48 AM Page 1 of 1 Rec Fee: \$10.00
Folio/Parcel ID #:		Deed Doc Tax: \$0.00
Pre	pared by:	Mortgage Doc Tax: \$0.00
		Intangible Tax: \$0.00
	A DRIVED AND ENDING	Martha O. Haynie, Comptroller
Ret	turn to: ABBY BRANDENBURG	Orange County, FL
	85 AVENUE OF THE STARS/PO BOX 10321	Ret To: CSC INC
<u>LA</u>	KE BUENA VISTA, FL 32830	_
	NOTICE OF COMMENCEMEN	Т
	te of Florida, County of Orange	
	e undersigned hereby gives notice that improvement will be	
	h Chapter 713, Florida Statutes, the following information is	
1.	Description of property (legal description of the property 1870 INTERNATIONAL GATEWAY, BAY LAKE, FL	, and street address if available)
2.	General description of improvement FABRICATION AND INSTALLATION OF ENTRANCE/E.	XIT SIGNS
3	Owner information or Lessee information if the Lessee	
U .	Name WALT DISNEY IMAGINEERING Address PO BOX 10321, LAKE BUENA VISTA, FL 32830	<u> </u>
	Interest in Property N/A	<u></u>
	Name and address of fee simple titleholder (if different	t from Owner listed above)
	Name N/A	them emiliarious above,
	Address N/A	
4	Contractor	
•	Name VEATIC	Telephone Number 888-474-2999
	Address 2450 SMITH STREET, UNIT P, KISSIMMEE, FL	
5.	Surety (if applicable, a copy of the payment bond is attact	
	Name N/A	Telephone Number N/A
	Address N/A	Amount of Bond \$ N/A
6.	Lender	
	Name N/A	Telephone Number N/A
	Address N/A	
7.	Persons within the State of Florida designated by Ow	ner upon whom notices or other documents may
	be served as provided by §713.13(1)(a)7, Florida State Name RUSSELL STOKES	utes. Telephone Number 407-560-7697
	Address PO BOX 10321, LAKE BUENA VISTA, FL 32830	0-0321
8.	In addition to himself or herself, Owner designates th	
٥.	Notice as provided in §713.13(1)(b), Florida Statutes.	
	Name BETH DOUGHERTY - CONTRACT ACCOUNTING	Telephone Number 407-560-3660
_	Address PO BOX 10321, LAKE BUENA VISTA, FL 32830	J-U3Z I
9.	Expiration date of notice of commencement (the expir construction and final payment to the contractor, but will be different date is specified)	
	umerent date is specified)	
WA	RNING TO OWNER: ANY PAYMENTS MADE/BY THE OWNER AFTER	R THE EXPIRATION OF THE NOTICE OF COMMENCEMENT
RES	SULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PRO	OPERTY, A NOTICE OF COMMENCEMENT MUST BE
RE(CORDED AND POSTED ON THE JOB SITE BEYORE THE FIRST INSF TH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WOR	PECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT
WI I	H YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WOR	RECORDING YOUR NOTICE OF COMMENCEMENT.
	· /	Director
Sint	nature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Di	
	1	an Dec. 2014
	e foregoing instrument was acknowledged before me this	day of by Russell Stokes name of person
as	Director, Sourcing & Procurement for Type of authority, 9 p., officer, trustee, attorney in fact	Walt Disney Imagineering Name of party on behalf of whom instrument was executed
	M. In. I h	MILAGRUS G. SAM TVAGO
_	- Tilley to fantian	
	Signature of Notary Public - State of Florida	Print, type, or stamp commissioned name of Notary Public
ь.	and the Kanna A COD Deadle and ID	
	rsonally KnownOR Produced ID	## # # # #
ı yı	pe of ID Produced	5777444444444444

Form content revised: 10/17/12



	12/11/2014 09:33 AM Page 1 of 1 Rec Fee: \$10.00 Deed Doc Tax: \$0.00
Permit Number:	Mortgage Doc Tax: \$0.00
Folio/Parcel Identification Number:	Intangible Tax: \$0.00
Prepared by: Maria McCabe	Martha O. Haynie, Comptroller
Prepared by: Maria McCabe Buena Vista Construction Company	Orange County, FL Ret To: SIMPLIFILE LC
Return to: P.O. Box 10000, Lake Buena Vista, FL 32830	
	·········
NOTICE OF CON	IMENCEMENT
State of Florida, County of Orange	
The undersigned hereby gives notice that improvement will	
with Chapter 713, Florida Statutes, the following informatio	
 Description of property (legal description of the prope BB-Rockwork Structural Steel, 1510 West Buena Vista 	rty, and street address if available) a Drive BL JFBB5001
2. General description of improvement	
Provide labor, material and/or electrical for construction	
Owner information or Lessee information if the Less Name Walt Disney World Resort	•
)
Interest in Property Name and address of fee simple titlebolder //f differ	ent from Owner listed above)
Name	
Address	
4. Contractor	
Contractor Name Buena Vista Construction Company Address P.O. Box 10000, Lake Buena Vista, FL 32830 Surety (if applicable a copy of the payment bond is at:	Telephone Number 407-934-6070
5. Surety (if applicable, a copy of the payment bond is att	and the my
Name	
Address	Amount of Bond \$
6. Lender	Tatania ana Mausahaa
Name	Telephone Number
7. Persons within the State of Florida designated by C	Two supposed the s
be served as provided by §713.13(1)(a)7, Florida St	
Name Dave Ellis, Mgr, Sourcing & Procurement	Telephone Number 407-828-3582
Address P.O. Box 10000, Lake Buena Vista, FL 3283	0
8. In addition to himself or herself, Owner designates	the following to receive a copy of the Lienor's
Notice as provided in §713.13(1)(b), Florida Statute	§,
Name Doug Scharfenberg, Construction Manager	Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, Florida 3	2830
Expiration date of notice of commencement (the expiration date of notice of commencement)	piration date may not be before the completion of
construction and final payment to the contractor, but w different date is specified)	ill be 1 year from the date of recording unless a
different date is specified)	and the second s
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AF ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, I RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR I RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST II	PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN PROPERTY. A NOTICE OF COMMENCEMENT MUST BE NSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT
WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING W	ORK OR RECORDING YOUR NOTICE OF COMMERCEMENT.
Under penalty of parjury, (declare that I have read the	
facts stated in it are true to the lifest of my knowledge	ussus asersuss.
	Director
Signature of Overwell Lassace or Overeith Tessec's Authorized Office	#Director #Director #Director #Director #Director #Director Signatory's Title/Office
The foregoing instrument was acknowledged before me th	nis 10 day of Dec 14 by Tom Troffer month/year name of person
as Director	for Buena Vista Construction Company

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

Signature of Notary Public - State of Florida

Personally Known X OR Produced ID Type of ID Produced

DOC # 20140624776 B: 10846 P: 5387

Name of party on behalf of whom instrument was executed

Print, type, or stamp commissioned name of Notary Public

Notary Public State of Florida

Maria McCabe

Notary Public State of Florida
Maria McCabe
My Commission FF 082922
Expires 02/09/2018 Form Revised: September 26, 2011

Maria McCabe

Permit Number:	DOC # 20140625493 B: 10846 P: 7332 12/11/2014 11:27 AM Page 1 of 2 Rec Fee: \$18.50 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00
Return to: Catherine Williams WDI - 1365 Avenue of the Start P.O. Box 10321, Lake Buena Vista, FL 32830	Intangible Tax: \$0.00 Martha O. Haynie, Comptroller Orange County, FL Ret To: CSC INC
NOTICE OF COMMENCEMER State of Florida, County of Orange The undersigned hereby gives notice that improvement will	
with Chapter 713, Florida Statutes, the following information 1. Description of property (legal description of the propert 1510 E. Buena Vista Dr., Lake Buena Vista, FL 32830	is provided in this Notice of Commencement.
 General description of improvement Disney Springs - Town Center Package 70: A04, A08, 	A11 (New Construction)
Owner information or Lessee information if the Lesse Name Walt Disney Imagineering Address P.O. Box 10321, Lake Buena Vista, FL 32830	ee contracted for the improvement
Interest in Property Fee Simple	
Name and address of fee simple titleholder (if differe Name N/A Address N/A	nt from Owner listed above)
Contractor Name Ref. Att. A for multiple IPD Agrmt. Parties	Telephone Number N/A
Address Reference Attachment A 5. Surety (if applicable, a copy of the payment bond is attached Name Not Applicable	Telephone Number N/A
Address N/A	Amount of Bond \$ Not Required
6. Lender Name_NONE Address N/A	Telephone Number N/A
7. Persons within the State of Florida designated by Ov	wner upon whom notices or other documents may
be served as provided by §713.13(1)(a)7, Florida Sta	tutes.
Name Russell Stokes Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake B	Telephone Number 407-560-7858
8. In addition to himself or herself, Owner designates t Notice as provided in §713.13(1)(b), Florida Statutes.	he following to receive a copy of the Lienor's
Name Contract Accounting	Telephone Number 407-560-7858
Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake B 9. Expiration date of notice of commencement (the exp	
construction and final payment to the contractor, but will different date is specified) December 17, 2017	be 1 year from the date of recording unless a
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTE ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PARESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PRECORDED AND POSTED ON THE JOB STEE BEFORE THE FIRST INS WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WO	ART I, SECTION 713.13, FLORIDA STATUTES, AND CAN ROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT RK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/D	
The foregoing instrument was acknowledged before me this	- · · · · · · · · · · · · · · · · · · ·
	month/year name of person Walt Disney Imagineering Name of party on behalf of whom instrument was executed
Signature of Notary Public – State of Figrida	MILACROS G. SANT/AGO Print, type, or stamp commissioned name of Notary Public
Personally KnownOR Produced ID	\$**************************************
Type of ID Produced	Notary Public State of Florida Milagros G Santiago My Commission FF 124809 Expires 06/30/2018

Enem anatost revised: 18/17/19

Attachment "A"

This NOC pertains to a Tri Party IPD (Integrated Project Delivery) contract for Disney Springs project, which includes all parties identified below:

Owner	John C. Blitch
Walt Disney Parks and Resorts (US), Inc.,	Vice President & General Manager
d/b/a Walt Disney Imagineering	Walt Disney Parks and Resorts (US), Inc. dba Walt Disney
	Imagineering
	1365 Avenue of the Stars
	Lake Buena Vista, FL 32830

The following "Contractors," as defined by F.S. §713.01(8), are in direct contract with Owner for the purpose of improving real property pursuant to the Tri Party IPD agreement:

Architect	Jonathan Douglas, Managing Partner
VOA Associates, Inc.	VOA Associates, Inc.
	4798 New Broad Street, Suite 100
	Orlando, FL 32814
Construction Manager/General Contractor	Jeff Westphal, Vice President/District Manager
PCL Construction Services, Inc.	PCL Construction Services, Inc.
	6675 Westwood Blvd, Suite 200
	Orlando, FL 32821

	ermit Number:	DOC # 20140625494 B: 10846 P: 7334 12/11/2014 11:27 AM Page 1 of 2
	olio/Parcel ID #:	Rec Fee: \$18.50 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00
R	eturn to: Catherine Williams	Martha O. Haynie, Comptroller
	/DI - 1365 Avenue of the Start	Orange County, FL
P	.O. Box 10321, Lake Buena Vista, FL 32830	Ret To: CSC INC
		_
C.	NOTICE OF COMMENCEMEN	Т
	ate of Florida, County of Orange ne undersigned hereby gives notice that improvement will be	made to certain real property, and in accordance
	th Chapter 713, Florida Statutes, the following information is	
	Description of property (legal description of the property, 1514 E. Buena Vista Dr., Lake Buena Vista, FL 32830	
	General description of improvement Disney Springs - Town Center Package D16 (New Const	ruction)
3.	Owner information or Lessee information if the Lessee Name Walt Disney Imagineering	contracted for the improvement
	Address P.O. Box 10321, Lake Buena Vista, FL 32830	· · · · · · · · · · · · · · · · · · ·
	Interest in Property Fee Simple	
	Name and address of fee simple titleholder (if different Name N/A	from Owner listed above)
,	Address N/A	
4.	Contractor Name Ref. Att. A for multiple IPD Agrmt. Parties	Telephone Number N/A
	Address Reference Attachment A	
5.	Surety (if applicable, a copy of the payment bond is attach	
	Name Not Applicable	Telephone Number N/A Amount of Bond \$ Not Required
6	Address N/A Lender	Amount of Bond \$ Not Required
O.	Name NONE	Telephone Number N/A
	Address N/A	reiepitotic Hamber 1137
7.	Persons within the State of Florida designated by Own	ner upon whom notices or other documents may
	be served as provided by §713.13(1)(a)7, Florida Statu	
	Name Russell Stokes	Telephone Number 407-560-7858
_	Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Bud	
8.	In addition to himself or herself, Owner designates the Notice as provided in §713.13(1)(b), Florida Statutes. Name Contract Accounting	Telephone Number 407-560-7858
	Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Bue	ena Vista, FL 32830-0321
9.		
•	construction and final payment to the contractor, but will b different date is specified) December 17, 2017	
AF RE	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER RE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PAR ISULT IN YOUR PAYING TWICE POR IMPROVEMENTS TO YOUR PRO ICORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSP TH YOUR LENDER OR AN ATTORNEY BEFORE POMMENCING WORLD	T I, SECTION 713.13, FLORIDA STATUTES, AND CAN PERTY. A NOTICE OF COMMENCEMENT MUST BE
Sic	nature of Owner or Lessee, or Owner's of Lessee's Authorized Officer/Dir	
	ne foregoing instrument was acknowledged before me this <u></u>	and .
		month/year name of person Walt Disney Imagineering
аð	Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed
	nulgas I Nortion	MILAGLOS G. SANTIAGO
	Signature of Notary Fublic - State of Florida	Print, type, or stamp commissioned name of Notary Public
	ersonally KnownOR Produced ID rpe of ID Produced	Notary Public State of Florida
		Milagros G Santiago My Commission FF 124809 Expires 06/30/2018

Earm appears reidead: 10/47/49

Attachment "A"

This NOC pertains to a Tri Party IPD (Integrated Project Delivery) contract for Disney Springs project, which includes all parties identified below:

Owner	John C. Blitch
Walt Disney Parks and Resorts (US), Inc.,	Vice President & General Manager
d/b/a Walt Disney Imagineering	Walt Disney Parks and Resorts (US), Inc. dba Walt Disney
	Imagineering
	1365 Avenue of the Stars
	Lake Buena Vista, FL 32830

The following "Contractors," as defined by F.S. §713.01(8), are in direct contract with Owner for the purpose of improving real property pursuant to the Tri Party IPD agreement:

Architect	Jonathan Douglas, Managing Partner
VOA Associates, Inc.	VOA Associates, Inc.
	4798 New Broad Street, Suite 100
	Orlando, FL 32814
Construction Manager/General Contractor	Jeff Westphal, Vice President/District Manager
PCL Construction Services, Inc.	PCL Construction Services, Inc.
	6675 Westwood Blvd, Suite 200
	Orlando, FL 32821

Permit Number: Folio/Parcel ID #: Prepared by: Catherine Williams - Contract Admin	DOC # 20140625495 B: 10846 P: 733 - 12/11/2014 11:27 AM Page 1 of 2 Rec Fee: \$18.50 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00	
Return to: Catherine Williams WDI - 1365 Avenue of the Start	Martha O. Haynie, Comptroller Orange County, FL	
P.O. Box 10321, Lake Buena Vista, FL 32830	- Ret To: CSC INC	
11.0. DOX 10021, Lake Duella Visia, 1 L 02000	-	
NOTICE OF COMMENCEMENT		
NOTICE OF COMMENCEMENT		
State of Florida, County of Orange		
The undersigned hereby gives notice that improvement will be		
with Chapter 713, Florida Statutes, the following information is	provided in this Notice of Commencement.	
 Description of property (legal description of the property, 1530 E. Buena Vista Dr., Lake Buena Vista, FL 32830 	and street address if available)	
2. General description of improvement Disney Springs - Town Center Package 7A: Building B07,	B17, and Service Yard B27W (New Construction)	
3. Owner information or Lessee information if the Lessee	contracted for the improvement	
Name Walt Disney Imagineering	·	
Address P.O. Box 10321, Lake Buena Vista, FL 32830		
Interest in Property Fee Simple		
Name and address of fee simple titleholder (if different t	from Owner listed above)	
Name N/A	,	
Address N/A	·	
4. Contractor		
Name Ref. Att. A for multiple IPD Agrmt. Parties	Telephone Number_N/A	
Address Reference Attachment A		
5. Surety (if applicable, a copy of the payment bond is attached	ed)	
Name Not Applicable	Telephone Number N/A	
Address N/A	Amount of Bond \$ Not Required	
6. Lender		
Name NONE	Telephone Number N/A	
Address N/A		
7. Persons within the State of Florida designated by Own		
be served as provided by §713.13(1)(a)7, Florida Statut		
Name Russell Stokes	Telephone Number 407-560-7858	
Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buer	na Vista, FL 32830-0321	
8. In addition to himself or herself, Owner designates the	following to receive a copy of the Lienor's	
Notice as provided in §713.13(1)(b), Florida Statutes.		
Name Contract Accounting	Telephone Number 407-560-7858	
Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buer		
9. Expiration date of notice of commencement (the expiration date of notice of commencement)		
construction and final payment to the contractor, but will be	e 1 year from the date of recording unless a	
different date is specified) December 17, 2017	·····	
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.		
(U) WW FOR 3	J.BUTCH VP&GM	
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Direction	ctor/Partner/Manager Signatory's Title/Office	
The foregoing instrument was acknowledged before me this	1 H day of Dec. 2014 John C. Blitch	
	month/year name of person Valt Disney Imagineering	
Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed	
My Wituo	MILAGROS GSANTIAGO	
Signature of Notary Public – State of Plorida	Print, type, or stamp commissioned name of Notary Public	
Signature of Motary Public – State of Peorida	Friend, type, or stamp commissioned matter or rectary Public	
Personally KnownOR Produced ID	***************************************	
Type of ID Produced	Notary Public State of Florida	
. 100 0. 10 1 1000000	Milagros G Santiago My Commission FF 124809	
	Dr. S Wy Commission FF 124809 Expires 06/30/2018	

Attachment "A"

This NOC pertains to a Tri Party IPD (Integrated Project Delivery) contract for Disney Springs project, which includes all parties identified below:

Owner	John C. Blitch
Walt Disney Parks and Resorts (US), Inc.,	Vice President & General Manager
d/b/a Walt Disney Imagineering	Walt Disney Parks and Resorts (US), Inc. dba Walt Disney
	Imagineering
	1365 Avenue of the Stars
	Lake Buena Vista, FL 32830

The following "Contractors," as defined by F.S. §713.01(8), are in direct contract with Owner for the purpose of improving real property pursuant to the Tri Party IPD agreement:

Architect	Jonathan Douglas, Managing Partner
VOA Associates, Inc.	VOA Associates, Inc.
	4798 New Broad Street, Suite 100
	Orlando, FL 32814
Construction Manager/General Contractor	Jeff Westphal, Vice President/District Manager
PCL Construction Services, Inc.	PCL Construction Services, Inc.
	6675 Westwood Blvd, Suite 200
	Orlando, FL 32821

Pe	ermit Number:	DOC # 20140625496 B: 10846 P: 7338	
Folio/Parcel ID #: Prepared by: Catherine Williams - Contract Admin		12/11/2014 11:27 AM Page 1 of 2 Rec Fee: \$18.50 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00	
	eturn to: Catherine Williams	Orange County, FL	
	DI - 1365 Avenue of the Start	Ret To: CSC INC	
<u>P.</u>	O. Box 10321, Lake Buena Vista, FL 32830		
	NOTICE OF COMMENCEMENT		
	ate of Florida, County of Orange		
	e undersigned hereby gives notice that improvement will be r		
Wil	th Chapter 713, Florida Statutes, the following information is p	rovided in this Notice of Commencement.	
	Description of property (legal description of the property, a 1536 E. Buena Vista Dr., Lake Buena Vista, FL 32830	nd street address if available)	
2.	General description of improvement		
3.	Disney Springs - Town Center Package 7C: Buildings B19 Owner information or Lessee information if the Lessee of		
	Name Walt Disney Imagineering Address P.O. Box 10321, Lake Buena Vista, FL 32830		
	Interest in Property Fee Simple		
	Name and address of fee simple titleholder (if different fr	om Owner listed above)	
	Name N/A	om Owner listed above)	
	Address N/A		
4	Contractor		
٦.	Name Ref. Att. A for multiple IPD Agrmt. Parties	Telephone Number N/A	
	Address Reference Attachment A		
5.	Surety (if applicable, a copy of the payment bond is attached	1)	
•	Name Not Applicable	Telephone Number N/A	
	Address N/A	Amount of Bond \$ Not Required	
6.	Lender	<u> </u>	
-	Name NONE	Telephone Number N/A	
	Address N/A		
7.	Persons within the State of Florida designated by Owne	r upon whom notices or other documents may	
	be served as provided by §713.13(1)(a)7, Florida Statute		
	Name Russell Stokes	Telephone Number <u>407-560-7858</u>	
	Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buen		
8,	In addition to himself or herself, Owner designates the	following to receive a copy of the Lienor's	
	Notice as provided in §713.13(1)(b), Florida Statutes.		
	Name Contract Accounting	Telephone Number <u>407-560-7858</u>	
	Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buen		
9.	construction and final payment to the contractor, but will be different date is specified) December 17, 2017		
LAU A	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER T	HE EXPIRATION OF THE NOTICE OF COMMENCEMENT	
	E CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I		
RE	SULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPI	RTY, A NOTICE OF COMMENCEMENT MUST BE	
RE	CORDED AND POSTED ON THE JOB STEEFEFORE THE FIRST INSPEC	TION, IF YOU INTEND TO OBTAIN FINANCING, CONSULT	
AAI	TH YOUR LENDER OR AN ATTOBRE BEFORE COMMENCING WORK	OR RECORDING TOOK NOTICE OF COMMENCEMENT.	
	(U) VIVA FOR J.	BLITCH VP&GM	
Sig	nature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Direct		
_	e foregoing instrument was acknowledged before me this $\frac{11}{2}$	· · · · · · · · · · · · · · · · · · ·	
• • •	e reregoing instrument was acknowledged before the tills 11.	month/year name of person	
as		alt Disney Imagineering Name of party on behalf of whom instrument was executed	
(My 1 4 4 4 4 4		
_	- Mulapid. Souling	MILAGRIS G. SANTLAGO	
	Signature of Notary Públic – State of Florida	Print, type, or stamp commissioned name of Notary Public	
р-	reconcilly Known OD Bradwood ID		
	ersonally KnownOR Produced ID	\$*************************************	
ıу	pe of ID Produced	C AND Mrs. Martiney Durblin Communic Florida.	

Enrichment revised: 10/47/49



Attachment "A"

This NOC pertains to a Tri Party IPD (Integrated Project Delivery) contract for Disney Springs project, which includes all parties identified below:

Owner	John C. Blitch
Walt Disney Parks and Resorts (US), Inc.,	Vice President & General Manager
d/b/a Walt Disney Imagineering	Walt Disney Parks and Resorts (US), Inc. dba Walt Disney
	Imagineering
	1365 Avenue of the Stars
	Lake Buena Vista, FL 32830

The following "Contractors," as defined by F.S. §713.01(8), are in direct contract with Owner for the purpose of improving real property pursuant to the Tri Party IPD agreement:

Architect	Jonathan Douglas, Managing Partner	
VOA Associates, Inc.	VOA Associates, Inc.	
	4798 New Broad Street, Suite 100	
	Orlando, FL 32814	
Construction Manager/General Contractor	Jeff Westphal, Vice President/District Manager	
PCL Construction Services, Inc.	PCL Construction Services, Inc.	
	6675 Westwood Blvd, Suite 200	
	Orlando, FL 32821	

Fol	rmit Number: lio/Parcel ID #: epared by: _Dominick Tota - Contract Admin	DOC # 20140626886 B: 10847 P: 2105 12/12/2014 08:35 AM Page 1 of 1 Rec Fee: \$10.00 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00
W	turn to: <u>Dominick Tota</u> DI - 1365 Avenue of the Stars O. Box 10321, Lake Buena Vista, FL 32830	Intangible Tax: \$0.00 Martha O. Haynie, Comptroller Orange County, FL Ret To: CSC INC
The with	NOTICE OF COMMENCEME ate of Florida, County of Orange be undersigned hereby gives notice that improvement will at Chapter 713, Florida Statutes, the following information Description of property (legal description of the proper 919 W. Savannah Circle, Lake Buena Vista, FL 32830	be made to certain real property, and in accordance in is provided in this Notice of Commencement. ty, and street address if available)
2.	General description of improvement DAK - Pagani Trail Overlook Graphics - Install new gra	phics for animal viewing
3.	Owner information or Lessee information if the Less Name Walt Disney Imagineering Address P.O. Box 10321, Lake Buena Vista, FL 32830 Interest in Property Fee Simple	ee contracted for the improvement
	Name and address of fee simple titleholder (if different Name N/A	ent from Owner listed above)
4.	Address N/A Contractor	
	Name Design Communications, Ltd. Address 10611 Satellite Blvd., Orlando, FL, 32837	Telephone Number_407-856-9661
5.	Surety (if applicable, a copy of the payment bond is atta Name Not Applicable	Telephone Number N/A
_	Address N/.A	Amount of Bond \$ Not Required
б.	Lender Name NONE Address N/A	Telephone NumberN/A
7.	Persons within the State of Florida designated by O be served as provided by §713.13(1)(a)7, Florida State Name Russell Stokes Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake B	tutes. Telephone Number 407-560-7858
8.		
	Notice as provided in §713.13(1)(b), Florida Statutes Name Contract Accounting	sTelephone Number <u>407-560-7858</u>
9.	Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake B Expiration date of notice of commencement (the exp construction and final payment to the contractor, but will different date is specified)	piration date may not be before the completion of
ARES RES	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFT E CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PA BULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PA CORDED AND POSTED ON THE SITE PEFORE THE FIRST IN: H YOUR LENDER OR AN ATTORNEY PEFORE COMMENCING WO	ART I, SECTION 713.13, FLORIDA STATUTES, AND CAN ROPERTY. A NOTICE OF COMMENCEMENT MUST BE SPECTION. IF YOU INTEND TO ORTAIN FINANCING. CONSULT
Ciar		Dir. of Procurement
_	ature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/ e foregoing instrument was acknowledged before me this	2 2-14
		month/year name of person
as _.	Director of Procurement for Type of authority, e.g., officer trustee, attorney in fact	Name of party on behalf of whom instrument was executed MILAGUS 6. SANTIA60
_	Signature of Notary Public – State(of Florida	Print, type, or stamp commissioned name of Notary Public
	sonally KnownOR Produced ID ee of ID Produced	Notary Public State of Florida Milagros G Santiago My Commission FF 124809 Expires 06/30/2018

Form content revised: 10/17/12