Permit Number:	DOC # 20150220307 B: 10912 P: 8244 05/04/2015 09:55 AM Page 1 of 3 Rec Fee: \$27.00 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00 Martha O. Haynie, Comptroller Orange County, FL
Return to: Catherine Williams	Ret To: CSC INC
WDI - 1365 Avenue of the Stars	
P.O. 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 with Chapter 713, Florida Statutes, the following information is provi  1. Description of property (legal description of the property, and s 109 Timberline Drive, Bay Lake, FL 32830  2. General description of improvement Flooring and Light Fixture Rehab  3. Owner information or Lessee information if the Lessee contain 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 the second s	ded in this Notice of Commencement. street address if available) racted for the improvement
Name N/A Address N/A	
4. Contractor	<del></del>
Name Ref. Attach.A for multiple IPD Agrmt. Parties Address N/A	Telephone NumberN/A
5. Surety (if applicable, a copy of the payment bond is attached)	<u> </u>
Name Not Applicable	Telephone NumberN/A
Address N/.A	Amount of Bond \$ Not Required
6. Lender	

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

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may

In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's

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

be served as provided by §713.13(1)(a)7, Florida Statutes.

Notice as provided in §713.13(1)(b), Florida Statutes.

OR Produced ID

Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321

Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321

August 31, 2018

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.

VP & GM

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

The foregoing instrument was acknowledged before me this 2 day of April by John C. Blitch

monthlyear name of person

for Walt Disney Imagineering

Name of party on behalf of whom instrument was executed

Print, type, or stamp commissioned name of Notary Public

Form content revised: 10/17/12

Personally Known

Type of ID Produced

Name NONE

Name Russell Stokes

Name Contract Accounting

different date is specified)

CAROLYN MARY BELLINO
NOTARY PUBLIC ONI
STATE OF FLORIDA
Comm# FF099835
Expires 7/5/2018

CAROLYN MARY BELLING
OUT FLO99835
Comm# FF099835
Expires 7/5/2018

Telephone Number<u>N/A</u>

Telephone Number<u>407-560-7858</u>

Telephone Number 407-560-7858

# Attachment "A"

This NOC pertains to a Poly-Party IPD (Integrated Project Delivery) contract for the Wilderness Rehab project, which includes all parties identified below:

Owner Walt Disney Parks and Resorts (US), Inc., d/b/a Walt Disney Imagineering	John C. Blitch Vice President & General Manager 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 Poly-Party IPD agreement:

Construction Manager/General Contractor DPR Construction, A General Partnership	Scott Lyons Regional Manager DPR Construction, A General Partnership 4700 Millenia Blvd, Suite 350 Orlando, FL 32839
Architect GSB, Inc.	Ron G. Smith President GSB, Inc. 3555 NW 58th St, Suite 700W Oklahoma City, OK 73112
Interior Design Partner Design Group Carl Ross	Rosanna O. Ross Chief Operating Officer Design Group Carl Ross 115 Main Street El Segundo, CA 90245
Landscape Design Partner Perry Becker Design LLC	David Perry Perry Becker Design LLC 3660 Maguire Blvd. Suite 100 Orlando, FL 32803
Civil Engineer Design Partner Atkins North America, Inc.	Kathleen Leo Vice President Atkins North America, Inc. 482 S. Kelly Road Orlando, FL 32810

Mechanical, Electrical, Plumbing & Fire	Ryan B. Strandquest
Protection Engineer Design Partner	Sr. Vice President
Matern Professional Engineering, Inc.	Matern Professional Engineering, Inc.
	130 Candace Dr.
	Maitland, FL 32751
Mechanical- HVAC/Plumbing Trade Partner	Andre' E. Maillho
MCC Mechanical LLC	General Counsel
	MCC Mechanical LLC
	3306 Maggie Blvd., Suite A
	Orlando, FL 32811
Electrical Contractor Trade Partner	Robert Moreno
Bergelectric Corp.	Vice President
	Bergelectric Corp.
	5560 W Centinela Avenue
	Los Angeles, CA 90045
Site Development Contractor Trade Partner	P. Frederick O'Dea Jr.
Hubbard Construction Co., Inc.	Vice President and Secretary
	Hubbard Construction Co., Inc.
	1936 Lee Road, #300
	Orlando, FL 32811
<u> </u>	

Permit Number:
Prepared by: Catherine Williams - Contract Admin
Return to: Catherine Williams
WDI - 1365 Avenue of the Stars
P.O. Box 10321, Lake Buena Vista, FL 32830
NOTICE OF COMMENCEMENT
State of Florida, County of Orange

DOC # 20150222337 B: 10913 P: 3558

05/05/2015 07:54 AM Page 1 of 3

Rec Fee: \$27.00 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

State of Florida, County of Orange The undersigned hereby gives notice that improvement will be a

with Chapter 713, Florida Statutes, the following information is provide	
Description of property (legal description of the property, and s	
109 Timberline Drive, Bay Lake, FL 32830	deet address if available)
2. General description of improvement	<del></del>
Flooring and Light Fixture Rehab	
3. Owner information or Lessee information if the Lessee contr	acted 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 0	Owner listed above)
Name <u>N/A</u>	
Address N/A	
4. Contractor	
Name Ref. Attach.A for multiple IPD Agrmt. Parties	Telephone Number <u>N/A</u>
Address N/A	
5. Surety (if applicable, a copy of the payment bond is attached)	
Name Not Applicable	Telephone NumberN/A
Address <u>N/</u> .A	Amount of Bond \$ Not Required
6. Lender	
Name_NONE	Telephone NumberN/A
Address N/A	
7. Persons within the State of Florida designated by Owner upon	on 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</u> -7858
Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vis	
8. In addition to himself or herself, Owner designates the follow	wing 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 Vis	
9. Expiration date of notice of commencement (the expiration date	ate may not be before the completion of
construction and final payment to the contractor, but will be 1 year	ar from the date of recording unless a
different date is specified) August 31, 2018	
WARNING TO OWNED. ANY DAYMENTS MADE BY THE OWNED AFTED THE EX	ODDATION OF THE NOTICE OF COMMENCEMENT

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.

VP & GM ren's or Lessee's Authorized Officer/Director/Partner/Manager Signature of Owner or Lessee, or Ow Signatory's Title/Office The foregoing instrument was acknowledged before me this 29 day of April by John C. Blitch monthlyear name of personal vice President & GM for Walt Disney Imagineering name of person Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed Print, type, or stamp commissioned name of Notary Public Luce Personally Known \_\_\_OR Produced ID \_ Type of ID Produced\_\_\_

CAROLYN MARY BELLING NOTARY PUBLIC STATE OF FLORIDA Comm# FF099835 Expires 7/5/2018

Expires 7/5/2018 Comm# FP099835 AGIROJA RO BTATE DUBUS YMATON & CAROLYN MARY BELLING

Form content revised: 10/17/12

# Attachment "A"

This NOC pertains to a Poly-Party IPD (Integrated Project Delivery) contract for the Wilderness Rehab project, which includes all parties identified below:

Owner Walt Disney Parks and Resorts (US), Inc., d/b/a Walt Disney Imagineering	John C. Blitch Vice President & General Manager Walt Disney Parks and Resorts (US), Inc. dba Walt Disney Imagineering 1365 Avenue of the Stars
	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 Poly-Party IPD agreement:

Construction Manager/General Contractor DPR Construction, A General Partnership	Scott Lyons Regional Manager DPR Construction, A General Partnership 4700 Millenia Blvd, Suite 350 Orlando, FL 32839
Architect GSB, Inc.	Ron G. Smith President GSB, Inc. 3555 NW 58th St, Suite 700W Oklahoma City, OK 73112
Interior Design Partner Design Group Carl Ross	Rosanna O. Ross Chief Operating Officer Design Group Carl Ross 115 Main Street El Segundo, CA 90245
Landscape Design Partner Perry Becker Design LLC	David Perry Perry Becker Design LLC 3660 Maguire Blvd. Suite 100 Orlando, FL 32803
Civil Engineer Design Partner Atkins North America, Inc.	Kathleen Leo Vice President Atkins North America, Inc. 482 S. Kelly Road Orlando, FL 32810

Mechanical, Electrical, Plumbing & Fire	Ryan B. Strandquest	
Protection Engineer Design Partner	Sr. Vice President	
Matern Professional Engineering, Inc.	Matern Professional Engineering, Inc.	
	130 Candace Dr.	
	Maitland, FL 32751	
Mechanical- HVAC/Plumbing Trade Partner	Andre' E. Maillho	
MCC Mechanical LLC	General Counsel	
	MCC Mechanical LLC	
	3306 Maggie Blvd., Suite A	
	Orlando, FL 32811	
Electrical Contractor Trade Partner	Robert Moreno	
Bergelectric Corp.	Vice President	
beigeiectric corp.	Bergelectric Corp.	
	5560 W Centinela Avenue	
	Los Angeles, CA 90045	
Site Development Contractor Trade Partner	P. Frederick O'Dea Jr.	
Hubbard Construction Co., Inc.	Vice President and Secretary	
	Hubbard Construction Co., Inc.	
	1936 Lee Road, #300	
	Orlando, FL 32811	

Pe	ermit Number:	DOC # 20150222420 B: 10913 P: 3757 05/05/2015 08:06 AM Page 1 of 1 Rec Fee: \$10.00
Folio/Parcel ID #:		Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00
_		Martha O. Haynie, Comptroller
Re	eturn to: Abby Brandenburg	Orange County, FL
	365 AVENUE OF THE STARS/PO BOX 10321	Ret To: CSC INC
<u>L</u>	AKE BUENA VI\$TA, FL 32830	
	NOTICE OF COMMENCEMENT	
	ate of Florida, County of Orange	
	ne undersigned hereby gives notice that improvement will be n	
	th Chapter 713, Florida Statutes, the following information is p	
	Description of property (legal description of the property, at 1256 MAGIC KINGDOM DRIVE, BAY LAKE, FL 32830	nd street address if available)
	General description of improvement SEVEN DWARFS MINE TRAIN ELECTRICAL	
3.	Owner information or Lessee information if the Lessee of Name WALT DISNEY IMAGINEERING	·
	Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0	321
	Interest in Property N/A Name and address of fee simple titleholder (if different fro	and Characteristics above
	Name_ N/A	om Owner listed above)
4	AddressContractor	
4.	Name ERMCO OF FLORIDA	Telephone Number 407-934-8084
	Address 1555 DOPEY DRIVE, P.O. BOX 22164, LAKE BUE	NA VISTA, FL 32830
5.	Surety (if applicable, a copy of the payment bond is attached	
	Name <u>N/A</u>	
	Address	Telephone Number Amount of Bond \$
6.	Lender	
	Name N/A	Telephone Number
7	Address Persons within the State of Florida designated by Owner	
۲.	be served as provided by §713.13(1)(a)7, Florida Statute	
	Name RUSSELL STOKES	Telephone Number 407-560-7697
	Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0	321
8.	In addition to himself or herself, Owner designates the f	
	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 32830-0	
9.	Expiration date of notice of commencement (the expiration	
	construction and final payment to the contractor, but will be different date is specified)	
AR RE RE	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART IT, SULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPE CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK O	SECTION 713.13, FLORIDA STATUTES, AND CAN RTY. A NOTICE OF COMMENCEMENT MUST BE TION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT
	nder penalty of perjury, I declare that I have read the foregots stated in it are true to the best of my knowledge and be	
Sig	nature of Owner or Lessee or Owner's or Lessee's Authorized Officer/Direct	or/Partner/Manager ( Signatory's Title/Office
Th	e foregoing instrument was acknowledged before me this	day of MOM by John C. Blitch
as		month/yea name of person alt Disney Imagineering ame of party on behalf of whom instrument was executed
_	Carden Bellind	rint, type, or stamp commissioned name of Notary Public
Pe	rsonally Known OR Produced ID	CAROLYN MARY BELLINO NOTARY PUBLIC
	pe of ID Produced	STATE OF FLORIDA
•	m content revised: 9/26/11; format revised 9/18/12	Comm# FF099835
rol	m Content ravised, 9/20/11, folitiat revised, 9/10/12	******* Expires 7/5/2018

Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM

Attn: Richard Goss P.O. Box 10000

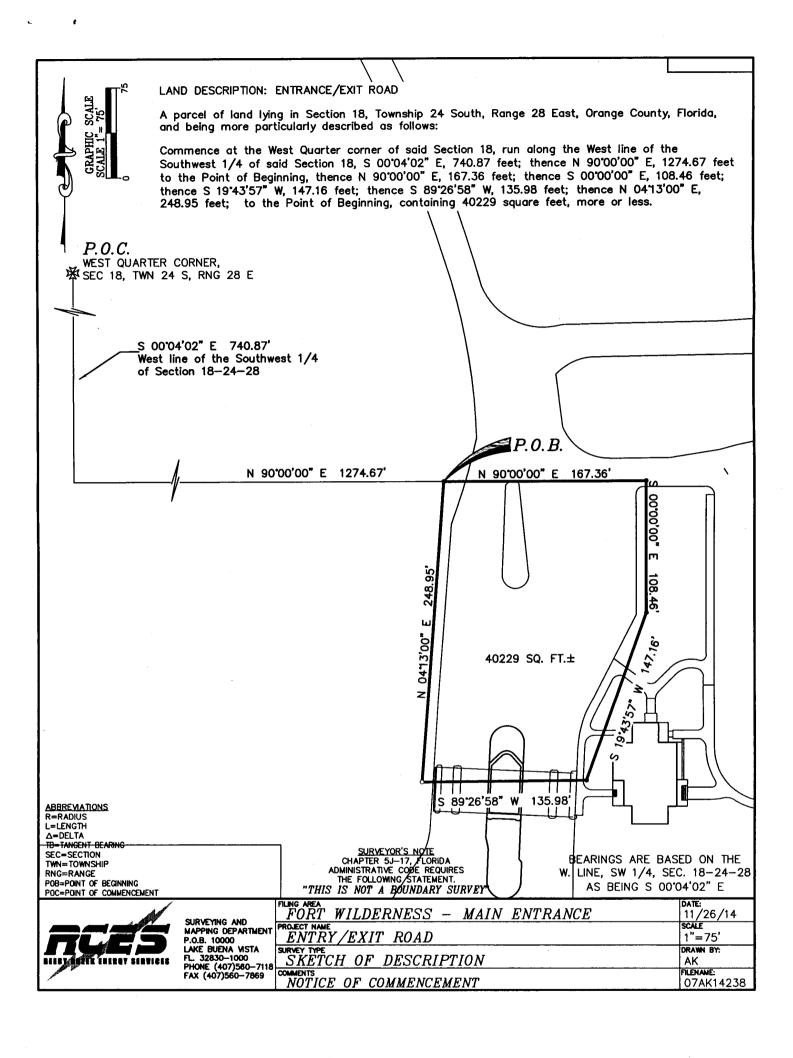
Lake Buena Vista, FŁ 32830-1000

Document Number: 20150081891
Book Number: 10876
Page Number: 4174

DOC# 20150224738 B: 10913 P: 9288 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha 0. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

#### **AMENDMENT TO** NOTICE OF COMMENCEMENT

	e undersigned nereby gives notice that improvement will be made to certain	• • •	
	apter 713, Florida Statues, the following information is provided in this Noti		
1.	<b>Description of property</b> (legal description of the property, and street a	ddress if available)	
	See attached legal description		
2.	General description of improvement		
	Paving		
3.	Owner information or Lessee information if the Lessee contracted for	or the improvement	
	Name Walt Disney World Resort		
	Address P.O. Box 10000, Lake Buena Vista, FL 32830		
	Interest in Property Owner	<del></del>	
	Name and address of fee simple titleholder (if different from Owner		
	Name		
	Address		
4.	Contractor	T	
	Name PREFERRED MATERIAL	Telephone Number <u>407-343-7445</u>	
_	Address 2710 Michigan Ave, Kissimmee, FL 34744		
5.	Surety (if applicable, a copy of the payment bond is attached)		
	Name	Telephone Number	
_	Address	Amount of Bond \$	
6.	Lender		
	Name	Telephone Number	
	Address		
7.	Persons within the State of Florida designated by Owner upon whom	n 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 r	receive a copy of the Lienor's Notice as	
	provided by Section 713.13(1)(b), Florida Statutes.		
	Name Richard Goss	Telephone Number (407)828-2205	
_	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000		
9.	Expiration date of notice of commencement (the expiration date may	•	
	and final payment to the contractor, but will be 1 year from the date of rec	ording unless a different date is specified)	
	09/30/2015		
PAY THE	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION SIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FIVING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANT ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMEN	LORIDA STATUTES, AND CAN RESULT IN YOUR EMENT MUST BE RECORDED AND POSTED ON CING, CONSULT WITH YOUR LENDER OR AN	
Un	der penalty of perjury, I declare that I have read the foregoing notice o	of commencement and that the facts	
sta	ted in it are true to the best of my knowledge and belief.	•	
	$\mathcal{L}^{\prime}$	10 1	
	Kielan BAss & ichard Gos	SIPMAIFAM	
Signature of Owner or Lessee, or Owner's or Signatory's Printed Name/Title/Office			
Les	see's Authorized Officer/Director/Partner/Manager		
The	e foregoing instrument was acknowledged before me this day of	May 2015 by Kickend Goss	
	Authorized Signatory for	Walt Disney World Resort	
as <sub>-</sub>			
	Type of authority, e.g., officer, trustee, attorney in fact  Name of part	ly on behalf of whom instrument was executed	
(	Posalie Creamer		
_	Signature of Notary Public - State of Florida	was a summand that the form the summand that the summand the summand that the summand the summand that the summand that the summand that the summand	
P	ersonally Known OR Produced ID	Notary Public State of Florida Rosalie Creamer	
	\$ is	My Commission FF 117844	
Ŧ	ype of ID Produced	Expires 05/22/2018	



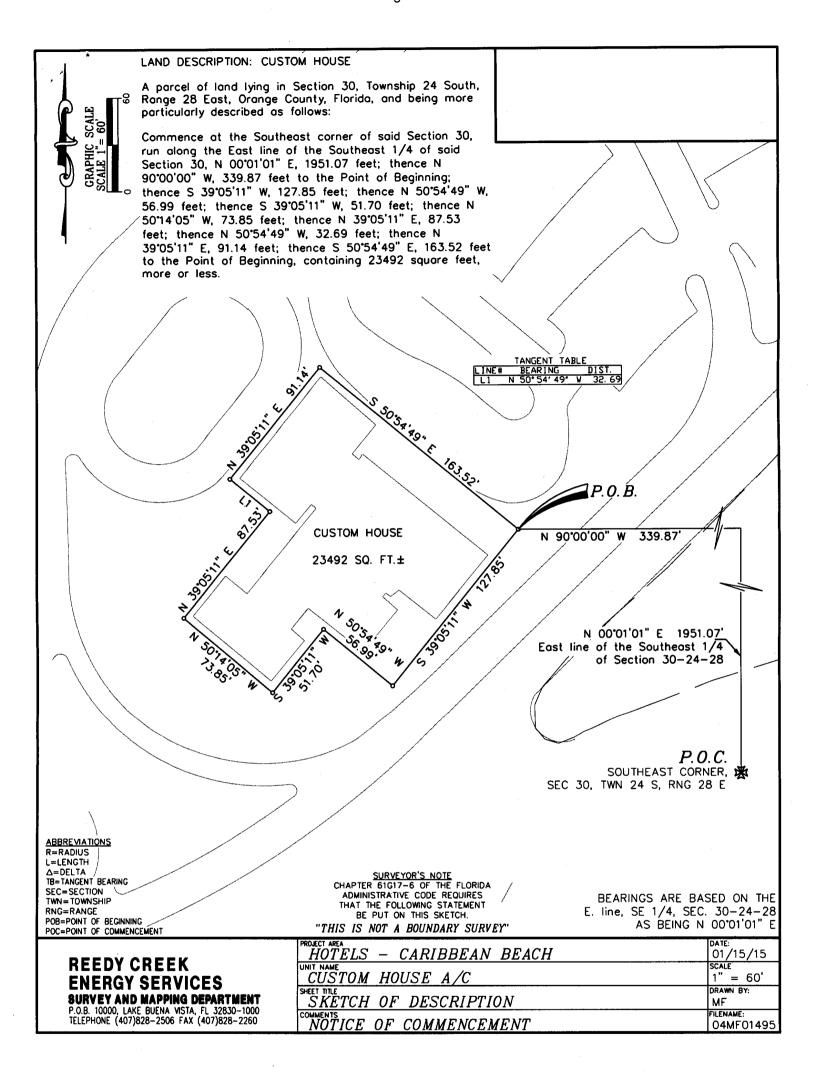
Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Anne Buchele P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOC# 20150224739 B: 10913 P: 9290 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



#### NOTICE OF COMMENCEMENT

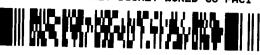
Type of ID Produced \_\_\_

	e of Florida, County of Orange	
	undersigned hereby gives notice that improvement will be made to cert	
	pter 713, Florida Statues, the following information is provided in this N	
1.	Description of property (legal description of the property, and street	address if available)
	See Attached	La contraction and the con
2.	General description of improvement	
	Roofing	
3.	Owner information or Lessee information if the Lessee contracted	for the improvement
	Name Walt Disney World Resort	
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from Own	er listed above)
	Name	
	Address	
4.	Contractor	
	Name Shield Coatings & Weatherproofing	Telephone Number (407) 827-4348
	Address P.O Box 22582, Lake Buena Vista , FL 32830	
5.	Surety (if applicable, a copy of the payment bond is attached)	
•	Name	Telephone Number
	Address	Amount of Bond \$
6.	Lender	
	Name	Telephone Number
	Address	
7.		om 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 t	o receive a copy of the Lienor's Notice as
	provided by Section 713.13(1)(b), Florida Statutes.	•
	Name Anne Buchele	Telephone Number 407-828-2165
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	-
9.	Expiration date of notice of commencement (the expiration date m	nay not be before the completion of construction
	and final payment to the contractor, but will be 1 year from the date of r	
	08/28/2015	
CON PAY THE ATT	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE RESTRICT OF THE EXPIRATION OF THE PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13 ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMEIS JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FIN ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMM	I, FLORIDA STATUTES, AND CAN RESULT IN YOUR ICEMENT MUST BE RECORDED AND POSTED ON ANCING, CONSULT WITH YOUR LENDER OR AN IENCEMENT.
Und stat	der penalty of perjury, I declare that I have read the foregoing notice ted in it are true to the best of my knowledge and belief.	e of commencement and that the facts
- /	rugin Bulk Anne EMI	SUCHELE /PLANNER
		ory's Printed Name/Title/Office
Les	ssee's Authorized Officer/Director/Partner/Manager	ory's Frinted Name/Title/Office
	#1 <del>-11</del> 1	of May 2015 by Anne Em Buchele
The	e foregoing instrument was acknowledged before me this day	month/year, by TTIME ENT ISWARDS
as	Authorized Signatory forfor	Walt Disney World Resort
_		party on behalf of whom instrument was executed
$\subseteq$	Bonnie of Crail	·
	Signature of Notary Public - State of Flord	h pro-constants premier of Notacy Public
	ersonally Known OR Produced ID	Bonnie L Craig My Commission FF 112965
T	vpe of ID Produced	- 100 E-100



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

DOCH 20150224740 B: 10913 P: 9292 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



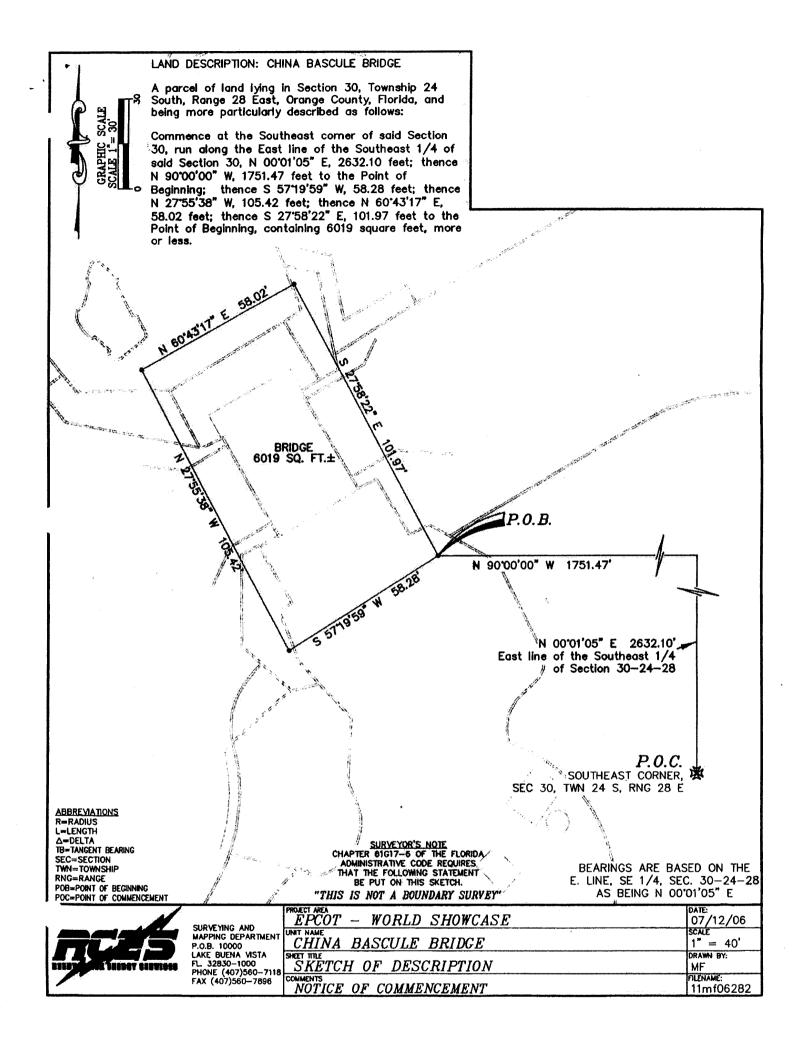
Notary Public State of Florida Kelly L Nobles My Commission EE 220221 Expires 07/29/2016

#### NOTICE OF COMMENCEMENT

	NOTICE OF COMMENCEME	:N1
Stat	te of Florida, County of Orange	
	undersigned hereby gives notice that improvement will be made to cer	tain real property, and in accordance with
Cha	apter 713, Florida Statues, the following information is provided in this N	otice of Commencement.
1.	Description of property (legal description of the property, and stree	t address if available)
2.		
	Electrical	
3.	Owner information or Lessee information if the Lessee contracted	for the improvement
٠.	Name Walt Disney World Resort	·
	Address PO Box 10,000 Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from Owi	ner listed above)
	Name	
	Address	
4	Contractor	
₹.		Telephone Number 407-856-8871
	Name Southeastern Design & Electrical Address 1031 Salsona Ave., Kissimmee, FL 34774	
E	Surety (if applicable, a copy of the payment bond is attached)	
J.		Telephone Number
		Amount of Bond \$
e	Address	
0.		Telephone Number
		, relicipitorio resinato
7	Address  Persons within the State of Florida designated by Owner upon the Owne	nom notices or other documents may be
7,	served as provided by Section 713.13(1)(b), Florida Statutes.	ion notices of other documents may so
	Name _Judy Wells, Facility Asset Management (FAM)	Telephone Number (407) 939-4631
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Telephone Number (407) 000 1001
	In addition to himself or herself, Owner designates the following	to receive a conv of the Lienor's Notice as
0.	provided by Section 713.13(1)(b), Florida Statutes.	to leading a copy of the sionor of totals as
	Name Tim Keith	Telephone Number (407)560-4168
	Name Tim Keith Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Telephone Namber (407)
•	Expiration date of notice of commencement (the expiration date of	nay not be before the completion of construction
9.	and final payment to the contractor, but will be 1 year from the date of	recording unless a different date is specified)
	,	recording unless a different date is specified)
	06/05/2015	ATTAN OF THE MOTIOS OF COMMENCEMENT ADD
COP	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIR NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.1: YING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMME	3, FLORIDA STATUTES, AND CAN RESULT IN YOUR NCEMENT MUST BE RECORDED AND POSTED ON
THE	E JOB SITE BEFORE THE FIRST INSPECTION, IF YOU INTEND TO OBTAIN FIN TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMI	IANCING, CONSULT WITH YOUR LENDER OR AN
AII	ORNET BEFORE COMMENCING WORK OR RECORDING FOUR NOTICE OF COM	RENOLMENT.
Un	der penalty of perjury, I declare that I have read the foregoing notic	ce of commencement and that the facts
sta	ted in it are true to the best of my knowledge and belief.	
C		v : •
	Tomaran L	Carlier Liceron March
	Signature of Owner or Lessee, or Owner's or Signa	tory's Printed Name/Title/Office
Les	ssee's Authorized Officer/Director/Partner/Manager	
	e foregoing instrument was acknowledged before me thisda	OF MAY BY JAMMY TARKER
		month/year
as	Authorized Signatory for	Walt Disney World Resort
33		party on behalf of whom instrument was executed
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· •
	\	
	Signatuce of Nolary Public - State of Florida Pr	int, type, or stamp name of Notary Public

OR Produced ID

Type of ID Produced



Folio/Parcel Identification Number:

Prepared by and Return to: Yo39311

Walt Disney World Resort - FAM

Attn: Gwynetta Stevens P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150224741 B: 10913 P: 9294 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



#### NOTICE OF COMMENCEMENT

	NOTICE OF COMMERCEMENT	•
	te of Florida, County of Orange	
	undersigned hereby gives notice that improvement will be made to certain	
Cha	apter 713, Florida Statues, the following information is provided in this Not	
1.	<b>Description of property</b> (legal description of the property, and street a	iddress if available)
	SEE ATTACHED	
2.	General description of improvement	
	CONTRACTORS GENERAL CONDITIONS	
3.	Owner information or Lessee information if the Lessee contracted f	or the improvement
	Name Walt Disney World Resort	
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from Owner	r listed above)
	Name	
	Address	
4.	Contractor	
	Name Slalom Construction Services, Inc.	Telephone Number <u>407-938-0244</u>
_	Address P. O. Box 783211, Winter Garden, FL 34778-3211	
5.	Surety (if applicable, a copy of the payment bond is attached)	
	Name	Telephone Number
_	Address	Amount of Bond \$
6.	Lender	Tolombon a Normbon
	Name	Telephone Number
7	Address  Persons within the State of Florida designated by Owner upon who	mandage or other decuments may be
7.	served as provided by Section 713.13(1)(b), Florida Statutes.	m notices of other documents may be
	Name Judy Wells, Facility Asset Management (FAM)	Telephone Number (407) 939-4631
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Telephone (407) 333-4031
8	In addition to himself or herself, Owner designates the following to	receive a copy of the Lienor's Notice as
٠.	provided by Section 713.13(1)(b), Florida Statutes.	
	Name Gwynetta Stevens	Telephone Number (407)828-1282
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	
9.	Expiration date of notice of commencement (the expiration date ma	y not be before the completion of construction
•	and final payment to the contractor, but will be 1 year from the date of rec	
	09/25/2015	, ,
WA	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATI	ON OF THE NOTICE OF COMMENCEMENT ARE
CON	NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, F	LORIDA STATUTES, AND CAN RESULT IN YOUR
	ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY, A NOTICE OF COMMENC : JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINAN	
ATT	ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMME	NCEMENT.
Heat	der penalty of perjury, I declare that I have read the foregoing notice	of commonsement and that the facts
	ted jp <sub>a</sub> it are true to the best of my knowledge and betjef.	or commencement and that the facts
		$\Omega I = \Omega I$
	DAMINE SHELLE (SWUNG) FA	15 PINAS WANGE
7	wyndiens _ dry //	5/4000, 11/1000
Les	Signature of Owner or Lessee, or Owner's or Signatory see's Authorized Officer/Director/Partner/Manager	r's Printed Name/Title/Office
	المهيب	War C' Warner
The	e foregoing instrument was acknowledged before me thisday o	May Cars by TWINETTA TEVENS
		m6nth/year
as	Authorized Signatory for	Walt Disney World Resort
		rty on behalf of whom instrument was executed
	1 ) 4	

otary Public - State of Florida

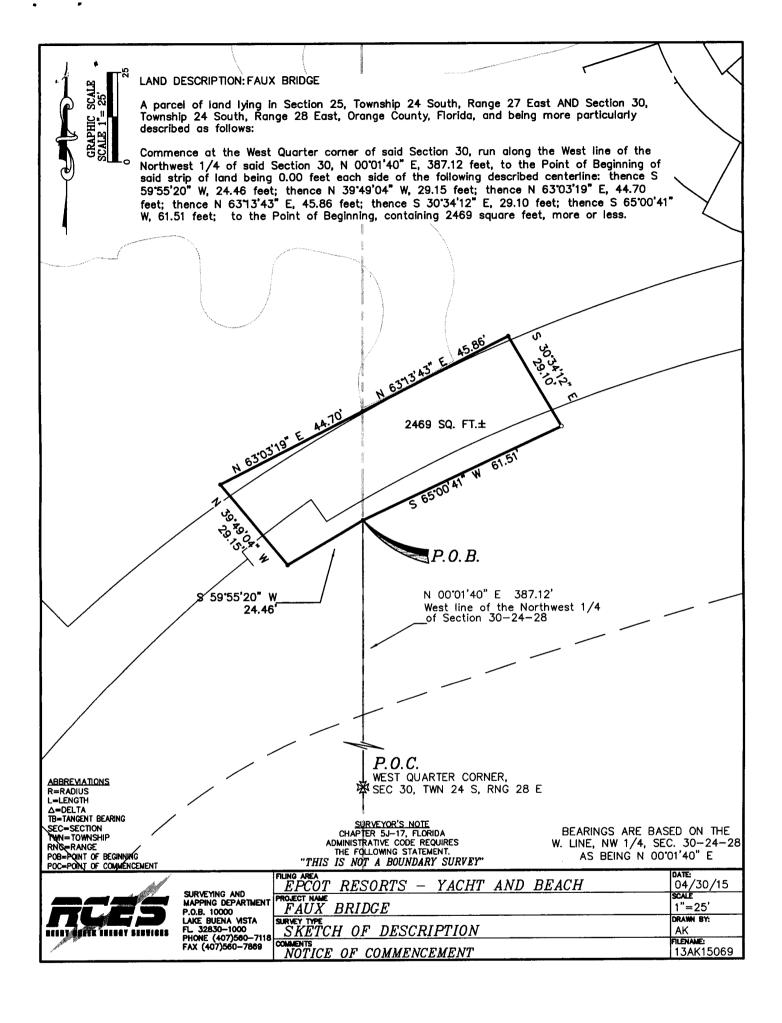
OR Produced ID

Personally Known

Type of ID Produced \_

Print, type, or stamp name of Notary Public

Notary Public State of Florida Kelly L Nobles My Commission EE 220221 Expires 07/29/2016



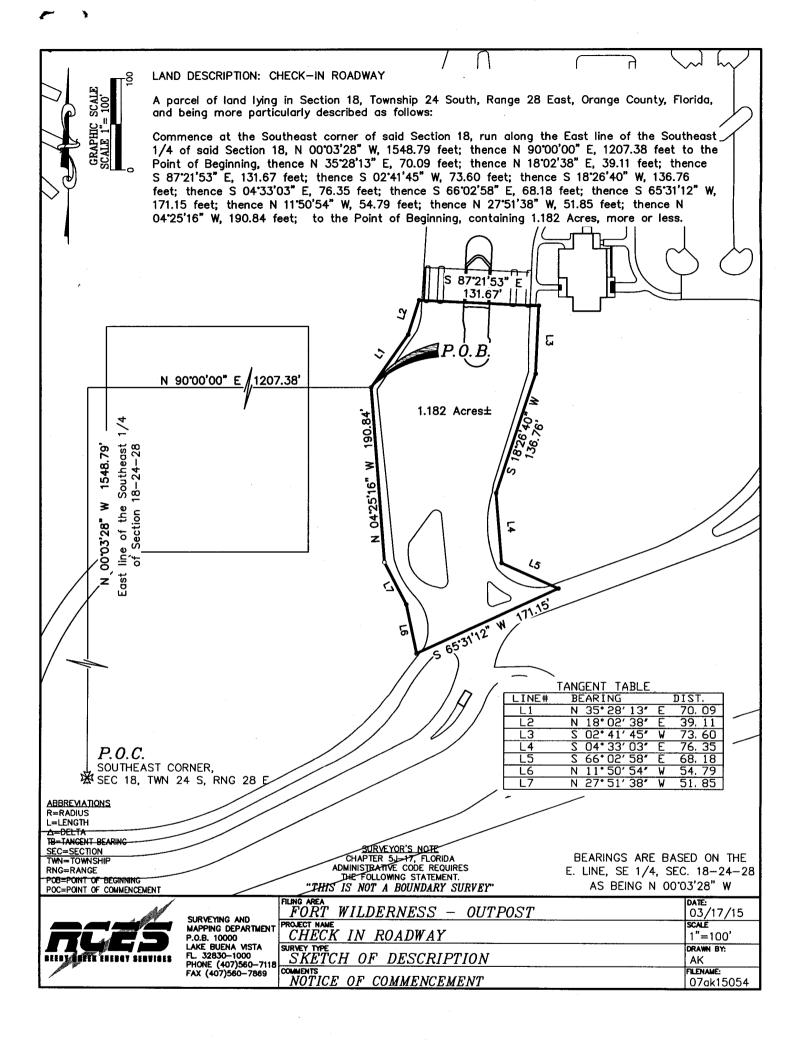
Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Richard Goss P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOC# 20150224742 B: 10913 P: 9296 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



### NOTICE OF COMMENCEMENT

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.

•	er 713, Florida Statues, the following information is provided in this I escription of property (legal description of the property, and stre	
se	ee legal description	
	eneral description of improvement	
	aving	
	wner information or Lessee information if the Lessee contracte	d for the improvement
	Name Walt Disney World Resort	
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from Ow	ner listed above)
	Name	
	Address	
. C	ontractor	
	Name PREFERRED MATERIAL	Telephone Number 407-343-7445
	Address 2710 Michigan Ave, Kissimmee, FL 34744	
i. Si	urety (if applicable, a copy of the payment bond is attached)	
	Name	Telephone Number
	Address	Amount of Bond \$
. <b>L</b> e	ender	
	Name	Telephone Number
	Address	- Mar Barrier
'. P	ersons within the State of Florida designated by Owner upon w	hom notices or other documents may be
se	erved 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	
	addition to himself or herself, Owner designates the following	to receive a copy of the Lienor's Notice as
	rovided by Section 713.13(1)(b), Florida Statutes.	to receive a copy or the memor o receive as
•	Name Richard Goss	Telephone Number (407)828-2205
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Telephone Number (407)020-2203
	xpiration date of notice of commencement (the expiration date	may not be before the completion of construction
	nd final payment to the contractor, but will be 1 year from the date of	
aı	• •	recording unless a different date is specified)
	09/30/2015	
ONSI PAYING THE JO	ING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIR DERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.1 G TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMME OB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FI INEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COM	13, FLORIDA STATUTES, AND CAN RESULT IN YOUR ENCEMENT MUST BE RECORDED AND POSTED ON NANCING, CONSULT WITH YOUR LENDER OR AN
	r penalty of perjury, I declare that I have read the foregoing noticing it are true to the best of my knowledge and belief.	ce of commencement and that the facts
$\chi$	Wand & Micheral	2033   PMA   PAM
/ Si	ignature of Owner or Lessee, or Owner's or Signa	atory's Printed Name/Title/Offide
	e's Authorized Officer/Director/Partner/Manager pregoing instrument was acknowledged before me this da	y of lay 20 - by Richard Gos s
ıs	Authorized Signatory for	Walt Disney World Resort
		f party on behalf of whom instrument was executed
		party on social of monitorial for the one of the original for the original
	Signature of Notary Public - State of Florida Pr	int, type, or stamp name of Notary Public
Pers	onally Known OR Produced ID	Notary Public State of Florida  Solution Notary Public State of Florida
Туре	e of ID Produced	My Commission EE 220221 Expires 07/29/2016



Permit Number:
Folio/Parcel Identification Number:
Prepared by and Return to:
Walt Disney World Resort - FAM

Attn: Tracy James P.O. Box 10000

Lake Buena Vista, FL 32830-1000

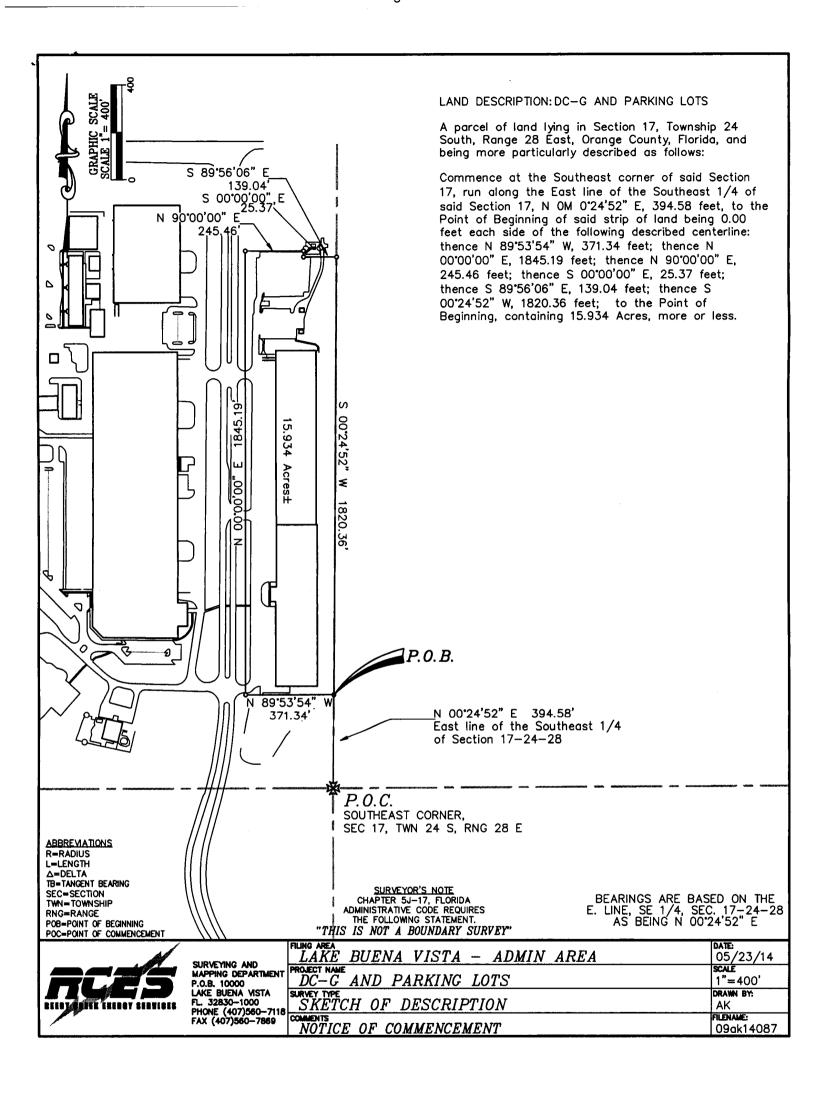
DOC# 20150224743 B: 10913 P: 9298 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



#### NOTICE OF COMMENCEMENT

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.

۱.	<b>Description of property</b> (legal description of the proper 4039239 See Attached	ty, and street address it available)
2.	General description of improvement	
•	Electrical	
3.	Owner information or Lessee information if the Lessee	contracted for the improvement
	Name Walt Disney World Resort	
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different	ent from Owner listed above)
	Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Address	
4.		
٠.	Name Tri City Electrical Contractors	Telephone Number 407-788-3500
	Address 430 West Drive, Altamonte Springs, FL 32714	Telephone Number 407-700-0000
-		h
5.	Surety (if applicable, a copy of the payment bond is attack	
	Name	
_	Address	Amount of Bond \$
6.	Lender	
	Name	Telephone Number
	Address	
7.	Persons within the State of Florida designated by Own	
	served as provided by Section 713.13(1)(b), Florida Sta	
	Name Judy Wells, Facility Asset Management (FAM)	Telephone Number (407) 939-4631
	Address P.O. Box 10000, Lake Buena Vista, Florida 328	
8.	In addition to himself or herself, Owner designates the	following to receive a copy of the Lienor's Notice as
	provided by Section 713.13(1)(b), Florida Statutes.	
	Name Tracy James	Telephone Number 407-828-2141
	Address P.O. Box 10000, Lake Buena Vista, Florida 328	330-1000
9.	Expiration date of notice of commencement (the expi	ration date may not be before the completion of construction
	and final payment to the contractor, but will be 1 year from	
	09/30/20	
CO PA	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTE NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SI /ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOT	ECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR E OF COMMENCEMENT MUST BE RECORDED AND POSTED ON O OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN
Un sta	der penalty of perjury, I declare that I have read the fore ted in it are true to the best of my knowledge and belief	going notice of commencement and that the facts
	$A \sim -$	10.
\	Stacy aues IRACY	JAMES /PLANWER/FAM
_	Signature of Owner or Lessee, or Owner's or	Signatory's Printed Name/Title/Office
Le	ssee's Authorized Officer/Director/Partner/Manager	1
	e foregoing instrument was acknowledged before me this _	5th day of MAY 2015 by TRACY Junes
		morfth/year
as	Authorized Signatory	for Walt Disney World Resort
	Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed
_	Signature of Notary Public - State of Florida	Print, type, or stamp name of Notary Public
F	Personally Known OR Produced ID	Notary Public State of Florida Kelly L Nobles My Commission EE 220221
٦	ype of ID Produced	Expires 07/29/2016



Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Richard Goss P.O. Box 10000

Lake Buena Vista, FL 32830-1000

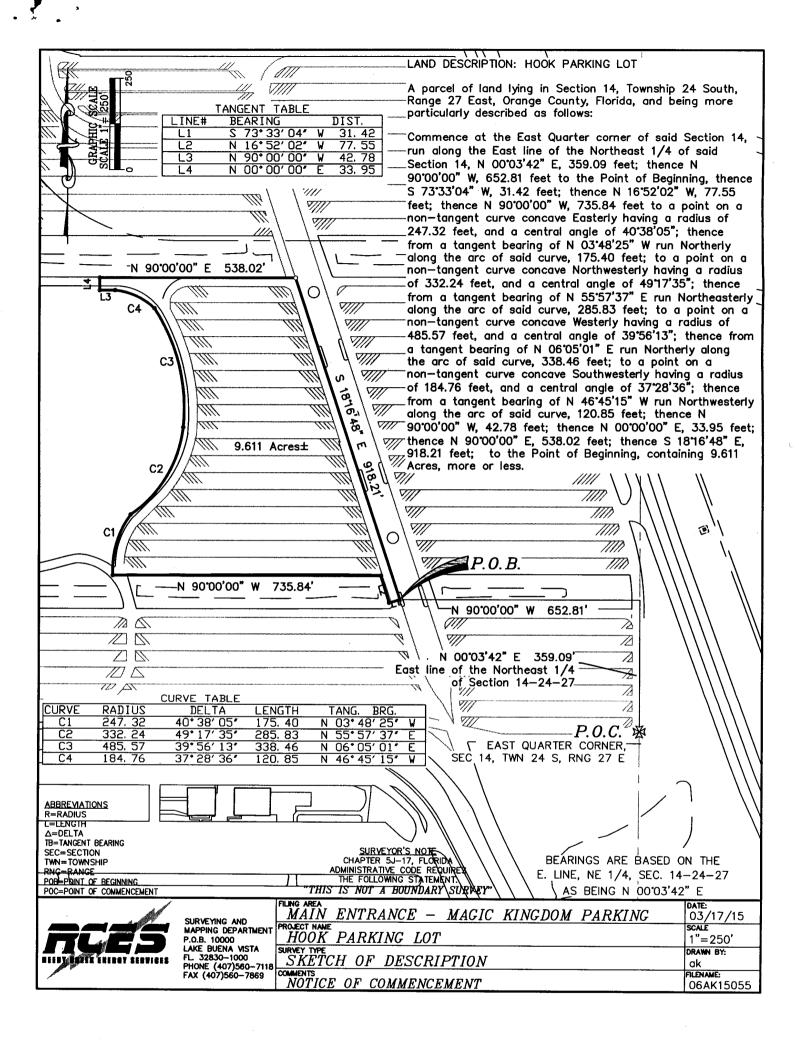
DOC# 20150224744 B: 10913 P: 9300 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



### NOTICE OF COMMENCEMENT

The undersigned hereby gives	notice that improvement will be made to certain real property, and in accordance with
Chapter 713 Florida Statues 1	he following information is provided in this Notice of Commencement.

1.	Description of property (legal description of the property, and stre	et address if available)
	see legal description	
2.	General description of improvement	
	Paving	
3.	Owner information or Lessee information if the Lessee contracte	ed for the improvement
	Name Walt Disney World Resort	
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from Ow	vner listed above)
	Name	,
	Address	
4.	Contractor	and the second s
٠.	Name PREFERRED MATERIAL	Telephone Number 407-343-7445
	Address 2710 Michigan Ave, Kissimmee, FL 34744	Total Tall Date 1
5	Surety (if applicable, a copy of the payment bond is attached)	
Э.	Alama	Telephone Number
	Name	Amount of Bond \$
	Address	Amount of Boild \$
6.	Lender	Talankana Niverban
	Name	Telephone Number
_	Address	
7.		hom 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.	
	Name Richard Goss	Telephone Number (407)828-2205
	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	frecording unless a different date is specified)
	07/03/2015	
CO	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIR INSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.1 YING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMME	13, FLORIDA STATUTES, AND CAN RESULT IN YOUR
	E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FI TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COM	
	nder penalty of perjury, I declare that I have read the foregoing noti ated in it are true to the best of my knowledge and belief.	ice of commencement and that the facts
	0-1/1/1 0.12	0  1  1
×	Kicher & Kicherd (	TOSS IPMAIFAM
		atory's Printed/Name/Title/Office
Le	essee's Authorized Officer/Director/Partner/Manager	alory's Frinteg Name/ Price/Office
	49	M = SD + C
The	e foregoing instrument was acknowledged before me this'da	month/year Tichard Coss
as	Authorized Signatory for	Walt Disney World Resort
		f party on behalf of whom instrument was executed
	) /	
-	Signature of Notary Public - State of Florida Pr	rint_type_or_stampingenportNutary-PhbMhh
	gradero er riolog i sono ende or i lorda Fi	Notary Public State of Florida
F	Personally Known <b>X</b> OR Produced ID	Notary Public State of Fiolida  Kelly L Nobles
'		My Commission EE 220221
Т	Type of ID Produced	Expires 07/29/2016
		2 ************************************



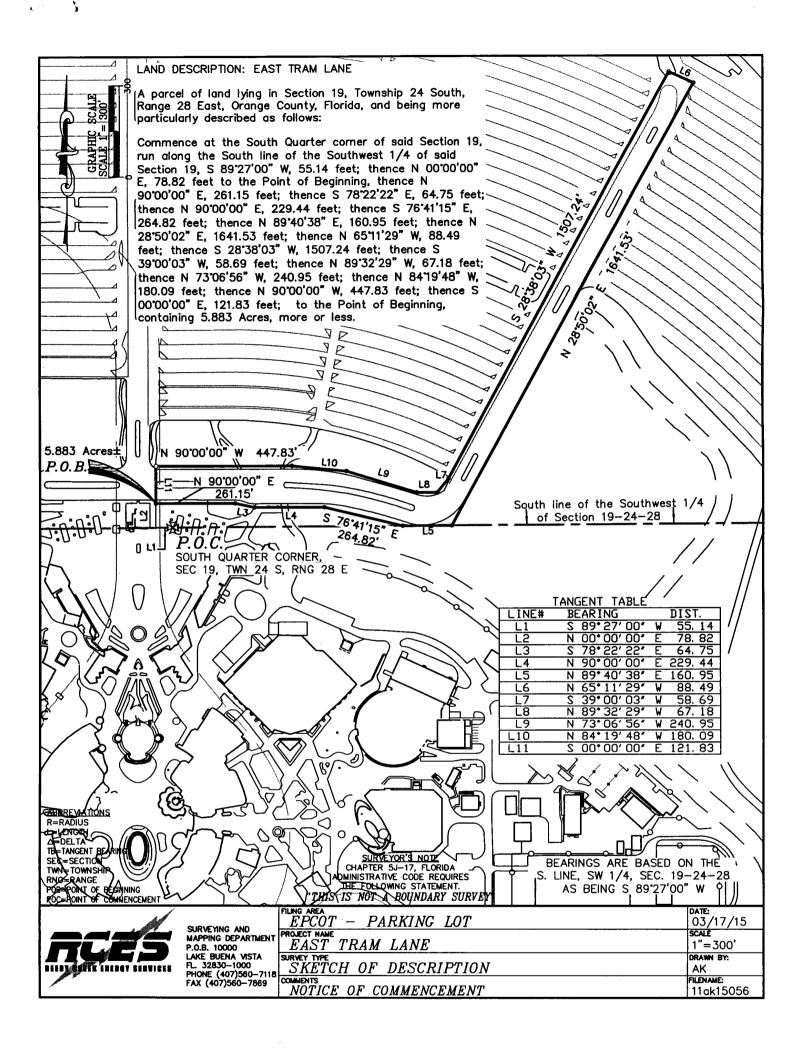
Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Richard Goss P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOC# 20150224745 B: 10913 P: 9302 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha 0. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



#### NOTICE OF COMMENCEMENT

1	Description of property (logal description of the property and street address if available)
Ch	napter 713, Florida Statues, the following information is provided in this Notice of Commencement.
The	ie undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with

	see legal description	,
2.	General description of improvement	
	Paving	
3.	Owner information or Lessee information if the Lessee cont	racted for the improvement
	Name Walt Disney World Resort	
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if different from	m Owner listed above)
	Name	
	Address	
4.	Contractor	
	Name PREFERRED MATERIAL	Telephone Number 407-343-7445
	Address 2710 Michigan Ave, Kissimmee, FL 34744	
5.	Surety (if applicable, a copy of the payment bond is attached)	
	Name	Telephone Number
	Address	Amount of Bond \$
6.	Lender	
	Name	Telephone Number
	Address	
7.	Persons within the State of Florida designated by Owner up	on 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 32830-10	00
8.	In addition to himself or herself, Owner designates the follo	wing to receive a copy of the Lienor's Notice as
	provided by Section 713.13(1)(b), Florida Statutes.	
	Name Richard Goss	Telephone Number (407)828-2205
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-10	
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 da	ate of recording unless a different date is specified)
	07/23/2015	
COI PAY THE	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE NOSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION INFORMED FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN	I 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR OMMENCEMENT MUST BE RECORDED AND POSTED ON NN FINANCING, CONSULT WITH YOUR LENDER OR AN
411	TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF	COMMENCEMENT.
	nder penalty of perjury, I declare that I have read the foregoing ated in it are true to the best of my knowledge and belief.	notice of commencement and that the facts
	O(1/2)	
	Kicked BM Kicker	COOSE IRMA / FAM
-6	Signature of Owner or Lessee, or Owner's or	Signatory's Printed Name/Title/Office
Les	essee's Authorized Officer/Director/Partner/Manager	
Γhe	e foregoing instrument was acknowledged before me this	day of May 2015, by Kichard Cross
as	Authorized Signatory for	Walt Disney World Resort
		ame of party on behalf of whom instrument was executed
	V4	
	Signature of Netary Public - State of Florida	Print, type, or stamp name of Notary Public
Р	Personally Known OR Produced ID	Notary Public State of Florida Kelly L Nobles
Т	Type of ID Produced	My Commission EE 220221

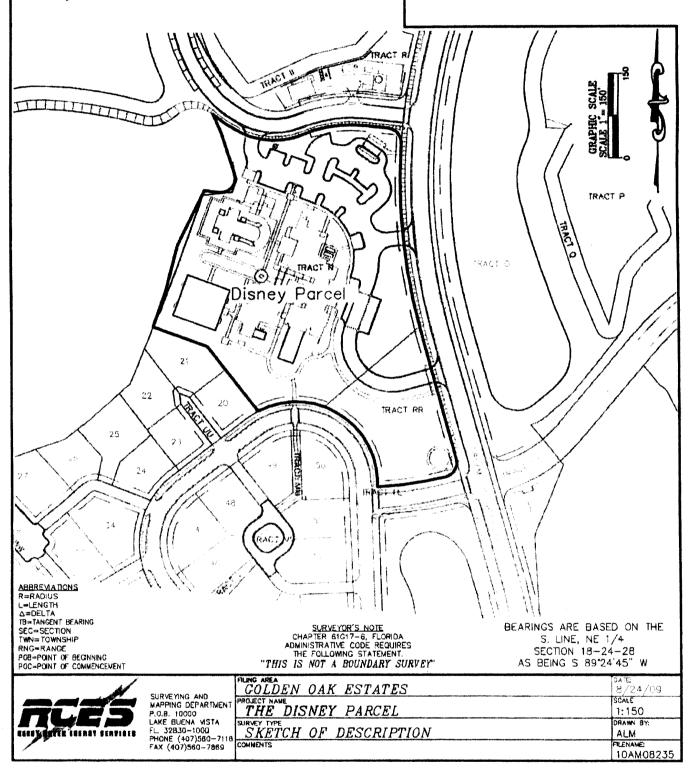


Permit Number:	10013 P. 9304
	SAAH JUJEWYJAIAH H. IVIJIJ I . VVV
Prepared by:Walt Disney World Resort, FM	05/05/2015 12:23:04 FIT 1035
Chris Dickman, PO Box 10000	Martha O. Haynie, Comptroller
Chris Dickman, PO Box 10000 Lake Buena Vista, FL 32830	Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FAC
Return to:	MB - Ret 10: WHLT DISKET WORLD
NOTICE OF COMMENCE	
State of Florida, County of Orange	MENI
The undersigned hereby gives notice that improvement	t will be made to certain real property, and in accordance
with Chapter 713, Florida Statutes, the following information	tion is provided in this Notice of Commencement
Description of property (legal description of the property)	audn'is provided in this Notice of Commencement.
See attached	operty, and street address it available)
2. General description of improvement	
Kitchen Equipment 3. Owner Information or Lessee Information if the L	
3. Owner miormation or Lessee information if the L	essee contracted for the improvement
Name Walt Disney World	3820
Address P.O. Box 10000, Lake Buena Vista, FL 32	2830
Interest in Property	
Name and address of fee simple titleholder (if di	
Name	
Address_	
4. Contractor	
Name TriMark	Telephone Number 866-856-1418
Address 2 W. Oakland Ave., PO Box 1208, Oakland	d, FL 34760
5. Surety (if applicable, a copy of the payment bond is	
Name	Telephone Number
Address	Amount of Bond \$
6. Lender	
Name	Telephone Number
Address	
	by Owner upon whom notices or other documents may
be served as provided by §713.13(1)(a)7, Florida	Statutes.
Name Jamie Kneebone	Telephone Number 407-939-5575
Address 10350 Dream Tree Blvd., Lake Buena Vist	
8. In addition to himself or herself, Owner designa	tes the following to receive a copy of the Lienor's
Notice as provided in §713.13(1)(b), Florida State	utes.
Name Chris Dickman, Facility Asset Management	Telephone Number_407-939-1199
Address P. O. Box 10000, Lake Buena Vista, FL 32	2830
9. Expiration date of notice of commencement (the	e expiration date will be 1 year from the date of recording
unless a different date is specified) 08/01/2015	;
RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTI	ER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT
CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PA	ART I, SECTION 713.13, FLORIDA STATUTES, AND CAN
ULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PI ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INS	ROPERTY. A NOTICE OF COMMENCEMENT MUST BE
YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WO	ORK OR RECORDING YOUR NOTICE OF COMMENCEMENT
Mrs. 1) leks	Planner /WAN FAN
ature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/L	
, , , , , , , , , , , , , , , , , , , ,	
foregoing instrument was acknowledged before me this	5 Stay of 1205 by Church Dickman
	month/year name of person
Authorized Disustany fo	
Type of authority, e.g., officer, trustee, attorney in fact	Name of party on begalf of whom instrument was executed
1)11	Formy and an annual and an an annual and an an annual and an an an annual and an
Signature of Notary Public – State of Florida	Print, type, or stamp commissioned name of Notary Public
	Notary Public State of Florida
Personally KnownOR Produced ID	Kelly L Nobles
Type of ID Produced	My Commission EE 220221
	For not Expires 07/29/2016
	• · · · · · · · · · · · · · · · · · · ·

### DESCRIPTION

,c, , , •

Tracts N and RR, Golden Oak Phase 1B according to the Plat thereof as recorded in Plat Book 75, Page 3 through 15 of the Public records of Orange County Florida.

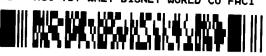


Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM

Attn: Tammy Gatlin P.O. Box 10000

Lake Buena Vista, FL 32830-1000

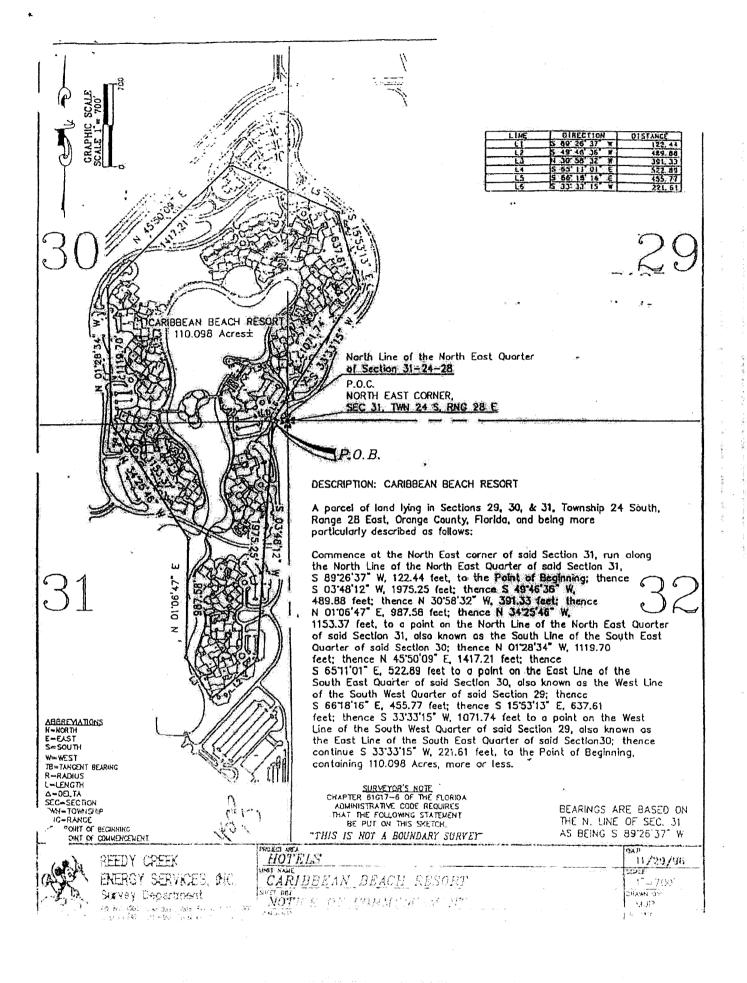
DOC# 20150224747 B: 10913 P: 9306 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



### NOTICE OF COMMENCEMENT

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.

Clia	ipter 7 to, Florida Statues, the following information is provided t	i inis nouce of Commencement.			
1.	<b>Description of property</b> (legal description of the property, ar	d street address if available)			
	4037234 - See Attached				
2.	General description of improvement				
2	General Conditions	Annatad for the improvement			
3.	Owner information or Lessee information if the Lessee contracted for the improvement  Name Walt Disney World Resort				
	Address P.O. Box 10000, Lake Buena Vista, FL 32830				
	Interest in Property Owner				
	Name and address of fee simple titleholder (if different fro	om Owner listed above)			
	Name	on owner listed above;			
	Address				
4	Contractor				
••	Name VEA Creative	Telephone Number 407-847-8323			
	Address 2420 Smith St, Kissimmee, FL 34744	· · · · · · · · · · · · · · · · · · ·			
5.	Surety (if applicable, a copy of the payment bond is attached)	A A A A A A A A A A A A A A A A A A A			
٠.	Name	Telephone Number			
	Address	Amount of Dand C			
6.	Lender				
	Name	Telephone Number			
	Address				
7.	Persons within the State of Florida designated by Owner u	oon whom notices or other documents may be			
	served as provided by Section 713.13(1)(b), Florida Statute	_			
	Name Judy Wells, Facility Asset Management (FAM)				
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1				
8.	In addition to himself or herself, Owner designates the follo				
	provided by Section 713.13(1)(b), Florida Statutes.				
	Name Tammy Gatlin	Telephone Number (407)828-5165			
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1	<u> </u>			
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 contractor.				
		, ,			
CON PAYI THE	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE ISIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTO DRIVEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF THE PROPERTY OF THE	N 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR COMMENCEMENT MUST BE RECORDED AND POSTED ON AIN FINANCING, CONSULT WITH YOUR LENDER OR AN			
	ler penalty of perjury, I declare that I have read the foregoin ed in it are true to the best of my knowledge and belief.	g notice of commencement and that the facts			
	221111	1 600			
	& Satta Tamuy 6	adea Br Plannor FAM			
	Signature of Owner or Lessee, or Owner's or	Signatory's Printed Name/Title/Office			
Les	see's Authorized Officer/Director/Partner/Manager	# 1			
The	foregoing instrument was acknowledged before me this	day of MAY 2015, by TANAY GATLIN			
as	Authorized Signatory for	Walt Disney World Resort			
_		Name of party on behalf of whom instrument was executed			
	24				
_	Signature of Notary Public - State of Florida	Print, type, or stamp name of Notary Public			
	•	***************************************			
Pe	ersonally Known X OR Produced ID	Notary Public State of Florida Kelly L Nobles  Notary Public State of Florida Kelly L Nobles			
Tv	roe of ID Produced	My Commission EE 220221			



Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Richard Woods P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150224748 B: 10913 P: 9308 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

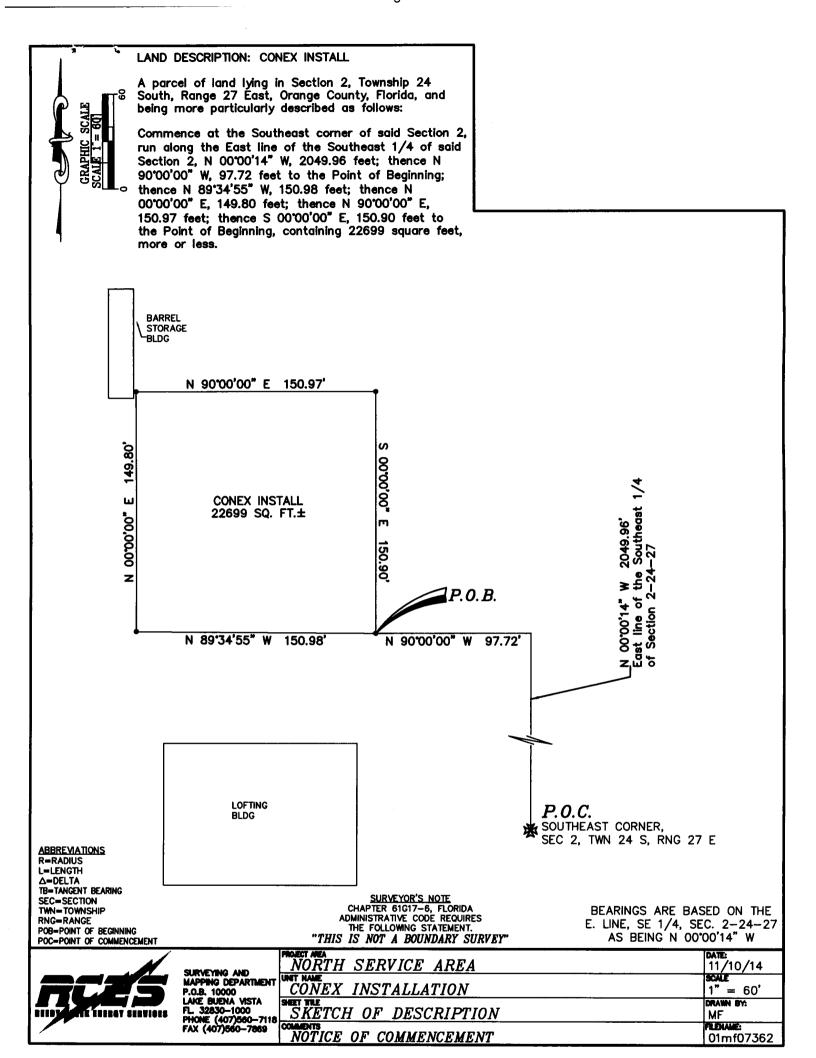


### NOTICE OF COMMENCEMENT

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.

1.	<b>Description of property</b> (legal description of the property, and stre (See Attached)	et address if available)				
2.	General description of improvement					
	General Construction					
3.	Owner information or Lessee information if the Lessee contracte	ed for the improvement				
	Name Walt Disney World Resort					
	Address P.O. Box 10000, Lake Buena Vista, FL 32830					
	Interest in Property Owner					
	Name and address of fee simple titleholder (if different from Owner listed above)					
	Name	more motion above)				
	Address	•				
4.	Contractor					
٠.	Name Validus Construction Services LLC	Telephone Number 702-460-2221				
	Address 7130 S Orange Blossom Tr, Orlando, FL 32809	Telephone Number 702-400-2221				
5.						
<b>J</b> .		Talankana Numban				
	Name	Telephone Number				
_	Address	Amount of Bond \$				
6.	Lender					
	Name	Telephone Number				
	Address					
7.	Persons within the State of Florida designated by Owner upon w	hom 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.					
	Name Richard Woods	Telephone Number (407)934-6052				
	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 con						
	and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)					
	08/28/2015	, ,				
CO PA THE	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIR NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.1 YING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMME E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FII TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COM	3, FLORIDA STATUTES, AND CAN RESULT IN YOUR ENCEMENT MUST BE RECORDED AND POSTED ON NANCING, CONSULT WITH YOUR LENDER OR AN				
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.						
	Bular Richard N. W.	goods Sr Planner F. A.M.				
Le	Signature of Owner or Lessee, or Owner's or Signature of Owner's Owner or Signature of O	atory's Printed Name/Title/Office				
Γhe	e foregoing instrument was acknowledged before me thisda	y of lay 2015, by Kichard Woods roonth/year				
as	Authorized Signatory for	Walt Disney World Resort				
		party on behalf of whom instrument was executed				
		party on bottom of whom instrument was executed				
	Signature of Notary Public - State of Florida Pr	int, type, or stamp name of Notary Public				
P	Personally Known OR Produced ID	Notary Public State of Florida Kelly L Nobles My Commission EE 220221				
T	ype of ID Produced	OF no Expires 07/29/2016				



Folio/Parcel Identification Number:

Prepared by and Return to: HO39317 - Cherie

Walt Disney World Resort - FAM

Attn: Gwynetta Stevens P.O. Box 10000

Personally Known

Type of ID Produced

OR Produced ID

Lake Buena Vista, FL 32830-1000

DOC# 20150224749 B: 10913 P: 9310 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

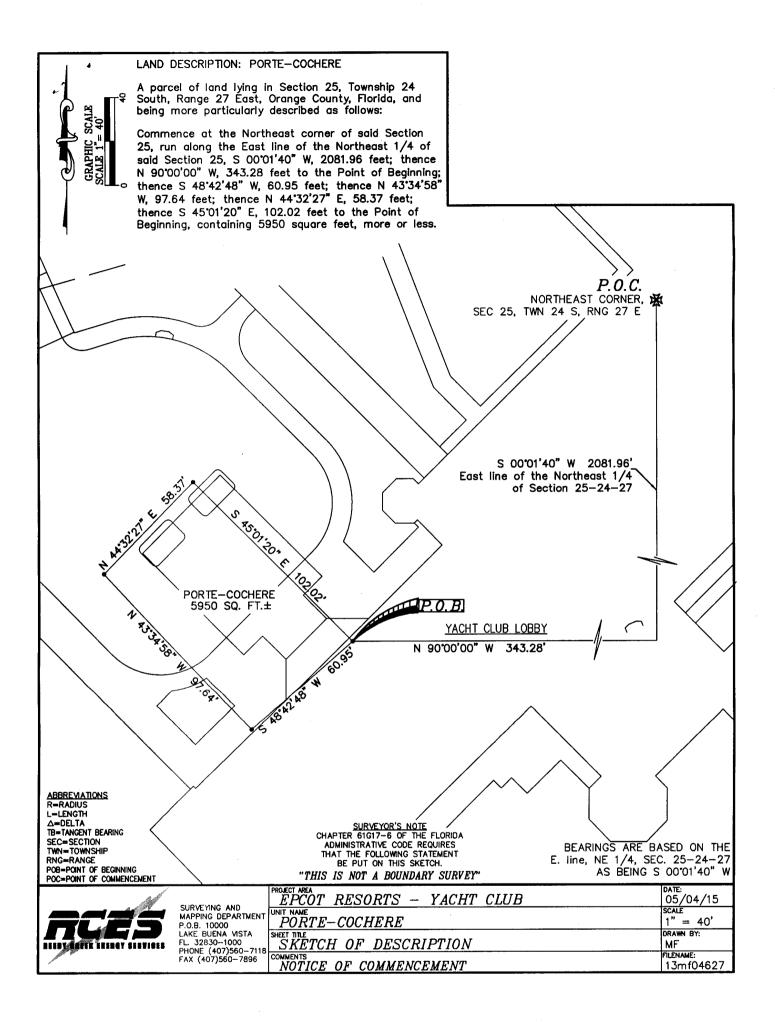
Notary Public State of Florida

res 04/22/2018

Bonnie L Craig

#### 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 ATTACHED 2. General description of improvement CONCRETE 3. Owner information or Lessee information if the Lessee contracted for the improvement Walt Disney World Resort Name 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 CEC General Contractors Inc Telephone Number 407-938-0177 Address PO Box 22621, Lake Buena Vista, FL 32830 5. Surety (if applicable, a copy of the payment bond is attached) Name Telephone Number Address Amount of Bond \$ 6. Lender Name Telephone Number 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(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. Name Gwynetta Stevens Telephone Number (407)828-1282 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) 09/18/2015 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. WIND HERENS Signature of Owner or Lessee, or Owner's e's Authorized Officer/Director/Partner/Manager 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 



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Folio/Parcel Identification Number

Prepared by and Return to: H039306 - Cherie

Walt Disney World Resort - FAM

Attn: Gwynetta Stevens P.O. Box 10000

Personally Known

Type of ID Produced

OR Produced ID

Lake Buena Vista, FL 32830-1000

DOC# 20150224750 B: 10913 P: 9312 05/05/2015 12:23:04 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

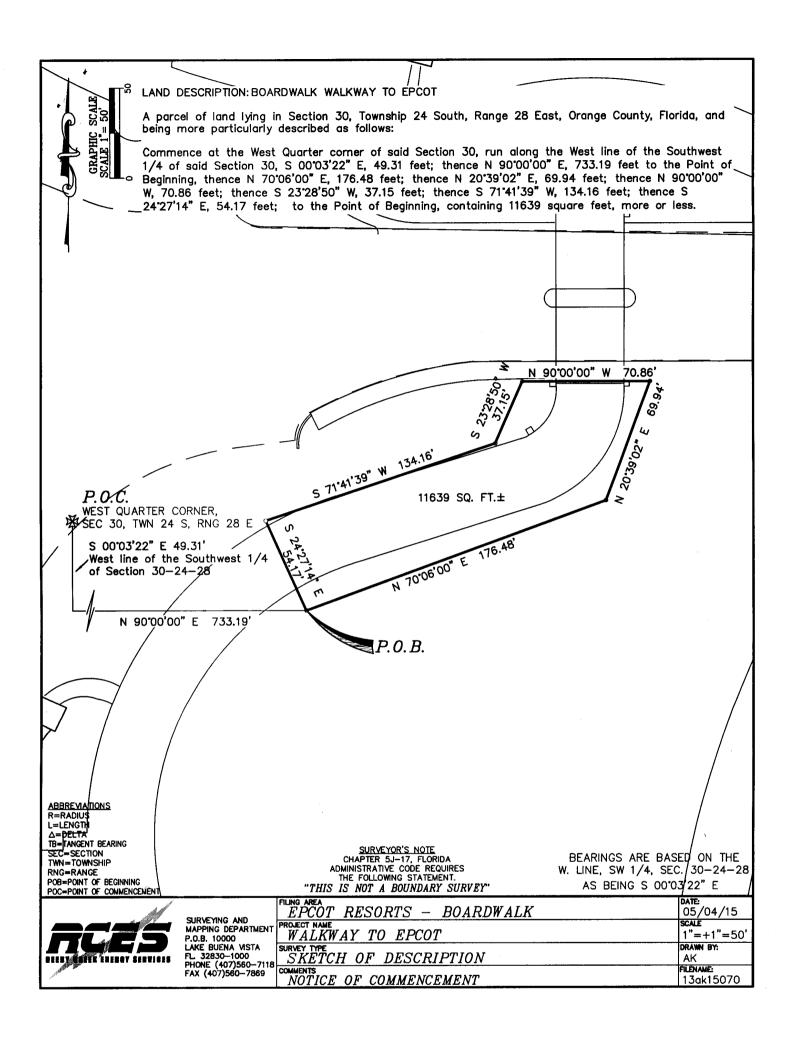


Notary Public State Bonnie L Craig

ommission FF as 04/22/2018

#### 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 ATTACHED General description of improvement CONTRACTOR GENERAL CONDITIONS 3. Owner information or Lessee information if the Lessee contracted for the improvement Walt Disney World Resort Name 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 Slalom Construction Services, Inc. Telephone Number 407-938-0244 Address P. O. Box 783211, Winter Garden, FL 34778-3211 5. Surety (if applicable, a copy of the payment bond is attached) Name Telephone Number Amount of Bond \$ Address Lender Name Telephone Number Address 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes. Telephone Number (407) 939-4631 Name Judy Wells, Facility Asset Management (FAM) Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes. Name Gwynetta Stevens Telephone Number (407)828-1282 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) 09/18/2015 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. HURK Signature of wher or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager 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 mne (



Prepared by/record and return to:

DOC# 20150232715 B: 10915 P: 9237 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



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

8.

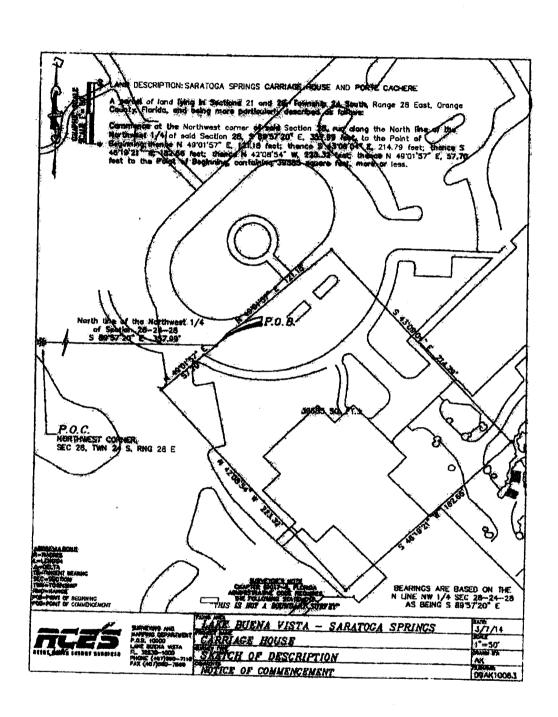
Type of ID Produced \_\_

ation 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.

		Permit No.		Tax Folio No.			
NOTICE OF COMMENCEMENT							
State	of Flo	orida, County of Orange					
	The undersigned hereby gives <b>notice</b> that improvements will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this <b>notice</b> of commencement.						
1.	Desc	cription of property: Legal De	scription Attached				
2.	General description of improvements: Mechanical						
3.	Own (a)	Owner Information: (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830					
	(b) (c)	Interest in property: Owner Name and address of fee si	mple titleholder (if other	than Owner):			
4.	(a)	Contractor (name and addr		Services ulevard; Orlando, Fl 32837			
	(b)	Contractor's phone number	407-857-3510				
5.	Sure (a) (b) (c)	ity: Name and address: Phone number: Amount of Bond:					
6.	(a) (b)	Lender (name and address) Lender's phone number:	:	Para tanàna mandritry ny taona 2001–2014. Para taona 2014–2014.			
7.	(a) (b)	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					
	(a) (b)		nor's Notice as provide	Elaine Schomburg-LaFleur of WDW d in Section 713.13 (1)(b), Florida Statutes.DavDa ner: 407-827-4868			
9.							
OF CO SECT IMPRO POST CONS	OMME ION <u>7</u> OVEM ED OI	ENCEMENT ARE CONSIDEI 13.13, FLORIDA STATUTE IENTS TO YOUR PROPERT N THE JOB SITE BEFORE	RED IMPROPER PAYM S, AND CAN RESULT I Y. A NOTICE OF COM I'HE FIRST INSPECTION N ATTORNEY BEFOR	NER AFTER THE EXPIRATION OF THE NOTICE IENTS UNDER CHAPTER 713, PART I, IN YOUR PAYING TWICE FOR MENCEMENT MUST BE RECORDED AND DN. IF YOU INTEND TO OBTAIN FINANCING, E COMMENCING WORK OR RECORDING			
	l	Signature of Owner		Flaint Schanburg to Flat / Manager 445 Signatory's Printed Name/Title/Office			
		er's Authorized officer/Director/Partner/Ma instrument was acknowledged befor	2017	solil, 2015, or Elaine Schomburg La Fleur as			
Authorized Signatory Walt Disney World Resort							
ļ	Sig	authority, e.g., officer, invalue, attorney-in authority, e.g., officer, invalue, attorney-in gnature of flodgry Public - State of Florida	nan	(name of party on behalf of whom instrument was executed)  Notary Public State of Florida  (Print, Type or State of Print, Type or State of Florida (Print, Type or S			
Personally Known OR Produced ID Expires 09/07/2016							

\_ Signature of Natural Person Signing Above



Permit Number: Folio/Parcel Identification Number:

Prepared by and Return to: Walt Disney World Resort - FAM

Attn: Richard Goss P.O. Box 10000

Personally Known

Type of ID Produced

OR

Produced ID

Lake Buena Vista, FL 32830-1000

Document Number: 2015 008 189 3

Book Number: 10876

Page Number: 4178

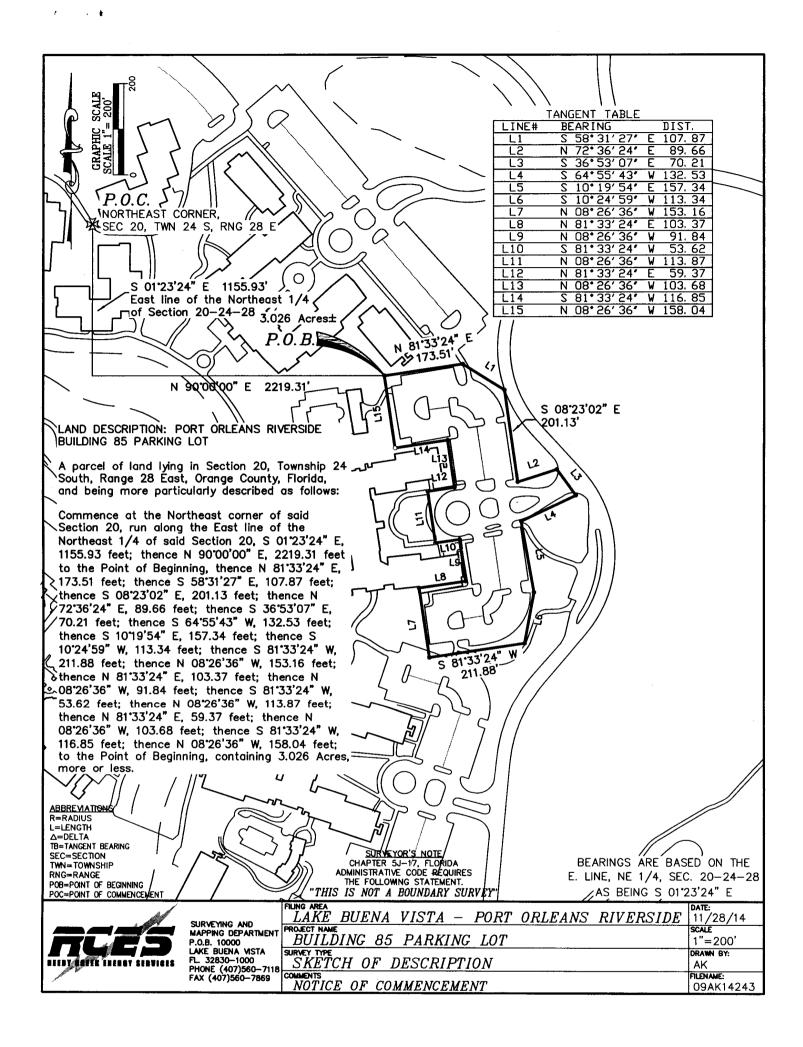
Notary Public State of Florida Kelly L Nobles My Commission EE 220221

Expires 07/29/2016

# 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 attached legal description General description of improvement Paving 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 PREFERRED MATERIAL Telephone Number 407-343-7445 Address 2710 Michigan Ave, Kissimmee, FL 34744 Surety (if applicable, a copy of the payment bond is attached) Name Telephone Number Address Amount of Bond \$ Lender Name Telephone Number Address 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(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. Name Richard Goss Telephone Number (407)828-2205 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) 09/30/2015 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 Lessee's Authorized Officer/Director/Partner/Manager The foregoing instrument was acknowledged before me this Authorized Signatory Walt Disney World Resort Type of a thority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed otary Public - State of Florida Print, type, or stamp name of Notary Public

DOCH 20150232716 B: 10915 F: 95/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Pmptroller Compared County, FL Orange County, FL DISNEY WORLD CO I MB -- Ret To: WALT DISNEY WORLD CO I



Prepared by/record and return to:

Walt Disney World Resort

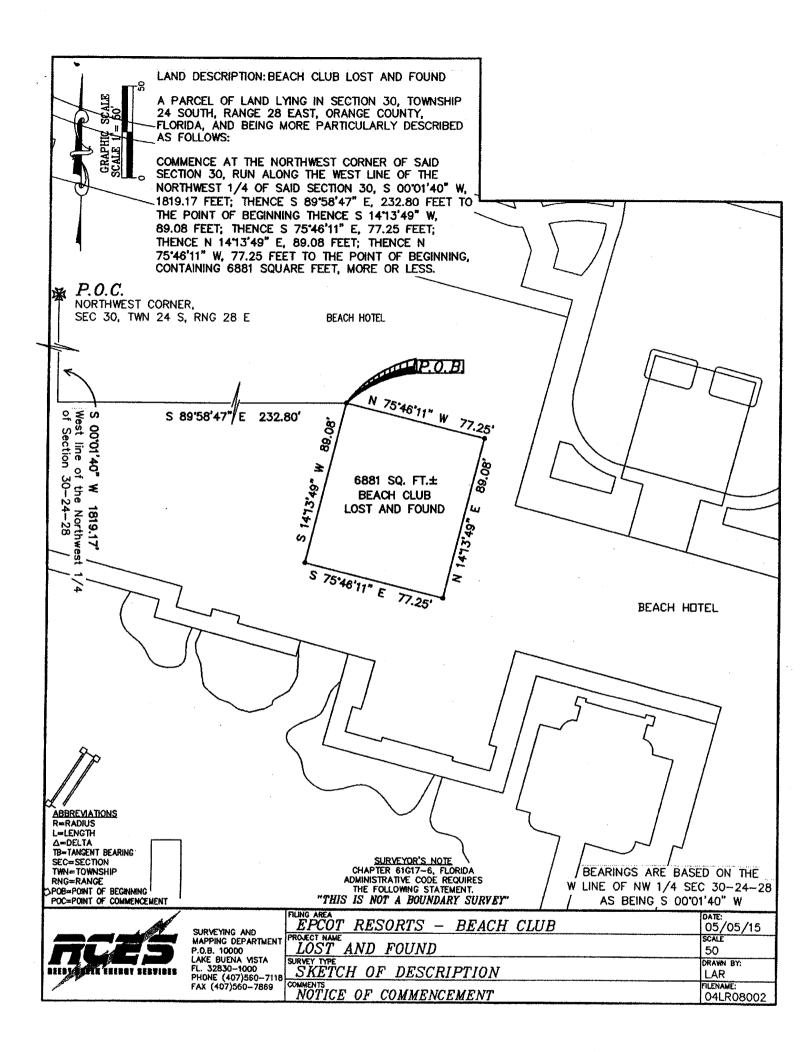
Attn: P.O. Box 10000 Lake Buena Vista, FL 32830-1000

DOC# 20150232717 B: 10915 P: 9241 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



			Permit No.		Tax Folio No			
				NOTICE OF CO	MMENCEMENT			
State of Florida, County of								
	The	under	and in accordan	се				
	1.	Des	cription of property:	SEE ATTACHE	<b>એ</b>			
	2.	Gen	eral description of impr	rovements: Construction	n I			
	3.		ner Information:	Mod Dissou Modd Poss	ort, P.O. Box 10000, Lake Buena Vista	a El 32830		
		(a)	Name and address; v	waii Dishey wond Rest	OR, F.O. BOX 10000, Lake buena visu	s, FL 32000		
		(b)	Interest in property: C Name and address of	Owner f fee simple titleholder (	if other than Owner):			
	4.	(a)	Contractor (name and	d address): CEC Gener PO Box 226	ral Contractors Inc 621		H	
		(b)	Contractor's phone no	umber: 407-938-0177				
	5.	Sure (a) (b) (c)	ety: Name and address: Phone number: Amount of Bond:					
	6.	(a) (b)	Lender (name and ad Lender's phone numb	•				
	7.	(a)	may be served as pro Dave Ellis, Sourcing	ovided by Section 713.1	ed by Owner upon whom <b>notices</b> or of 1 <u>3</u> (1)(a)7., Florida Statues: (name ar Istration, P.O. Box 10000, Lake Buena ') 828-3582	nd address):	2830-1000	
8.		(a) (b)	to receive a copy of the	,	nates Tony Perry provided in Section <u>713.13</u> (1)(b), Flo d by owner: 407-934-1235	of WDW orida Statutes.Da	avDa .	
	9.	•	ration date of <b>notice</b> of ss a different date is sp	•	expiration date is 1 year from the date	of recording		
<b>K</b>	OF C SECT IMPR POST CONS YOUR	OMME TON 7 OVEN TED O BULT 1 R NOT (or Own regoing	ENCEMENT ARE CON 13.13, FLORIDA STA MENTS TO YOUR PRO IN THE JOB SITE BEF WITH YOUR LENDER TOE OF COMMENCE Signature of Owner or a Authorized officer/Director/Pa	ASIDERED IMPROPER ATUTES, AND CAN REI DPERTY. A NOTICE OF FORE THE FIRST INSP R OR AN ATTORNEY B MENT.  er ariner/Manager) red before me this	PAYMENTS UNDER CHAPTER 713 SULT IN YOUR PAYING TWICE FOR F COMMENCEMENT MUST BE REC PECTION. IF YOU INTEND TO OBTA SEFORE COMMENCING WORK OR I  X Signatory's Printed Name/ Walt Disney World Re (name of party on behalf of whom instrume  (Print, Type, or Stamp Commissioned Name)	PART I, R CORDED AND IN FINANCING, RECORDING TILLE/Office PREPART ENTIRE (STEELE)	,as	
	Verif	cation		Florida Statutes: Under pe	enalties of perjury, I declare that I have read knowledge and belief.	OF FOR	Notary Public State of Florida Kelly L Nobles My Commission EE 220221 Expires 07/29/2016	

\_ Signature of Natural Person Signing Above



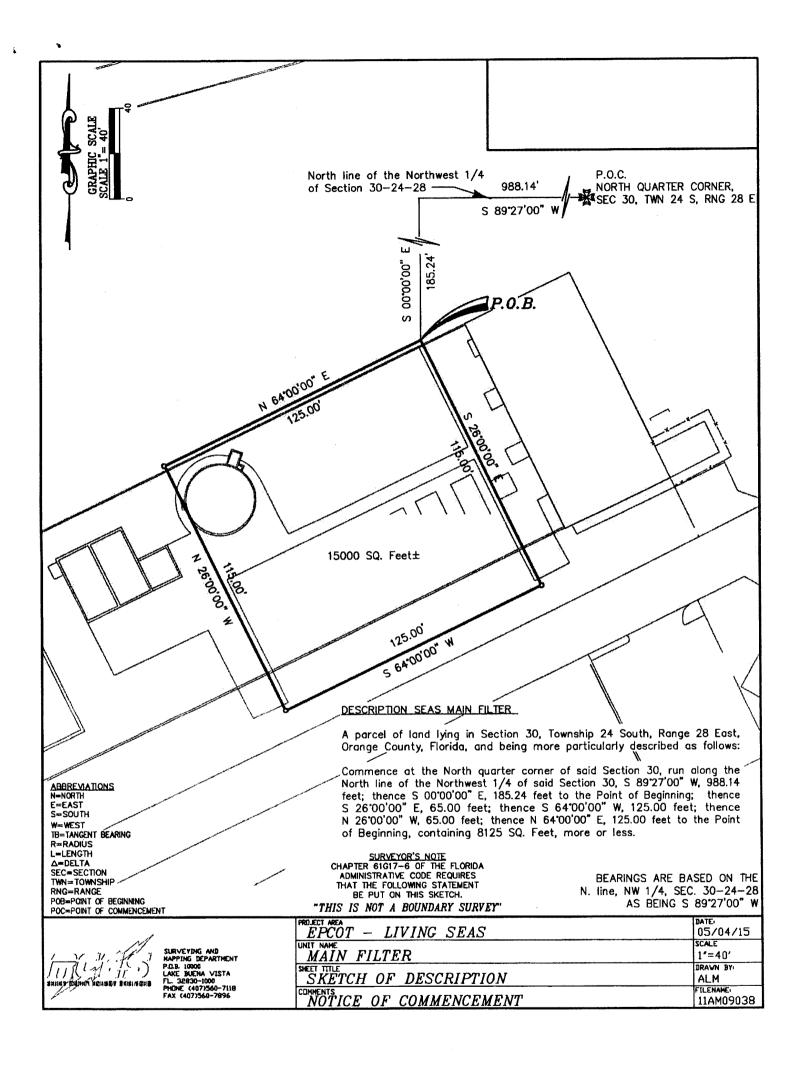
Permit Number:
Folio/Parcel Identification Number:
Prepared by and Return to:
Walt Disney World Resort - FAM
Attn: Amy Bates
P.O. Box 10000
Lake Buena Vista, FL 32830-1000

DOCH 20150232718 B: 10915 P: 9243 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



## NOTICE OF COMMENCEMENT

State of Florida, County of Orange						
	e undersigned hereby gives notice that improvement will be made to certain					
	apter 713, Florida Statues, the following information is provided in this Notice					
1.		dress if available)				
	See attached legal description					
2.	General description of improvement					
	General Construction					
3.	Owner information or Lessee information if the Lessee contracted for	r the improvement				
	Name Walt Disney World Resort					
	Address P.O. Box 10000, Lake Buena Vista, FL 32830					
	Interest in Property Owner					
	Name and address of fee simple titleholder (if different from Owner	isted above)				
	Name					
	Address	The second secon				
4.	Contractor					
	Name WW Gay Mechanical Contractor Inc	Telephone Number (407) 841-4670				
	Address 3220 West 39th Street, Orlando, FL 32839					
5.	Surety (if applicable, a copy of the payment bond is attached)					
	Name	Telephone Number				
	Address	Amount of Bond \$				
6.	Lender	•				
	Name	Telephone Number				
	Address	-				
7.	Persons within the State of Florida designated by Owner upon whom	notices or other documents may be				
	served as provided by Section 713.13(1)(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 re	ceive a copy of the Lienor's Notice as				
	provided by Section 713.13(1)(b), Florida Statutes.					
	Name Amy Bates	Telephone Number (407)560-6089				
	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 reco					
	01/01/2016	,				
WA	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATIO	N OF THE NOTICE OF COMMENCEMENT ARE				
CO	NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FL	ORIDA STATUTES, AND CAN RESULT IN YOUR				
	(ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY, A NOTICE OF COMMENCE) E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANC					
ATI	TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENC	CEMENT.				
	der penalty of perjury, I declare that I have read the foregoing notice o	f commencement and that the facts				
sta	ted in it are true to the best of my knowledge and belief.					
	0 0 11	A				
	Linux Bath Any BATES ASS	ac Project Mar FAM				
_		Printed Name/Title/Office				
l.e	ssee's Authorized Officer/Director/Partner/Manager					
Th	e foregoing instrument was acknowledged before me this day of	Ma 2NE my Amy Bates				
THE	e foregoing instrument was acknowledged before the this day of	molyway by Till Strates				
		·				
as	Authorized Signatory forfor	Walt Disney World Resort				
	Type of authority, d.g., officer, trustee, attorney in fact Name of party	on behalf of whom instrument was executed				
	1 1/1					
-	Signature of Notary Public - State of Florida Print, ty	pe, or stamp name of Notary Public				
	<b>Y</b>	•••••				
F	Personally Known OR Produced ID Notary Public State of Florida					
	<del></del> -	Kelly L Nobles				
1	ype of ID Produced	9 My Commission EE 220221 Expires 07/29/2016				
		TE - CIE SCA CVONGO OLI COLCO IO				



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

Signature of Notany Public - State of Florida

Personally Known Type of ID Produced OR Produced ID

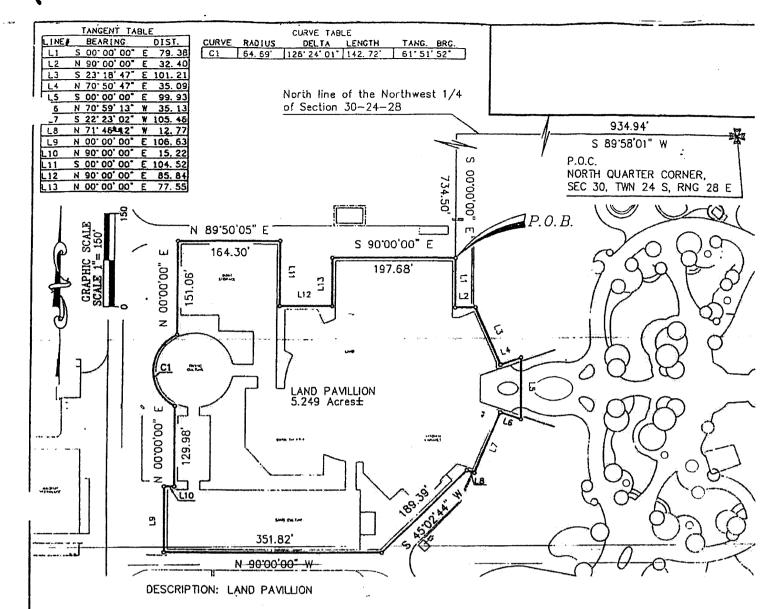
DOCH 20150232719 B: 10915 P: 9245 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



	NOTICE OF COMMENCEME	NT				
Sta	te of Florida, County of Orange					
	undersigned hereby gives notice that improvement will be made to certain	ain real property, and in accordance with				
Cha	apter 713, Florida Statues, the following information is provided in this No	otice of Commencement.				
1.						
	Land - see description					
2.	General description of improvement					
	Repair Work					
3.	Owner information or Lessee information if the Lessee contracted	for the improvement				
	Name Walt Disney World Resort					
	Address P.O. Box 10,000 Lake Buena Vista, FL 32830	The state of the s				
	Interest in Property Owner					
	Name and address of fee simple titleholder (if different from Own	er listed above)				
	Name					
	Address					
4.	Contractor					
	Name Smith, Broomfield & Howard Construct	Telephone Number 352-343-1390				
	Address 321 West Alfred Street, Tavares, FL 32778					
5.	Surety (if applicable, a copy of the payment bond is attached)					
	Name					
_	Address	Amount of Bond \$				
6.	Lender	The board Mark and				
	Name	Telephone Number				
-	Address					
7.	Persons within the State of Florida designated by Owner upon who	om notices or other documents may be				
	served as provided by Section 713.13(1)(b), Florida Statutes.	Telephone Number (407) 020 4624				
	Name Judy Wells, Facility Asset Management (FAM) Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	relephone Number (407) 939-4031				
я	In addition to himself or herself, Owner designates the following to	receive a conv of the Lienor's Notice as				
0.	provided by Section 713.13(1)(b), Florida Statutes.	receive a copy of the bioliof a flotion as				
		Telephone Number (407)560-4168				
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Annual An				
9.	Expiration date of notice of commencement (the expiration date m	av not be before the completion of construction				
	and final payment to the contractor, but will be 1 year from the date of re	·				
	09/30/2015	, ,				
WA	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRA	TION OF THE NOTICE OF COMMENCEMENT ARE				
	NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, (ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMEN					
THE	JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINA	INCING, CONSULT WITH YOUR LENDER OR AN				
ATT	ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMM	ENCEMENT.				
Hn	der penalty of perjury, I declare that I have read the foregoing notice	of commencement and that the facts				
sta	ted in it are true to the best of my knowledge and belief.					
		· 1A - 11 / Fraint				
/	with Kith TIMOTHY KE	EITH PROJECT MANAGER ASSET				
		ry's Printed Name/Title/Office				
Le	Lessee's Authorized Officer/Director/Partner/Manager					
TL.	e foregoing instrument was acknowledged before me this	May WK. Le. Royal				
I De	e foregoing instrument was acknowledged before me this day	month/user				
		monteyear				
as	Authorized Signatory for	Walt Disney World Resort				
	Type of authority, e.g., officer, trustee, attorney in fact Name of p	arty on behalf of whom instrument was executed				
	1 ) /					

Print, type, or stamp name of Notary Public

Notary Public State of Florida Kelly L Nobles My Commission EE 220221 Expires 07/29/2016



A parcel of land lying in Section 30, Township 24 South, Range 28 East, Orange County, Florida, and being more particularly described as follows:

Commence at the North Quarter corner of said Section 30, run along the North line of the Northwest 1/4 of said Section 30, S 89'58'01" W, 934.94 feet; thence S 00'00'00" E, 734.50 feet to the Point of Beginning; thence S 00'00'00" E, 79.38 feet; thence N 90'00'00" E, 32.40 feet; thence S 23'18'47" E, 101.21 feet; thence N 70'50'47" E, 35.09 feet; thence S 00'00'00" E, 99.93 feet; thence N 70'59'13" W, 35.13 feet; thence S 22'23'02" W, 105.46 feet; thence N 71'46'12" W, 12.77 feet; thence S 45'02'44" W, 189.39 feet; thence N 90'00'00" W, 351.82 feet; thence N 00'00'00" E, 106.63 feet; thence N 90'00'00" E, 15.22 feet; thence N 00'00'00" E, 129.98 feet, to a point on a non-tangent curve, concaved Easterly having a radius of 64.69 feet, and a central angle of 126'24'01", thence from a tangent bearing of N 61'51'52" W run Northerly along the arc of said curve, 142.72 feet; thence N 00'00'00" E, 151.06 feet; thence N 89'50'05" E, 164.30 feet; thence S 00'00'00" E, 104.52 feet; thence N 90'00'00" E, 85.84 feet; thence N 00'00'00" E, 77.55 feet; thence S 90'00'00" E, 197.68 feet, to the Point of Beginning, containing 5.249 Acres, more or less.

ABBREMATIONS
N=NORTH
E=EAST
S=SOUTH
M=WEST
NB=TANGENT BEARING
R=RADIUS
L=LENGTH
A=DELTA
SEC=SECTION
TWN=TOWNSHIP
RNG=RANGE
POB=POINT OF BEGINNING
"=POINT OF COMMENCEMENT

SURVEYOR'S NOTE
CHAPTER 61G17-5 OF THE FLORIDA
ADMINISTRATIVE CODE REQUIRES
THAT THE FOLLOWING STATEMENT
BE PUT ON THIS SKETCH.
"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE N. LINE OF SEC. 30 AS BEING S 89'58'01" W



REEDY CREEK ENERGY SERVICES, INC.

Survey Department
P.O. 80X 10000. Loke Bueno Vista, Florida 32830-1000
Idephone (497) 828-2506 Facsimile (407) 828-2260

ROLECT AREA

EPCOT CENTER / FUTURE WORLD

NIT HAME

LAND PAVILLION

HEET TITLE

NOTICE OF COMMENCEMENT

OMAIN BY:

MJP

PILENAME:

11MP9709

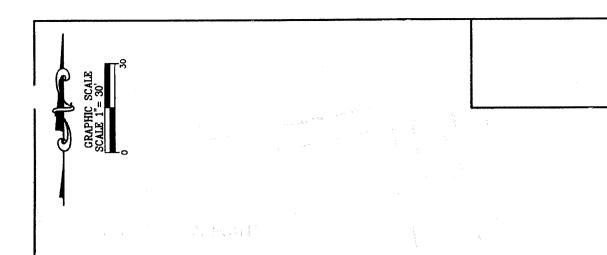
Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Tim Keith P.O. Box 10000 Lake Buena Vista, FL 32830-1000

DOC# 20150232720 B: 10915 P: 9247 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



State 6	of Florida,	County	/ of Orange
---------	-------------	--------	-------------

	NOTICE OF COM	MENCEMEN	•	
Sta	te of Florida, County of Orange			
The	e undersigned hereby gives notice that improvement will be	made to certain	real property, and in accordance wi	ith
	apter 713, Florida Statues, the following information is provi			
1.	Description of property (legal description of the proper	ty, and street a	ddress if available)	
	EC China - see description			
2.	General description of improvement			
	General Construction			
3.	Owner information or Lessee information if the Lessee	e contracted fo	r the improvement	
	Name Walt Disney World Resort			
	Address P.O. Box 10,000 Lake Buena Vista, FL 32830			
	Interest in Property Owner			
	Name and address of fee simple titleholder (if differe	≥nt from Owner	listed above)	
	Name			
	Address			
4.	Contractor			
	Name Smith, Broomfield & Howard Construct		Telephone Number 352-343-1390	)
	Address 321 West Alfred Street, Tavares, FL 32778	,		
5.	Surety (if applicable, a copy of the payment bond is attack	hed)		
	Name		Telephone Number	
	Address		Amount of Bond \$	
6.	Lender		,	
	Name		Telephone Number	1 - 20
	Address			
7.	Persons within the State of Florida designated by Own	ner upon whon	n notices or other documents may	be .
	served as provided by Section 713.13(1)(b), Florida Sta	atutes.		
	Name Judy Wells, Facility Asset Management (FAM)		Telephone Number (407) 939-463	31
	Address P.O. Box 10000, Lake Buena Vista, Florida 328			
8.	In addition to himself or herself, Owner designates the	following to r	eceive a copy of the Lienor's Noti	ce as
	provided by Section 713.13(1)(b), Florida Statutes.	_		
	Name Tim Keith		Telephone Number (407)560-416	8
	Address P.O. Box 10000, Lake Buena Vista, Florida 328	B30-1000	(	
9.	Expiration date of notice of commencement (the expiration	ration date may	not be before the completion of con	struction
	and final payment to the contractor, but will be 1 year from			
	09/30/20	015		
WA	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTE	R THE EXPIRATION	ON OF THE NOTICE OF COMMENCEMEN	T ARE
	NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SI			
	(ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTIC! E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO			
ATT	ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOT	TICE OF COMMEN	CEMENT.	
	don normalist of normalist bases that I have need the force		of	-4-
un sta	der penalty of perjury, I declare that I have read the fore ted in it are true to the best of my knowledge and belief	egoing notice of	or commencement and that the rac	CIS
	/ / /		1.0	IT WAS ASSOT
7	-1/4/	1/2 in	4 Project MANAGER	/ HACILIY TISSE!
1				MANAGEMEN
10	Signalure ଣ Owner or Lessee, or Owner's or ssee's Authorized Officer/Director/Partner/Manager	/ Signatory	s Printed Name/Title/Office	[ PANA OF
		- A	- L L Q	
The	e foregoing instrument was acknowledged before me this _	<b>_6</b> day of	May by Kyle K	est
			month/year	
	Authorized Signatory	far	Walt Disney World Resort	
as	Type of authority, e.g., officer, trustee, attorney in fact	for	y on behalf of whom instrument was execute	
	Type of authority, e.g., officer, trustee, attorney in fact	Name or part	y on benan of whom instrument was execute	·u
			•	
-	Signature of Notany Public Chate of Finding	Daint 1	woo or slown name of Notice Public	
	Signature of Notary Public - State of Fiorida	ennt, t	ype, or stamp name of Notary Public	<b>~~</b> ~∻
r	Personally Known X OR Produced ID	₹.	المراج ا	orida 🔾
*	Granding (Clown) OR Produced (U	₹.	₹ ▲ # Keliv L Nobles	<b>`</b>
T	ype of ID Produced	<b>5</b> 1	My Commission EE 2202	21 5
•	/ · · · · · · · · · · · · · · · · · · ·	>	Expires 07/29/2016	3
		-		



P.O.B.

1823.89'

N 90'00'00" W

WALL/ROOF P.O.B.

1823.89'

N 90'00'00" W

East line of the Northeast 1/4 of Section 30-24-28

DESCRIPTION: RESTROOMS

A parcel of land lying in Section 30, Township 24 South, Range 28 East, Orange County, Florida, and being more particularly described as follows:

Commence at the East Quarter corner of said Section 30, run along the East line of the Northeast 1/4 of said Section 30, N 00°55'31" E, 283.41 feet; thence N 90°00'00" W, 1823.89 feet to the Point of Beginning; thence S 11°57'07" E, 27.72 feet; thence S 78°02'53" W, 41.11 feet; thence N 11°57'07" W, 27.72 feet; thence N 78°02'53" E, 41.11 feet, to the Point of Beginning, containing 1140 SQ. Feet, more or less.

ABBREMATIONS
N=NORTH
E=EAST
S=SOUTH
W=WEST
TB=TANGENT BEARING
R=RADIUS
L=LENGTH
A=DELTA
SEC=SECTION
TWN=TOWNSHIP
RNG=RANGE
POB=POINT OF BEGINNING
POC=POINT OF COMMENCEMENT

P.O.C. EAST QUARTER CORNER, SEC 30, TWN 24 S, RNG 28 E

SURVEYOR'S NOTE
CHAPTER 61G17-6 OF THE FLORIDA
ADMINISTRATIVE CODE REQUIRES
THAT THE FOLLOWING STATEMENT
BE PUT ON THIS SKETCH.
"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE E. LINE OF SEC. 30 AS BEING N 00'55'31" E

283.41



SURVEYING AND MAPPING DEPARTMENT P.O.B. 10000 LAKE BUENA VISTA FL. 32830-1000 PHONE (407)560-7118 FAX (407)560-7896

EPCOT - CHINA PAVILION	DATE: 05/20/08
NINE DRAGONS WALL AND ROOF REFURB	SCALE 1"=30'
SKETCH OF DESCRIPTION	DRAWN BY: ALM
COMMENTS NOTICE OF COMMENCEMENT	FILENAME: 11AMO8133

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

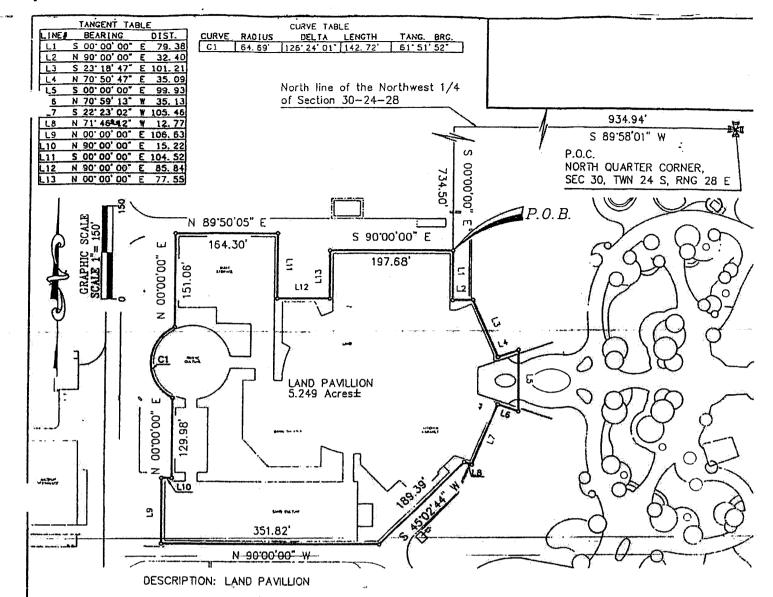
Personally Known \_\_\_\_\_\_ OR Produced ID \_\_

Type of ID Produced

DOC# 20150232721 B: 10915 P: 9249 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL DISNEY WORLD CO FACI MB - Ret To: WALT DISNEY WORLD CO FACI 

	NOTICE OF COMMENCEMEN	T	
Sta	ate of Florida, County of Orange		
	e undersigned hereby gives notice that improvement will be made to certain	n real property, and in accordance with	
	apter 713, Florida Statues, the following information is provided in this Notice		
	Description of property (legal description of the property, and street a		
	Land - see description		
2.	General description of improvement		
_,	HVAC		
3.	Owner information or Lessee information if the Lessee contracted for	or the improvement	
	Name Walt Disney World Resort		
	Address P.O. Box 10,000 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 Lo Temp Engineering	Telephone Number (407) 654-4055	
	Address 1001 Crown Park Circle, Winter Garden , FL 32787		
5.	Surety (if applicable, a copy of the payment bond is attached)		
	Name	Telephone Number	
	Address	Amount of Bond \$	
6.	Lender		
	Name	Telephone Number	
	Address	and the second s	
7.	Persons within the State of Florida designated by Owner upon whom	n 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 r	receive a copy of the Lienor's Notice as	
	provided by Section 713.13(1)(b), Florida Statutes.	~	
	Name Tim Keith	Telephone Number (407)560-4168	
_	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000		
9.	Expiration date of notice of commencement (the expiration date may		
	and final payment to the contractor, but will be 1 year from the date of rec	ording unless a different date is specified)	
	09/30/2015		
PA TH	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION INDERCOMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FIVING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENDED BY SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANT ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENTAL PROPERTY.	LORIDA STATUTES, AND CAN RESULT IN YOUR EMENT MUST BE RECORDED AND POSTED ON CING, CONSULT WITH YOUR LENDER OR AN	
Un sta	der penalty of perjury, I declare that I have read the foregoing notice of the distribution it are true to the best of my knowledge and belief.	<b>.</b>	
1	with Keith Timothy Keith	Project MANAGER   FACILITY Printed Name/Title/Office   MANAGEMENT	7
l e	Signature of Owner or Lessee, or Owner's or Signatory ssee's Authorized Officer/Director/Partner/Manager	ra Printed Name/Title/Office	1
	e foregoing instrument was acknowledged before me this 6th day of		
as	Authorized Signatory for	Walt Disney World Resort	
		ty on behalf of whom instrument was executed	
	Z	,	
-	Signature of Notary Public - State of Florida Print L	tyge, or stamp pame of Notary Public	

Notary Public State of Florida Kelly L Nobles My Commission EE 220221 Expires 07/29/2016



A parcel of land lying in Section 30, Township 24 South, Range 28 East, Orange County, Florida, and being more particularly described as follows:

Commence at the North Quarter corner of said Section 30, run along the North line of the Northwest 1/4 of said Section 30, S 89'58'01" W, 934.94 feet; thence S 00'00'00" E, 734.50 feet to the Point of Beginning; thence S 00'00'00" E, 79.38 feet; thence N 90'00'00" E, 32.40 feet; thence S 23'18'47" E, 101.21 feet; thence N 70'50'47" E, 35.09 feet; thence S 00'00'00" E, 99.93 feet; thence N 70'59'13" W, 35.13 feet; thence S 22'23'02" W, 105.46 feet; thence N 71'46'12" W, 12.77 feet; thence S 45'02'44" W, 189.39 feet; thence N 90'00'00" W, 351.82 feet; thence N 00'00'00" E, 106.63 feet; thence N 90'00'00" E, 15.22 feet; thence N 00'00'00" E, 129.98 feet, to a point on a non-tangent curve, concaved Easterly having a radius of 64.69 feet, and a central angle of 126'24'01", thence from a tangent bearing of N 61'51'52" W run Northerly along the arc of said curve, 142.72 feet; thence N 00'00'00" E, 151.06 feet; thence N 89'50'05" E, 164.30 feet; thence S 00'00'00" E, 104.52 feet; thence N 90'00'00" E, 85.84 feet; thence N 00'00'00" E, 77.55 feet; thence S 90'00'00" E, 197.68 feet, to the Point of Beginning, containing 5.249 Acres, more or less.

SURVEYOR'S NOTE
CHAPTER 61G17-6 OF THE FLORIDA
ADMINISTRATIVE CODE REQUIRES
THAT THE FOLLOWING STATEMENT
BE PUT ON THIS SKETCH.
"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE N. LINE OF SEC. 30 AS BEING S 89'58'01" W



EPCOT CENTER / FUTURE WORLD	2/11/97
JNT HAME  LAND PAVILLION	1"=150'
NOTICE OF COMMENCEMENT	DRAWN BY: MUP
COMMENTS	PLENAME: 11MP9709

Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Sterling Langley P.O. Box 10000 DOC# 20150232722 B: 10915 P: 9251 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



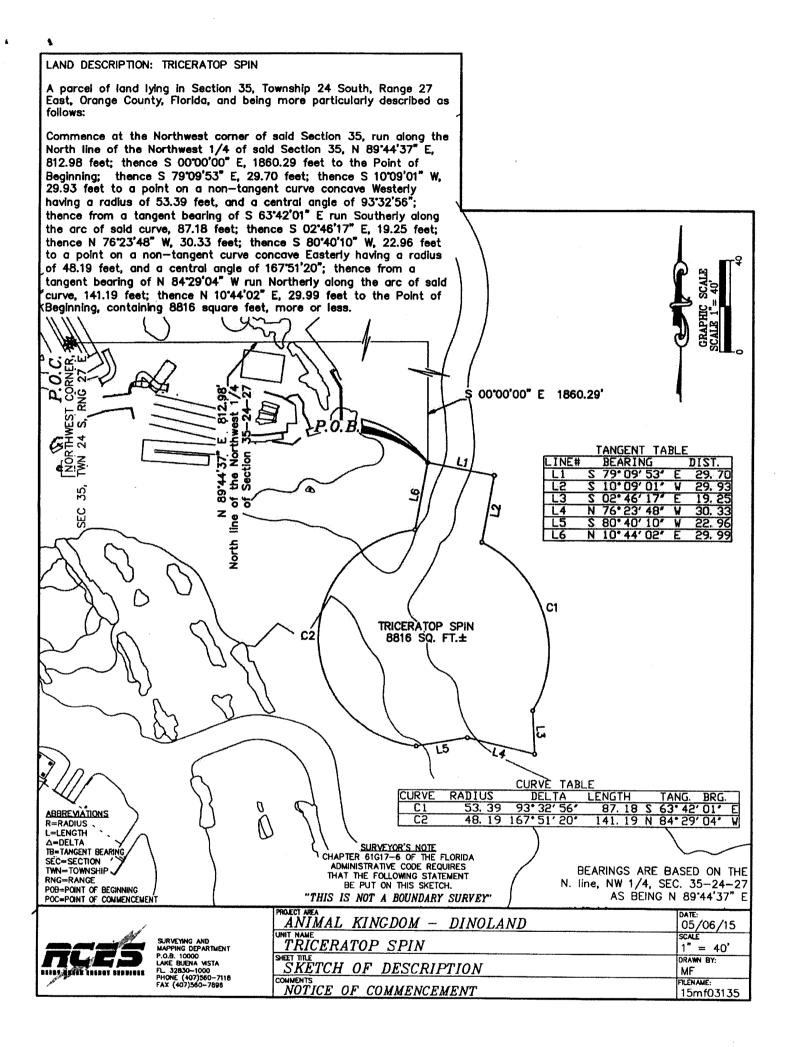
### NOTICE OF COMMENCEMENT

State of Florida, County of Orange

Lake Buena Vista, FL 32830-1000

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance w
Chapter 713, Florida Statues, the following information is provided in this Notice of Commencement.

chapter 713, Florida Statues, the following thiormation is pr	ovided in this notice of Commencement,						
1. Description of property (legal description of the prop							
See Attached Legal Description							
2. General description of Improvement							
Painting							
3. Owner information or Lessee information if the Less	see contracted for the improvement						
Name Walt Disney World Resort							
Address P.O. Box 10000, Lake Buena Vista, FL 3283	0						
Interest in Property Owner							
Name and address of fee simple titleholder (if diffe	erent from Owner listed above)						
Name							
Address							
. Contractor							
Name MLC THEMING INC	Telephone Number 407-812-6616						
Address 2700 Bonnet Creek Road, Lake Buena Vista	, FL 32830						
5. Surety (if applicable, a copy of the payment bond is atta	ached)						
Name	Telephone Number						
Address	Amount of Dond &						
5. Lender	***************************************						
Name	Telephone Number						
Address							
<ol> <li>Persons within the State of Florida designated by O</li> </ol>	wner upon whom notices or other documents may be						
served as provided by Section 713.13(1)(b), Florida S	Statutes.						
Name Judy Wells, Facility Asset Management (FAM)	Telephone Number (407) 939-4631						
Address P.O. Box 10000, Lake Buena Vista, Florida 3	32830-1000						
<ol><li>In addition to himself or herself, Owner designates t</li></ol>	he following to receive a copy of the Lienor's Notice as						
provided by Section 713.13(1)(b), Florida Statutes.							
Name Sterling Langley	Telephone Number						
Address P.O. Box 10000, Lake Buena Vista, Florida 3							
	piration date may not be before the completion of construction						
and final payment to the contractor, but will be 1 year fro	m the date of recording unless a different date is specified)						
VARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, AYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOT HE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND INTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NUTBER OF THE PROPERTY OF THE PROPERT	SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR ICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN OTICE OF COMMENCEMENT.						
	Bens Lune / Pus/ Fam						
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager	Signatory's Printed Name/Title/Office						
he foregoing instrument was acknowledged before me this	day of Masous, by Brad Lunte						
s Authorized Signatory	for Walt Disney World Resort						
Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed						
Signature of Notaly Public - State of Florida	Print, type, or stamp name of Notary Public						
Personally Known OR Produced ID  Type of ID Produced	Notary Public State of Florida Kelly L Nobles My Commission EE 220221						
	> 'Pofnot' Expires 07/29/2016						



Permit Number:

Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Tim Keith P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150232723 B: 10915 P: 9253 05/07/2015 12:58:54 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

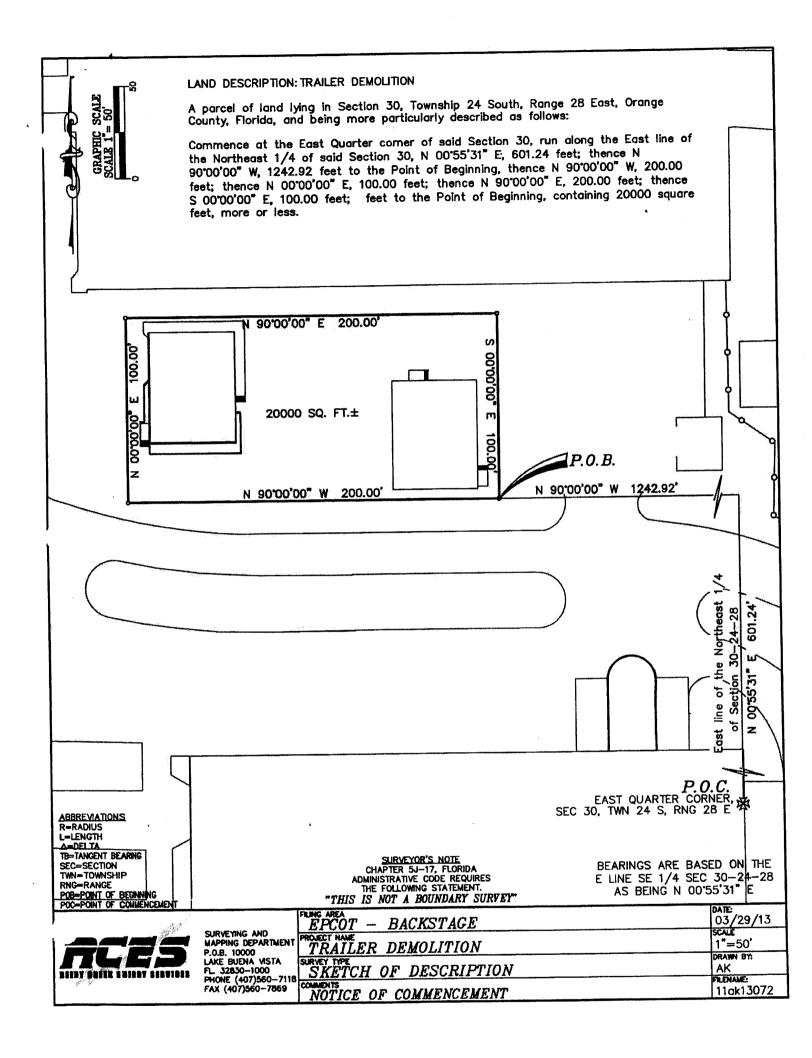


# NOTICE OF COMMENCEMENT

State of Florida, County of Orange

The undersig	ned here	eby gives	notice that impro-	vement will be made	to certain real p	property, and in a	ccordance with
Chapter 713.	Florida:	Statues, t	he following infor	mation is provided in	this Notice of C	Commencement.	

Chi 1	apter 713, Florida Statues, the following information is provide Description of property (legal description of the property		
•	Epcot - see description	· ·	
2.	General description of improvement		
	Demolition  Owner Information or Lessee Information if the Lessee		
3.	Name Walt Disney World Resort	e contracted for the improvement	
	Address PO Box 10,000 Lake Buena Vista, FL 32830		
	Interest in Property Owner		
	Name and address of fee simple titleholder (if differe		
	Address		
4.	Contractor		
	Name Southeast Abatement Services Inc	Telephone Number 727-530-3038	
	Address 14584 66th Street N, Clearwater, FL 33764		
5.	Surety (if applicable, a copy of the payment bond is attach Name	hed) Telephone Number	
	Address	Amount of Bond \$	
3.	Lender	And the second s	•
	Name	Telephone Number	
	Address		
7.	•		
	served as provided by Section 713.13(1)(b), Florida Sta	atutes.	
	Name Judy Wells, Facility Asset Management (FAM)		
	Address P.O. Box 10000, Lake Buena Vista, Florida 328		
8.	In addition to himself or herself, Owner designates the	e following to receive a copy of the Lienor's Notice as	
	provided by Section 713.13(1)(b), Fiorida Statutes.		
	Name Tim Kelth	Telephone Number (407)560-4168	
_	Address P.O. Box 10000, Lake Buena Vista, Florida 328		
9.		ration date may not be before the completion of construction	
	and final payment to the contractor, but will be 1 year from		
	09/30/20		
PAY	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTEI NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SE TING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE I JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOT	ECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR E OF COMMENCEMENT MUST BE RECORDED AND POSTED ON D OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN	
Jn sta	der penalty of perjury, I declare that I have read the fore ted in it are true to the best of my knowledge and belief	<u>.</u>	
		Signatory's Printed Name/Tille/Office	FACILITY
Les	Signature of Owfrier or Lessee, or Owner's or see's Authorized Officer/Director/Partner/Manager	Signatory's Printed Name/Tille/Office	MANAGEMENT
Γhe	e foregoing instrument was acknowledged before me this		7-171
35	Authorized Signatory	for Walt Disney World Resort	
	Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed	
-	Signature of Notan Public - State of Florida	Print, type, or stamp name of Notary Public	
		······	ዏ
P	ersonally Known OR Produced ID	Notary Public State of Florida	}
т	ype of ID Produced	Kelly L Nobles My Commission EE 220221	<b>{</b>
		> ်ာ <sub>ဝ</sub> ို <sub>လ</sub> ေ Expires 07/29/2016	Ş



Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM

Attn: Richard Goss P.O. Box 10000

Lake Buena Vista, FL 32830-1000

Document Number: 2015 008 1813 Book Number: 10876
Page Number: 4178

# AMENDMENT TO

	NOTICE OF COMMENCEMEN	1			
Sta	ite of Florida, County of Orange				
	e undersigned hereby gives notice that improvement will be made to certain	n real property, and in accordance with		303Z	<b>0</b>
	apter 713, Florida Statues, the following information is provided in this Noti				۳Ř
1.	Description of property (legal description of the property, and street a			1257	9#
	See attached legal description		===	20 0 0 0 0	220
2	General description of improvement		36	က္ဝဝ	01
	Paving			리트 포함	
3.	Owner information or Lessee information if the Lessee contracted for	or the improvement	32		23
<b>.</b>	Name Walt Disney World Resort			P 16	ខ្លួ2
			36	-1 L.	54
	Interest in Property Owner			ם S	45
	Name and address of fee simple titleholder (if different from Owner	r listed above)		S a	골:
	Name	,		)ISNEY	-12
	Address			Comptrolle	109 Pag
1	Contractor			WORLD	)15 ge
7.	N POEEEOEE MATERIAL	Telephone Number 407-343-7445		<b>b</b> '	~ ₽
	Address 2710 Michigan Ave, Kissimmee, FL 34744			8	ð
5	Surety (if applicable, a copy of the payment bond is attached)			П	9255
٥.		Telephone Number		R	Ü
		A A	===	H	•
2	Lender	Amount of Bond \$			
٥.		Telephone Number			
	NameAddress				
7	Persons within the State of Florida designated by Owner upon whor	m notices or other documents may be			
٠.	served as provided by Section 713.13(1)(b), Florida Statutes.	in notices of other documents may be			
	Name Judy Wells, Facility Asset Management (FAM)	Telephone Number (407) 939-4631			
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Telephone Hamber (407) 333-4301			
R	In addition to himself or herself, Owner designates the following to	receive a conv of the Lienor's Notice as			
	provided by Section 713.13(1)(b), Florida Statutes.	icconta a copy or and aronor o mondo as			
	Name Richard Goss	Telephone Number (407)828-2205			
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Total trained			
	Expiration date of notice of commencement (the expiration date may	v not be before the completion of construction			
٠.	and final payment to the contractor, but will be 1 year from the date of rec				
	09/30/2015	soroning armoso a amoroni dato to opcomed,			
A/A	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION	ON OF THE NOTICE OF COMMENCEMENT ARE			
COI	NSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, F	LORIDA STATUTES, AND CAN RESULT IN YOUR			
	YING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCE E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINAN				
	TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMEN				
	der penalty of perjury, I declare that I have read the foregoing notice	of commencement and that the facts			
sta	ited in it are true to the best of my knowledge and belief.	<b>A</b>			
		100.01-0.0			
	When Other Dichard C	DOSS FOMH FAMI			
		s's Printed Name/Title/Office			
Les	ssee's Authorized Officer/Director/Partner/Manager				
The	e foregoing instrument was acknowledged before me this	May 2 work > hand Criss			
	y is regardly managed bors of the time ody of	morth/year			
	Authorized Circoton	Well Dieser Westel Desert			
as .	Authorized Signatory for	Walt Disney World Resort			
	Type of authority, e.g., officer, trustee, attorney in fact  Name of par	ty on behalf of whom instrument was executed			
	$\wedge$ $\wedge$ $\wedge$				
_					
	Signature of Notary Public - State of Florida Print, t	type, or stamp name of Notary Public			
Р	Personally Known OR Produced ID	Notary Public State of Florida			
		Kelly L Nobles My Commission EE 220221			
T	Type of ID Produced 2 3	My Commission EE 22022 Expires 07/29/2016			
		<b>,</b>			

