Folio/Parcel Identification Number:

Prepared by:

Return to:

Eric Ricketson

1780 Avenue of the Stars Lake Buena Vista Fl. 32830

DOC # 20150370275 B: 10952 P: 8918 07/20/2015 10:44 AM Page 1 of 2 Rec Fee: \$18.50 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00 Martha O. Haynie, Comptroller

Orange County, FL Ret To: SIMPLIFILE LC

NOTICE	OF	COMMENCEMENT
State of Flo	\rida	County of Orange

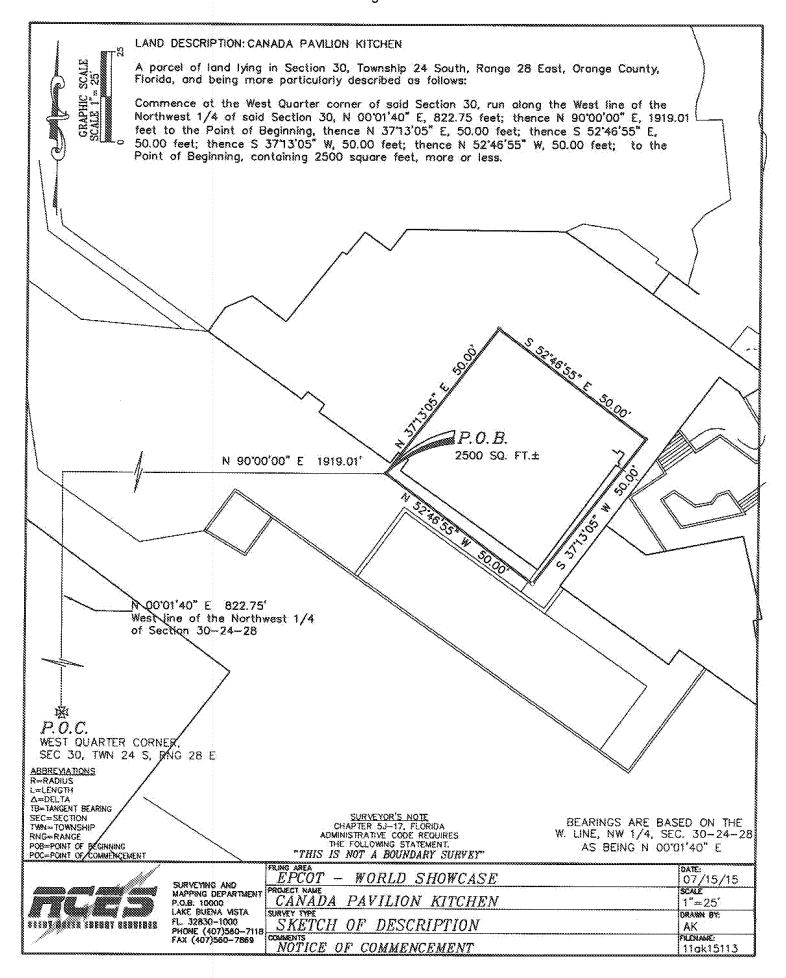
The undersigned bereity of Orange	ovement(s) will be made to certain real property, and in accordance with Chapter			
713, Florida Statutes, the following information	is provided in this Notice of Commencement			
7 13, Florida Statutes, the tollowing anormation	n of the property and street address if available)			
Description of property (legal description of the property, and street address if available) Canada Le Cellier kitchen (See Attached leagal description)				
2. General description of improvement(s)				
Replacement of rusted gas pipe from gas	s regulator to dish machine			
3. Owner information				
Name Walt Disney world	Telephone Number			
Address P.O. Box 10000 Lake Buena Vista	Interest in Property			
4 Fee Simple Title Holder (if other than ow	vner shown above)			
Name N/A	Telephone Number			
Address				
5. Contractor				
Name Heichel Plumbing	Telephone Number 407-656-7073			
Address 647 Business Park Blvd. Winter Gard	en, Fl. 34787			
6. Surety (if any)				
Name N/A	Telephone Number			
Address	Amount of bond \$			
7 I ander (if any)				
Name N/A	Telephone Number			
Addrage				
8. Persons within the State of Florida des	ignated by Owner upon whom notices or other documents may be served a			
provided by §713.13(1)(a)7, Florida Sta	tutes.			
Name Dave Ellis Procurment Services	Telephone Number <u>407-828-3550</u>			
Address P.O. Box 10000 Lake Buena Vista Fl.	32830			
	r designates the following to receive a copy of the Lienor's Notice as			
provided in §713.13(1)(b), Florida Statu	ites.			
Name Steve Burns	Telephone Number 407-560-6688			
Address P.O. Box 10000 Lake Buena Vista Fl.	32830			
10. Expiration date of notice of commence	ment (the expiration date is one year from the date of recording unless a different			
date is specified)				
WARNING TO OWNER: ANY PAYMENTS MADE BY T	HE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE			
CONSIDERED IMPROPER PAYMENTS UNDER CHAP	IER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE			
REPORE THE SIRST INSPECTION. IF VOII INTEND TO	OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTURNEY BEFORE			
COMMENCINGAVORK OR RECORDING YOUR NOTIC	CE OF COMMENCEMENT. STOJE BULLIS DILECTOL GUL- SVOS			
11.	STBIC DOMES MASSICAL GRASS SINCE			
(or Owner Authorized Officer/Director/Partner/Manager	Signatory's Printed Name(1) me/Omice			
(or Owner & Willhoused Shillice In his cross-a supering was safe.	4 10 10 1 10 10 10 10 10 10 10 10 10 10 1			
The foregoing instrument was acknowledged by	pefore me this day of July 2000 Stute Gut YS			
Mensing M	_for(month/year) (name of person)			
	(Name of party on behalf of whom instrument was executed)			
(Tiple of authority, e.g., officer, trustee, attorney in fact)	(reasine of party on behalf of whom kishoment was exception)			
Signature of Notary Public – State of Florida	(Print, type, or stamp commissioned name of Notary Public)			
Personally Known OR Pr	oduced ID			
Type of ID Produced				
	to the second state of the second			
Verification pursuant to Section 92.525, Florida Statut- in it are true to the best of my knowledge and belief.	es: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated			
in it ale wife in the near Willish with and a sun naugr.				
driver the state of the state o				

Signature of Natural Person Signing on Line 11-Above

Form Revised: 11/20/07



Allison Richards My Commission FF 130554 Expires 07/02/2018



	DOC # 20150373100 B: 10953 P: 6398 07/21/2015 09:49 AM Page 1 of 1
Permit Number	D E #10.00
Permit Number: Folio/Parcel Identification Number:	Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00
Prenared hv: Mana McCabe	Intendible Tay: \$0.00
Buena Vista Construction Company	Martha O. Haynie, Comptroller
	Orange County, FL
Return to: P.O. Box 10000, Lake Buena Vista, FL 32830	Ket 10. SIMPLIFILE LC
	······
NOTICE OF COMM	RENCEMENT
State of Florida, County of Orange	a made to contain coal property, and in apparedance
The undersigned hereby gives notice that improvement will be with Chapter 713, Florida Statutes, the following information	
Description of property (legal description of the property)	
EC Puffins Roost, 1600 Avenue of the Stars, LBV, FL. 3	32830 JMEC5062
2. General description of improvement	
Provide labor, material and/or electrical for construction	
3. Owner information or Lessee information if the Lesse	
Name Walt Disney World Resort Address P.O. Box 10000, Lake Buena Vista, FL 32830	
Interest in Property	
Name and address of fee simple titleholder (if differen	it from Owner listed above)
Name	
Address	
4. Contractor	Talanhana Number 407-934-6070
Name Buena Vista Construction Company Address P.O. Box 10000, Lake Buena Vista, FL 32830	relephone Number 407-304-0070
Surety (if applicable, a copy of the payment bond is attact	hed)
Name	Telephone Number
Address	Telephone NumberAmount of Bond \$
6. Lender	
Name	Telephone Number
Address 7. Persons within the State of Florida designated by Ow	mar unan uham natione ar athar danimente may
be served as provided by §713.13(1)(a)7, Florida State	nier upon whom houces or other documents may
Name Dave Ellis, Mgr, Sourcing & Procurement	Telephone Number 407-828-3582
Address P.O. Box 10000, Lake Buena Vista, FL 32830	
8. In addition to himself or herself, Owner designates the	
Notice as provided in §713.13(1)(b), Florida Statutes.	T / 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name David Caesar, Construction Manager Address P.O. Box 10000, Lake Buena Vista, Florida 328	Telephone Number 407-934-6070
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 the date of recording unless a
different date is specified)	
· · · · · · · · · · · · · · · · · · ·	
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTE ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PA	
RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PR	OPERTY, A NOTICE OF COMMENCEMENT MUST BE
RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INS WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WO	PECTION, IF YOU INTEND TO OBTAIN FINANCING, CONSULT BY OR RECORDING YOUR NOTICE OF COMMENCEMENT
WITH TOUR LENDER OR AN ACCORNET BEFORE COMMENCING WO	ALCONDING LOOK HOTICE OF COMMENCEMENTS
Under penalty of perjury, I declare that I have read the fo	regoing notice of commencement and that the
facts stated in it are true to the best of my knowledge an	d belief.
	Divoctor
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/D	Director irector/PartneriManager Signatory's Title/Office
Signature of Course of Lessee, of Contents of Lessee & Administration Contents	net the accommensation of the control of the contro
The foregoing instrument was acknowledged before me this	21 day of July 15 by Tom Troffer
	month/year name of person
as <u>Director</u> for Type of authority, e.g., officer, trustee, attorney in fact	Buena Vista Construction Company Name of party on behalf of whom instrument was executed
and or approved, was, ornicer, trustee, automety in raci	· ·
VIIIVA ILCON	Maria McCabe Eript type, or stamp commissioned name of Notary Public
Signature of Notary Public – State of Florida	* * * * * * * * * * * * * * * * * * *
Personally Known X OR Produced ID	Solution Notary Public State of Florida
Type of ID Produced	Maria McCabe My Commission FF 082922
	The same of the sa

Permit Number	DOC # 20150373158 B: 10953 P: 6511 07/21/2015 09:55 AM Page 1 of 1 Rec Fee: \$10.00
Permit Number:Folio/Parcel Identification Number:	Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00
Prepared by: Maria McCabe	Intangible Tax: \$0.00
Buena Vista Construction Company	Martha O. Haynie, Comptroller Orange County, FL
Return to: P.O. Box 10000, Lake Buena Vista, FL 32830	Ret To: SIMPLIFILE LC
Return to: P.O. Box 10000, Lake Edena Vista, 1 L 02000	
NOTICE OF COMMENCEN	IENT
State of Florida, County of Orange The undersigned hereby gives notice that improvement will be made to with Chapter 713, Florida Statutes, the following information is provided 1. Description of property (legal description of the property, and street of the State of the Stat	d in this Notice of Commencement. et address if available)
OT Monorail , 1300 Avenue of the Stars 2. General description of improvement	010022
Provide labor, material and/or electrical for construction	
3. Owner information or Lessee information if the Lessee contrac	ted for the improvement
Name Walt Disney World Resort	
Address P.O. Box 10000, Lake Buena Vista, FL 32830 Interest in Property	
Name and address of fee simple titleholder (if different from Ow	ner listed above)
Name	
Address	
Contractor Name Buena Vista Construction Company	Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, FL 32830	Telephone Number_107 Co 1 Co 7 Co
5. Surety (if applicable, a copy of the payment bond is attached)	
Name	_Telephone Number
Address	Amount of Bond \$
6. Lender	_Telephone Number
NameAddress	_ rotophone (varibo)
7. Persons within the State of Florida designated by Owner upon	whom notices or other documents may
be served as provided by §713.13(1)(a)7, Florida Statutes.	
Name Dave Ellis, Mgr, Sourcing & Procurement Address P.O. Box 10000, Lake Buena Vista, FL 32830	_Telephone Number 407-828-3582
8. In addition to himself or herself, Owner designates the following	ng to receive a copy of the Lienor's
Notice as provided in §713.13(1)(b), Florida Statutes.	
Name Shawn M Holmes, Construction Manager	Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, Florida 32830	may not be before the completion of
 Expiration date of notice of commencement (the expiration date construction and final payment to the contractor, but will be 1 year 	from the date of recording unless a
different date is specified)	none and details and an analysis and a
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPLARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR REC	ON 713.13, FLORIDA STATUTES, AND CAN NOTICE OF COMMENCEMENT MUST BE FYOU INTEND TO OBTAIN FINANCING, CONSULT ORDING YOUR NOTICE OF COMMENCEMENT.
Under penalty of perjury, I declare that I have read the foregoing refacts stated in it are true to the best of my knowledge and belief.	notice of commencement and that the
	Director
Signature of Owner or Lesses, or Owner's or Lesses's Authorized Officer/Director/Partn	er/Manager Signatory's Title/Office
The foregoing instrument was acknowledged before me this 16 day	of July 15 by Tom Troffer
	month/year name of person
	ista Construction Company party on behalf of whom instrument was executed
	•
Signature of Notary Public – State of Florida Maria Mi	s: State Same serioned name of Notary Public
Notary Public	State of Florida
Personally Known X OR Produced ID Maria McCa My Commission Type of ID Produced	on FF 082922

Permit Number: Folio/Parcel Identification Number: Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Jon Ruth P.O. Box 10000

Lake Buena Vista, FL 32830-1000

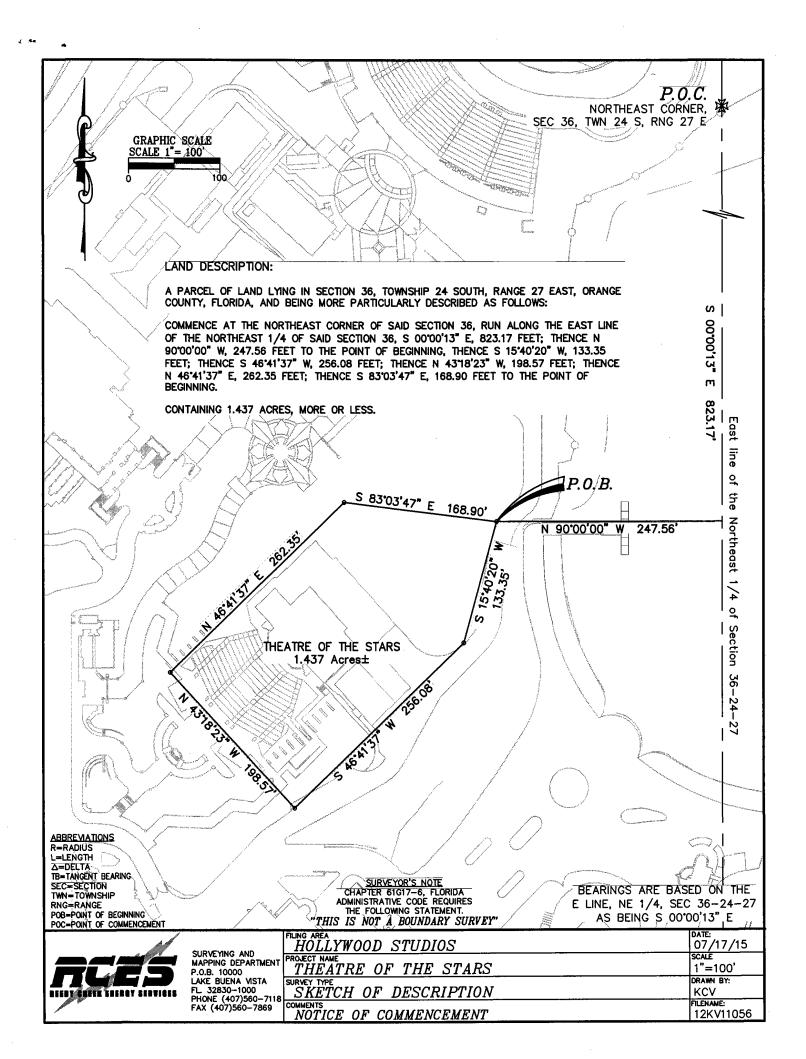
DOC# 20150374011 B: 10953 P: 8778 07/21/2015 12:24:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



NOTICE OF COMMENCEMENT

State of Florida, County of Orange

	the undersigned hereby gives notice that improvement will be made to certain	• • •	rdance with
	Chapter 713, Florida Statues, the following information is provided in this Notice		
1.	 Description of property (legal description of the property, and street ad- 4038292 See Attached 	dress if available)	
2	General description of improvement		
۷.	Roofing		
3	Owner information or Lessee information if the Lessee contracted for	the improvement	
٥.	Name Walt Disney World Resort	the improvement	
	Address B.O. Box 10000 Lake Buone Viete El 20020		
	Interest in Property Owner		
	Name and address of fee simple titleholder (if different from Owner li	sted above)	
	Name		<u> </u>
	Address		
4.	Contractor		
	Name Neth & Son Inc	Telephone Number 407-	855-9096
	Address 360 E Landstreet Rd, Orlando, FL 32824		
5.	Surety (if applicable, a copy of the payment bond is attached)		
	Name	Telephone Number	1
	Address	Amount of Bond \$	
6.	. Lender		
	Name	_Telephone Number	<u>:</u>
-,	Address		
7.	Persons within the State of Florida designated by Owner upon whom	notices or other docum	ents may be
	served as provided by Section 713.13(1)(b), Florida Statutes. Name Judy Wells, Facility Asset Management (FAM)	Tolophono Number (407	N 030 4631
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	relephone Number (407) 939-4031
8	8. In addition to himself or herself, Owner designates the following to re	ceive a conv of the Lien	or's Notice as
٥.	provided by Section 713.13(1)(b), Florida Statutes.	ceive a copy of the Elen	
	Name Jon Ruth	Telephone Number (407	'\828-3159
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	_ 1010p110110 114111201 <u>(101</u>	70-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
9.	9. Expiration date of notice of commencement (the expiration date may	not be before the completi	ion of construction
	and final payment to the contractor, but will be 1 year from the date of reco		
	10/30/2015		
COI PAY THE	VARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLIVAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENTS OF STREET OF THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCEMENT OF THE FIRST INSPECTION.	ORIDA STATUTES, AND CAN I MENT MUST BE RECORDED A ING, CONSULT WITH YOUR	RESULT IN YOUR AND POSTED ON
	Inder penalty of perjury, I declare that I have read the foregoing notice of tated in it are true to the best of my knowledge and belief.	f commencement and th	
_	J-KM-00 James	K. Marsh	a / Project Manage
Le	Signature of Owner or Lessee, or Owner's or Signatory's Lessee's Authorized Officer/Director/Partner/Manager	Printed Name/Title/Office	11 11
The	The foregoing instrument was acknowledged before me thisday of	month/year by Jame	3 MARShall
as	Authorized Signatory for	Walt Disney World Resort	t
		on behalf of whom instrument v	vas executed
-	Signature of Notary Public - State of Florida Print, by	pe, or stamp name of Notary Pu	****
F	Personally Known OR Produced ID Start	Notary Public State of Kelly L Nobles My Commission EE 2	{
7	Type of ID Produced	್ಲಿಂ ^{ಸ್} Expires 07/29/2016	\$



Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Donna Colburn P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOCR 20150374012 B: 10953 P: 8780 07/21/2015 12:24:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

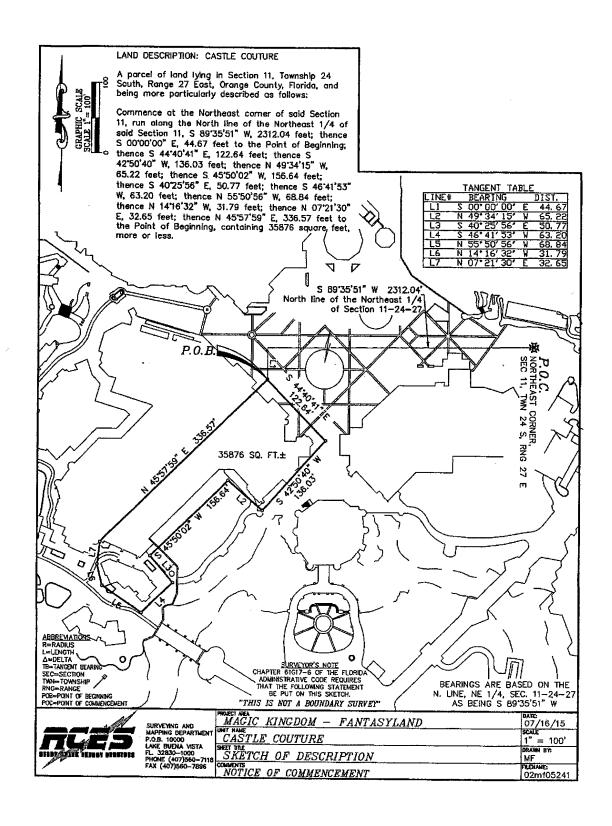


NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

	s, the following information is pr	
		perty, and street address if available)
General description of	er ATTacked.	
Construction	i improvement	
	Lassas information if the Las	see contracted for the improvement
	World Resort	see contracted for the improvement
	000, Lake Buena Vista, FL 3283	20
Interest in Property (30
		ferent from Owner listed above)
Name	a ree sumple unenolder (it off	letent from Owner listed above)
Address		
Contractor		
Name MLC THEMIN	G INC	T-lhal b
	t Creek Road, Lake Buena Vista	Telephone Number
	copy of the payment bond is at	
Name	copy of the payment bond is an	
Address		Telephone Number
Lender		Amount of Bond \$
Name		
Address		Telephone Number
	do of Clautal al	
eisons within the Sta	ite of Florida designated by O Section 713.13(1)(b), Florida	wner upon whom notices or other documents may be
Name Judy Wolle E	acility Asset Management (FAM	
	200, Lake Buena Vista, Florida	
m addition to nimself (or nerself, Owner designates t	the following to receive a copy of the Lienor's Notice as
	13.13(1)(b), Florida Statutes.	
Name Donna Colburn		Telephone Number 407-824-7433
Address P.O. Box 100	000, Lake Buena Vista, Florida 3	32830-1000
	ce of commencement (the ex	xpiration date may not be before the completion of construction
expiration date of notice		
expiration date of noti- and final payment to the	contractor, but will be 1 year fro	om the date of recording unless a different date is specified)
and final payment to the	contractor, but will be 1 year fro 02/26	om the date of recording unless a different date is specified)
and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMIN JOB SITE BEFORE THE FI	contractor, but will be 1 year fro 02/26 YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I ENTS TO YOUR PROPERTY A NOT	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR TICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON
and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMI NG TWICE FOR IMPROVEM JOB SITE BEFORE THE FI RNEY BEFORE COMMENCI er penalty of perjury, I	contractor, but will be 1 year fro 02/26 YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I ENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR IDEA OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN MOTICE OF COMMENCEMENT.
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and final payment to the NING TO OWNER: ANY PAYS TO OWNER: ANY PAYS TO OWNER: ANY PAYS TO OWNER	CONTractor, but will be 1 year fro 02/26 YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N declare that I have read the for pest of my knowledge and bel CONTRACT Donnal	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR 10CE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON 1TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN 1OTICE OF COMMENCEMENT. Oregoing notice of commencement and that the facts ief. Colburn - Firm - Pm A
and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMIN JOB SITE BEFORE THE FI RNEY BEFORE COMMENCE FOR PERMIT OF PETJUTY, I ed in it are true to the bearing of Device of Owner or Lessee	CONTractor, but will be 1 year fro 02/26 YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N declare that I have read the for pest of my knowledge and bel	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR TICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN MOTICE OF COMMENCEMENT. Dregoing notice of commencement and that the facts ief.
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and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMIN JOB SITE BEFORE THE FI RNEY BEFORE COMMENCI er penalty of perjury, I ed in it are true to the bear Signature of Owner or Lessee ee's Authorized Officer/Directe	CONTractor, but will be 1 year fro 02/26 YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N declare that I have read the for pest of my knowledge and bel	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR TICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN HOTICE OF COMMENCEMENT. Oregoing notice of commencement and that the facts ief. Colburn - FAm - Pm A Signatory's Printed Name/Title/Office
and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMIN JOB SITE BEFORE THE FI RNEY BEFORE COMMENCI er penalty of perjury, I ed in it are true to the bear Signature of Owner or Lessee ee's Authorized Officer/Directe	YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I ENTS TO YOUR PROPERTY. A NOT INST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N declare that I have read the for Dest of my knowledge and bel OCTUPATINE INTEND ONLY THE TOWNER OF THE TOWNER OF THE TOWNER OF THE THE TOWNER OF THE TOWNER OF THE THE TOWNER OF THE TOW	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR RICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN NOTICE OF COMMENCEMENT. Dregoing notice of commencement and that the facts ief. Colburn - FAm - Pm A Signalory's Printed Name/Title/Office
and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMIN JOB SITE BEFORE THE FI RNEY BEFORE COMMENCI er penalty of perjury, I ed in it are true to the best of the commence of	YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N declare that I have read the fo test of my knowledge and bel JOHNS JOHNS OF OR OWNER'S OF OR OWNER'S OF OR OWNER'S OF OR OWNER'S OR OF OF OWNER'S OF OR OWNER'S OR OWNER'S OF OWNER'S OR OWNER'S OF OWNER'S OR OWNER'S OF OR OWNER'S OR OWNER'S OF OWNER'S OWNER'S OF OWNER'S OR OWNER'S OF OWNER'S OR OWNER'S OF OWNER'S OWNER'S OF OWNER'S OF OWNER'S OR OWNER'S OF OWNER'S OWNER'S OF OWNER'S	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PROCE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN HOTICE OF COMMENCEMENT. Dregoing notice of commencement and that the facts ief. Colburn - Firm - Pm A Signatory's Printed Name/Title/Office day of July Do Kind Colburn Or Signatory's Printed Name/Title/Office
and final payment to the NING TO OWNER: ANY PAY SIDERED IMPROPER PAYMIN JOB SITE BEFORE THE FI RNEY BEFORE COMMENCI er penalty of perjury, I ed in it are true to the b Signature of Owner or Lessee ee's Authorized Officer/Directe foregoing instrument was	CONTractor, but will be 1 year fro 02/26 YMENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTEND ING WORK OR RECORDING YOUR N declare that I have read the for the stof my knowledge and bel CONTRACT TO OWNER'S OF OR OWNER'S OR OWNE	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR TICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN HOTICE OF COMMENCEMENT. Oregoing notice of commencement and that the facts ief. Obury - Firm - Pm A Signatory's Printed Name/Title/Office day of Lety Day Daniel Calbury morph/year for Wait Disney World Resort
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And final payment to the NING TO OWNER: ANY PAYSIDERED IMPROPER PAYMING TWICE FOR IMPROVEM JOB SITE BEFORE THE FIRNEY BEFORE COMMENCIES Penalty of perjury, I and in it are true to the beginned of Owner or Lessee ee's Authorized Officer/Directer foregoing instrument was Authorized Type of authority, e.g., of Signature of Notary Foregoing Instrument Was Signature Of Notary Foregoi	MENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTENDING WORK OR RECORDING YOUR NOT INTENDING WORK OR NECORDING YOUR NOT INTENDING WORK OR RECORDING YOUR NOT INTENDING WORK OR THE YOUR WORK OR T	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR TICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN HOTICE OF COMMENCEMENT. Oregoing notice of commencement and that the facts ief. Obury - Firm - Pm A Signatory's Printed Name/Title/Office day of way by by build Calbury morph/year for Wait Disney World Resort Name of party on behalf of whom instrument was executed
Authorize Signature of Notary Is Signature Of Notary	MENTS MADE BY THE OWNER AF ENTS UNDER CHAPTER 713, PART I IENTS TO YOUR PROPERTY. A NOT IRST INSPECTION. IF YOU INTENDING WORK OR RECORDING YOUR NOT INTENDING WORK OR NECORDING YOUR NOT INTENDING WORK OR RECORDING YOUR NOT INTENDING WORK OR THE YOUR WORK OR T	om the date of recording unless a different date is specified) 5/2016 TER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR TICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN MOTICE OF COMMENCEMENT. Oregoing notice of commencement and that the facts rief. Colburn - Firm - Pm A Signatory's Printed Name/Title/Office day of Walt Disney World Resort Name of party on behalf of whom instrument was executed Print, type, or stemp name of Notary Public



Permit Number: Folio/Parcel Identification Number:

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

Attn: Brian Crain P.O. Box 10000

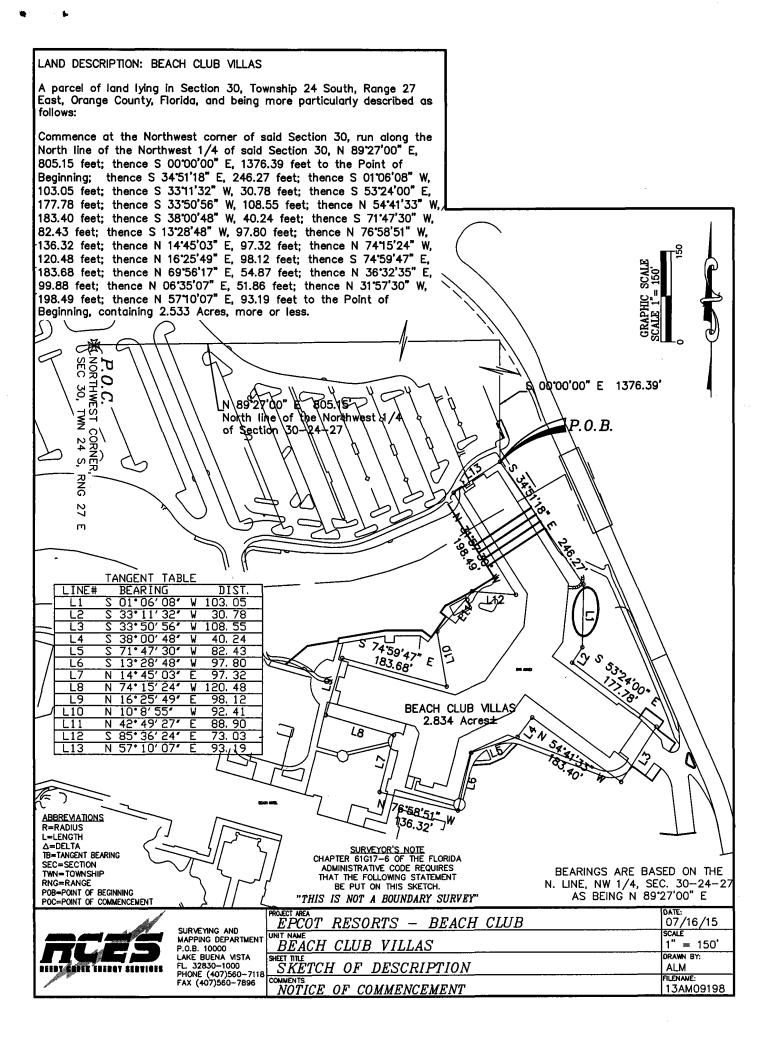
Lake Buena Vista, FL 32830-1000

DOC# 20150374013 B: 10953 P: 8782 07/21/2015 12:24:42 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

٠.	NOTICE OF COMMENCEMEN	•
	ate 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 Not Description of property (legal description of the property, and street a	
1.	See Attached Legal Description	duless if available)
2	General description of improvement	
	Contractor General Conditions	
3.		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 Owne	r listed above)
	Name	
	Address	
4.	Contractor	
	Name Otis Elevator Company	Telephone Number 407-438-3633
	Address 55 W Pineloch Ave, Orlando, FL 32806	
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 who	m notices or other documents may be
	served as provided by Section 713.13(1)(b), Florida Statutes.	Talanhana Number (407) 020 4621
	Name Judy Wells, Facility Asset Management (FAM) Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	Telephone Number (407) 939-4631
	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 Lienor a Notice as
	Name Brian Crain	Telephone Number (407)934-7572
	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	
	11/27/2015	
WA	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATI	ON OF THE NOTICE OF COMMENCEMENT ARE
CO	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 COMMENC E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINAN	
ATT	TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMME	NCEMENT.
	day manufact of marking to deplace that I have acced the favouring making	of commandement and that the facts
	der penalty of perjury, I declare that I have read the foregoing notice ated in it are true to the best of my knowledge and belief.	or commencement and that the facts
	RAP ROLLS	C. PMA/FAM
_	Juny Com JAM J-	Cain The The
l e	Signature of Owner or Lessee, or Owner's or Signator assee's Authorized Officer/Director/Partner/Manager	r's Printed Name/fitle/Office
		1/2/2. 14
Th	e foregoing instrument was acknowledged before me this day o	
		morth/year
as	Authorized Signatory for	Walt Disney World Resort
	Type of authority, e.g., officer, trustee, attorney in fact Name of pa	rty on behalf of whom instrument was executed
	1 /	•
_		
	Signature of Notary Public - State of Florida Print,	type, or stamp name of Notary Public
	5 [~]	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
ł	Personally Known OR Produced ID	Notary Public State of Florida
-	Type of ID Produced	Kelly L Nobles My Commission EE 220221
		OF P.OF Expires 07/29/2016
	5~~	······································



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

DOC# 20150374014 B: 10953 P: 8784 07/21/2015 12:24:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI



em	it l	No.	<u> پښور پولمې مولي</u>	 ·	

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this notice of commencement.

- Description of property: Legal Discription attached KW Build 49
- 2. General description of improvements: Mechanical
- Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, EL 32830
 - Interest in property: Owner
 - Name and address of fee simple titleholder (if other than Owner): (c)
- Contractor (name and address): Ferran Services and Contracting 530 Grand St. Orlando FI 32805
 - (b) Contractor's phone number: 407-422-3551
- 5, Surety:
 - Name and address:
 - (c) Amount of Bond:
- 6. Lender (name and address):
- (a) (b) Lender's phone number:
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section <u>713.13</u> (1)(a)7., Florida Statues: (name and address):

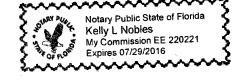
 Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000 7. (a) Phone numbers of designated persons: (407) 828-3582 (b)
- In addition to himself or herself, Owner designates Elaine Schomburg-LaFluer (a) of WDW to receive a copy of the Lienor's Notice as provided in Section .713.13 (1)(b), Fiorida Statutes.DavDa Phone number of person or entity designated by owner: 407-827-4868
- Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):12/15/2015

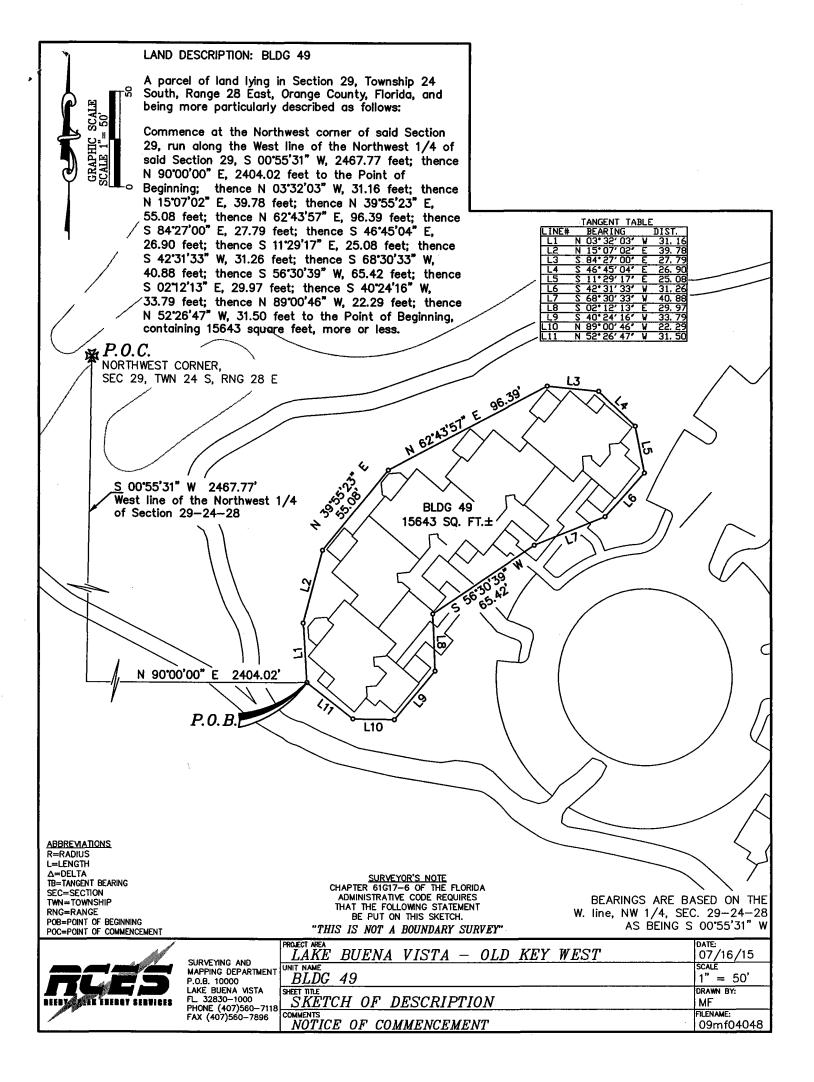
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTION OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR 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.

Haire Schomburgviedged before me this 20 day. Walt Disney World Resort (name of party on be (Print, Type, or Stamp Commissioned Name of Notary Public) of Notary Public - State of Florida OR Produ X

92.525 Florida Statutes: Under penalties of perjury. I declare that I have read

Signature of Natural Person Signing Above





Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Debbie Mize P.O. Box 10000

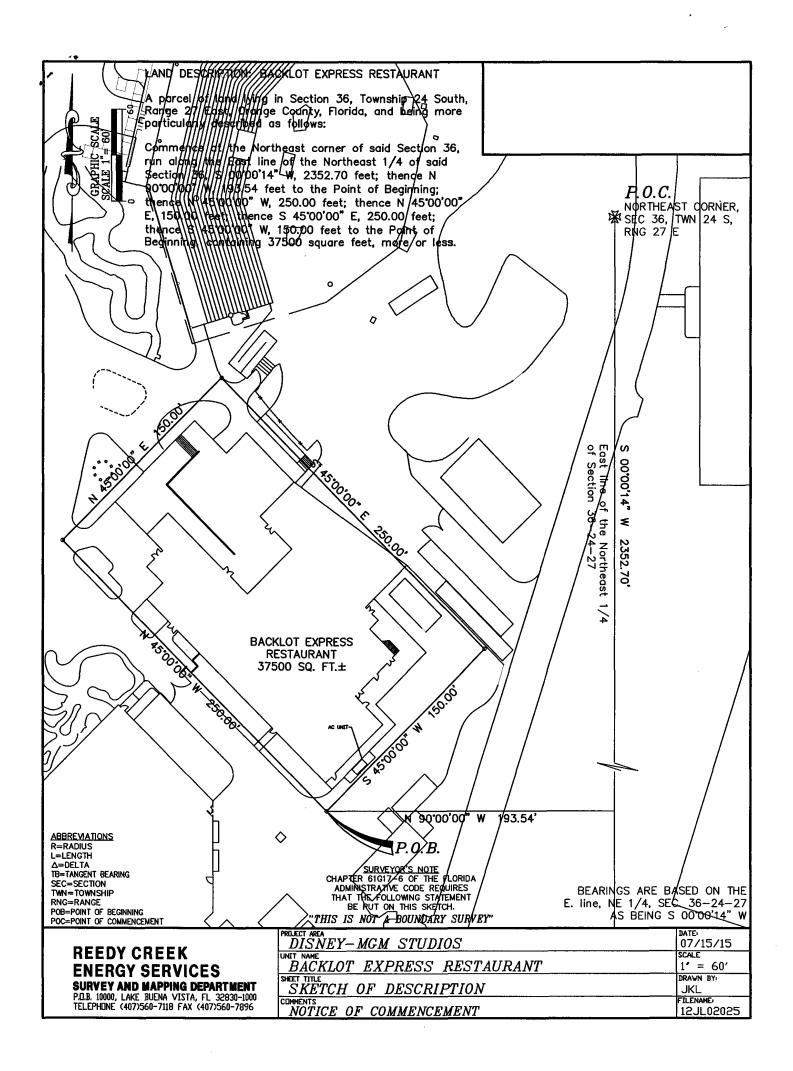
Lake Buena Vista, FL 32830-1000

DOC# 20150374015 B: 10953 P: 8786 07/21/2015 12:24:42 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

Sta	tate of Florida, County of Orange		
The	he undersigned hereby gives notice that improvement will be made to o	certain real property, and in accordance with	
	hapter 713, Florida Statues, the following information is provided in this		
1.	Description of property (legal description of the property, and str		
	See attached Legal Description	3.1	
2.	General description of improvement		
_	General Construction		
3,	Owner information or Lessee information if the Lessee contrac	ted 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 C	wher listed above)	
	Name		
	Address		
4.		Tolonbono Number 407 022 7700	
	Name Southeastern Construction & Maint.	Telephone Number 407-933-7700	
5	Address 4712 Old Tampa Hwy, Kissimmee, FL 34746		
J.	Surety (if applicable, a copy of the payment bond is attached)	Tolonkiene Number	
	Name Address	Telephone Number	
6	Lender	Amount of Bond \$	
o.		Telephone Number	
	A		
7	Persons within the State of Florida designated by Owner upon		
• •	served as provided by Section 713.13(1)(b), Florida Statutes.	whom 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	100 phono 11411100 (2401) 500 400 400	
8.	In addition to himself or herself, Owner designates the following	**************************************	
	provided by Section 713.13(1)(b), Florida Statutes.	a 10 10 10 10 10 10 10 10 10 10 10 10 10	
	Name Debbie Mize	Telephone Number (407) 560-4819	
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000		
9.	. Expiration date of notice of commencement (the expiration date	e may not be before the completion of construction	
	and final payment to the contractor, but will be 1 year from the date of		
	10/10/2015		
WAF	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXP	IRATION OF THE NOTICE OF COMMENCEMENT ARE	
	ONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713 LYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMM		
THE	IE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN I	FINANCING, CONSULT WITH YOUR LENDER OR AN	
ATT	TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF CO	MMENCEMENT.	
Une	nder penalty of perjury, I declare that I have read the foregoing no	tice of commencement and that the facts	
sta	ated in it are true to the best of my knowledge and belief.		
	7/ 100 1/L	1 - (1) Bank	
	Debre GNZE Deport	MITE, WDW, Facility Asset Me	e Negerian
····		natory's Printed Name/Title/Office ASSIC, Pub	Mal
Les	essee's Authorized Officer/Director/Partner/Manager	7 SSIC, PAU	right.
		1 / Days Dona's Use of	
ine	ne foregoing instrument was acknowledged before me this 6	ay or Mus 1113, by 1) EBB E F1.2 E	
		mzhth/year	
as _	Authorized Signatory forfor	Walt Disney World Resort	
	Type of authority, e.g., officer, trustee, attorney in fact Name	of party on behalf of whom instrument was executed	
(jinasi			
	Signature of Hotary Public - State of Florida	Print, type, or stamp name of Notary Public	
p	Personally Known V OR Produced ID	***************************************	
•	Sit Trooped to	العربي Notary Public State of Florida	
Ty	Type of ID Produced	Kelly L Nobles	
		My Commission EE 220221	
		Expires 07/29/2016	



Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Mike R. Miller P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150374016 B: 10953 P: 8788 07/21/2015 12:24:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FACI

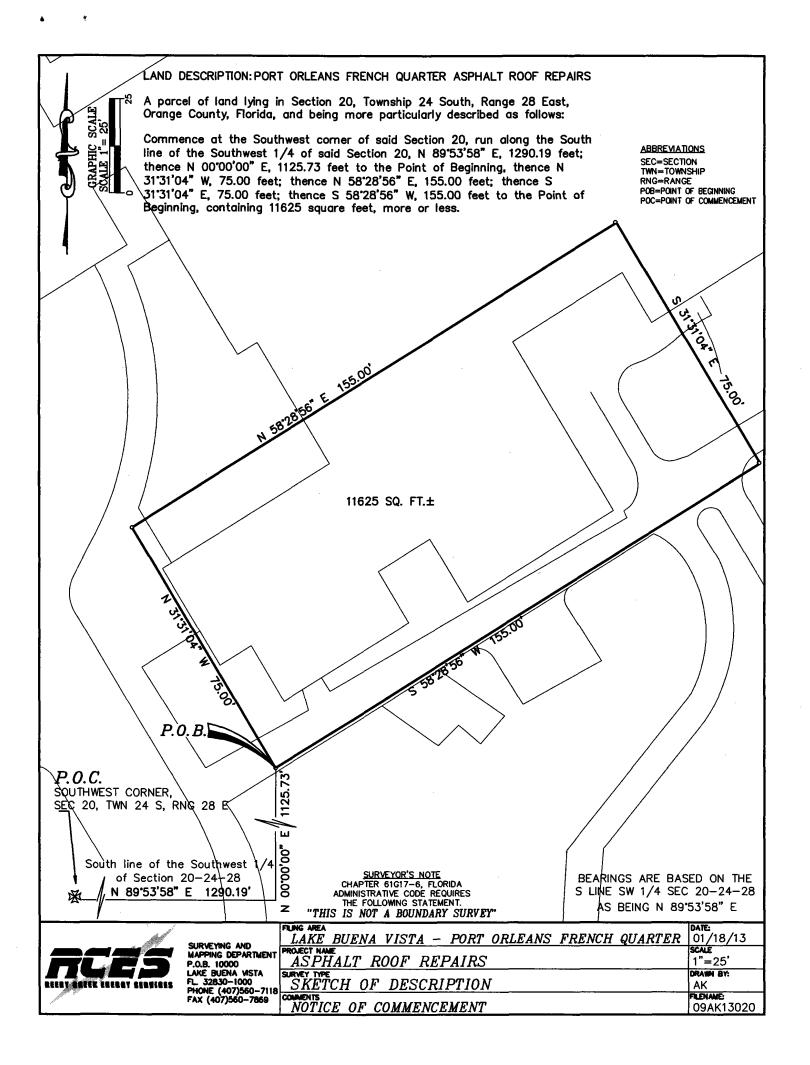


NOTICE OF COMMENCEMENT

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

See Attached	
General description of improvement	
General Construction	
Owner information or Lessee information if	he 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 titleholde	(if different from Owner listed above)
Name	,
Address	
Contractor	
Name T&G Constructors Inc	Telephone Number 407-352-4433
Address 8623 Commodity Circle, Orlando, F	· · ·
Surety (if applicable, a copy of the payment be	•
Name	Telephone Number
	Amount of Bond \$
Lender	
	Telephone Number
Address	
Persons within the State of Florida designat	ed by Owner upon whom notices or other documents may be
served as provided by Section 713.13(1)(b),	
Name Judy Wells, Facility Asset Manageme	t (FAM) Telephone Number (407) 939-4631
Address P.O. Box 10000, Lake Buena Vista,	Florida 32830-1000
In addition to himself or herself, Owner des	nates the following to receive a copy of the Lienor's Notice as
provided by Section 713.13(1)(b), Florida Sta	tutes.
Name Mike R. Miller	Telephone Number (407)828-1402
Address P.O. Box 10000, Lake Buena Vista,	· · · · · · · · · · · · · · · · · · ·
	(the expiration date may not be before the completion of construction
-	year from the date of recording unless a different date is specified)
	10/30/2015
SIDERED IMPROPER PAYMENTS UNDER CHAPTER 7: NG TWICE FOR IMPROVEMENTS TO YOUR PROPER:	VNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE 3, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR Y. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN YOUR NOTICE OF COMMENCEMENT.
ler penalty of perjury, I declare that I have re ed in it are true to the best of my knowledge	d the foregoing notice of commencement and that the facts and belief.
al after also	5 11.1 00 5 11.11 2 -
	Michae C. Milke PMR
Signatura de Oudar ar Casaca ar Oudaria as	Signator in Drietad Namo (Title Office
Signature of Owner or Lessee, or Owner's or see's Authorized Officer/Director/Partner/Manager	Signatory's Printed Name/ Hite/Office
foregoing instrument was acknowledged before	
	mod th/year
Authorized Signatory	for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fa	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
	ARE A. A. A.
	5
ersonally Known OR Produced ID	Notary Public State of Florida



Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Cameron Tysor/Hike Draggich
P.O. Box 10000

P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150374017 B: 10953 P: 8790 07/21/2015 12:24:42 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

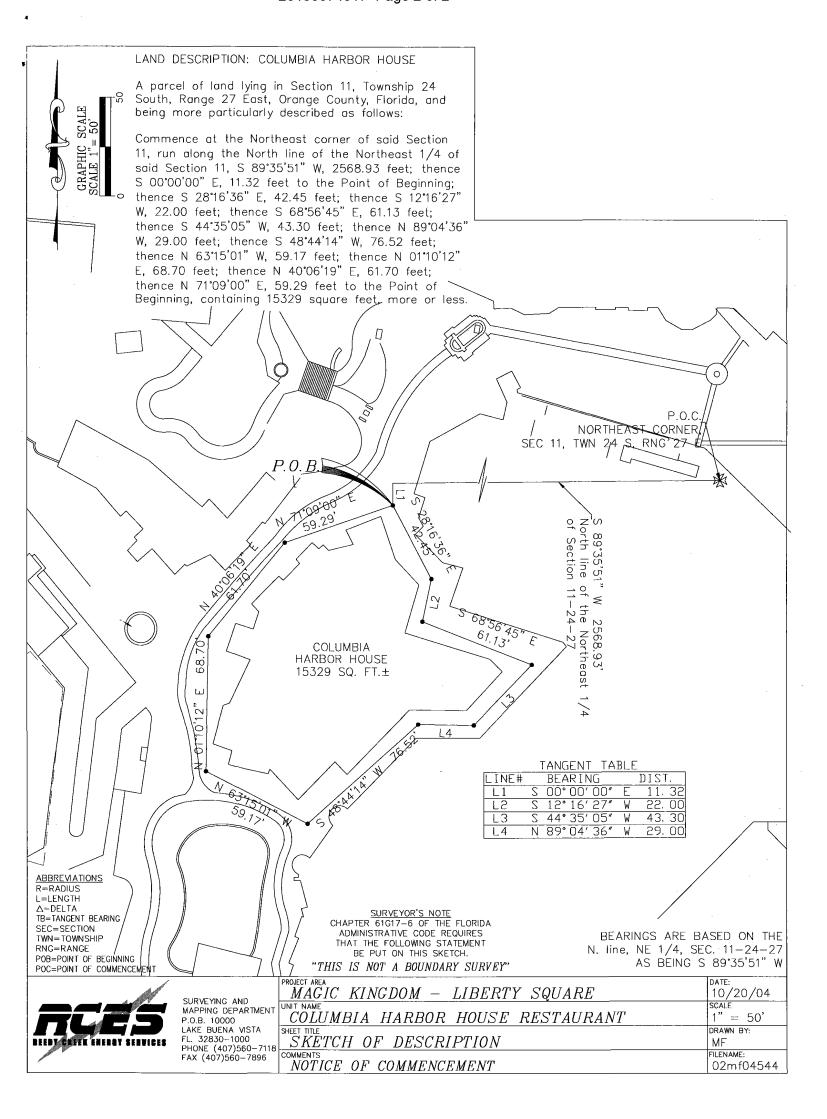
State of Florida, Co	ounty of Orange
----------------------	-----------------

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. Description of property (legal description of the property, and street address if available)

Dee ATTACK

2.		
	Carpentry	
3.		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 Owne Name	er listed above)
	Address	
4.	Contractor	
••	Name Smith, Broomfield & Howard Construct	Telephone Number 352-343-1390
	Address 321 West Alfred Street, Tavares, FL 32778	Telephone Number 002-040-1000
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	Telephone Number
7.	Persons within the State of Florida designated by Owner upon who	m notices or other documents may be
	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	
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 Cameron Tysor	Telephone Number 407-824-5676
	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000	
9.	Expiration date of notice of commencement (the expiration date ma	ay not be before the completion of construction
	and final payment to the contractor, but will be 1 year from the date of re	
	12/18/2015	our aming amount a amount adds to opposition
PAY	ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRAT PASIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, YING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENC E JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINAL TORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMME	FLORIDA STATUTES, AND CAN RESULT IN YOUR EMENT MUST BE RECORDED AND POSTED ON NCING, CONSULT WITH YOUR LENDER OR AN
Un sta	nder penalty of perjury, I declare that I have read the foregoing notice ated in it are true to the best of my knowledge and belief.	of commencement and that the facts
	amera Is ameron ly	SOR - FAMI Phane
		y's Printed Name/Title/Office
Le	essee's Authorized Officer/Director/Partner/Manager	11
The	e foregoing instrument was acknowledged before me this 20% day o	month/year by Columnia /y.son_
as	Authorized Signatory for	Walt Disney World Resort
	Type of authority, e.g., officer, trustee, attorney in fact Name of pa	rty on behalf of whom instrument was executed
-		
	Signature of Notary Public - State of Florida Print,	type, or stamp name of Notary Public
P	Personally Known OR Produced ID \$	Notary Public State of Florida Kelly L Nobles
Т	Type of ID Produced	My Commission EE 220221 Expires 07/29/2016



Prepared by/record and return to:

P

8.

DOC# 20150374018 B: 10953 P: 8792 07/21/2015 12:24:42 PM Page 1 of 2 Rec Fee: \$18.50 Martha 0. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO FOCI SNEY WORLD CO FACI



Signature of Natural Person Signing Above

Walt Disney World Resort	MB - Ret To: WALT DI
Attn: Dennis Askins	
P.O. Box 10000	
Lake Buena Vista, FL 32830-1000	
•	

		Permit No	Tax Folio No
		ı	NOTICE OF COMMENCEMENT
State	e of Fl	orida, County of Orange	
The with	under Chap	signed hereby gives notice ter 713, Florida Statutes, the	that improvements will be made to certain real property, and in accordance following information is provided in this notice of commencement.
1.	Des	cription of property: See Atta	iched
2.	Gen	eral description of improven	nents: Plumbing
3.	Owr (a)	ner Information: Name and address: Walt I	Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
	(b)	Interest in property: Owner Name and address of fee	simple titleholder (if other than Owner):
4.	(a)	Contractor (name and add	ress): Faden Builders,Inc, 736 South Rossiter St., Mount Dore, FI,32757
	(b)	Contractor's phone number	
5.	Sure	ety:	
	(a) (b) (c)	Name and address: Phone number: Amount of Bond:	
6.	(a) (b)	Lender (name and address Lender's phone number:	s):
7.	(a) (b)	may be served as provided Dave Ellis , Sourcing & Pr	Forida designated by Owner upon whom notices or other documents by Section 713.13 (1)(a)7., Florida Statues: (name and address): ocurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000 ated persons: (407) 828-3582
	(a) (b)	In addition to himself or he to receive a copy of the Lie Phone number of person of	rself, Owner designates Dennis Askins of WDW enor's Notice as provided in Section 713.13 (1)(b), Florida Statutes.DavDa or entity designated by owner: 407-824-1146
9.		ration date of notice of com	mencement (the expiration date is 1 year from the date of recording ed): 7/14/2016
OF COST	OMME TON <u>7</u> OVEN TED O SULT	ENCEMENT ARE CONSIDE 13.13 , FLORIDA STATUTI MENTS TO YOUR PROPER N THE JQB SITE BEFOR <u>E</u>	TIS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE RED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, ES, AND CAN RESULT IN YOUR PAYING TWICE FOR TY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING DENNIS AS KINGLINGS SASSIBLE SASSIBILITY OF THE NOTICE STATES AS SIGNATORY'S Printed Name/Title/Office
	(or Own	er's Authorized officer/Director/Partner/N	lanader)
The foi	regoing	instrument was acknowledged bef	ore me this 14 day of July , 20 15, by Dennis ASKINS , as
	(Туре о	Authorized Signatory of authority, e.g., officer, trustee, attorney officer,	Walt Disney World Resort (name of party on behalf of whom instrument was executed) WWWJ HWJ W
Verif	Type o		Produced ID Notary Public State of Florida Rhina J Harfield My Commission FF 096630 Expires 03/15/2018 Idea Statutes: Under penalties of perjuly, Lockfare that I have read

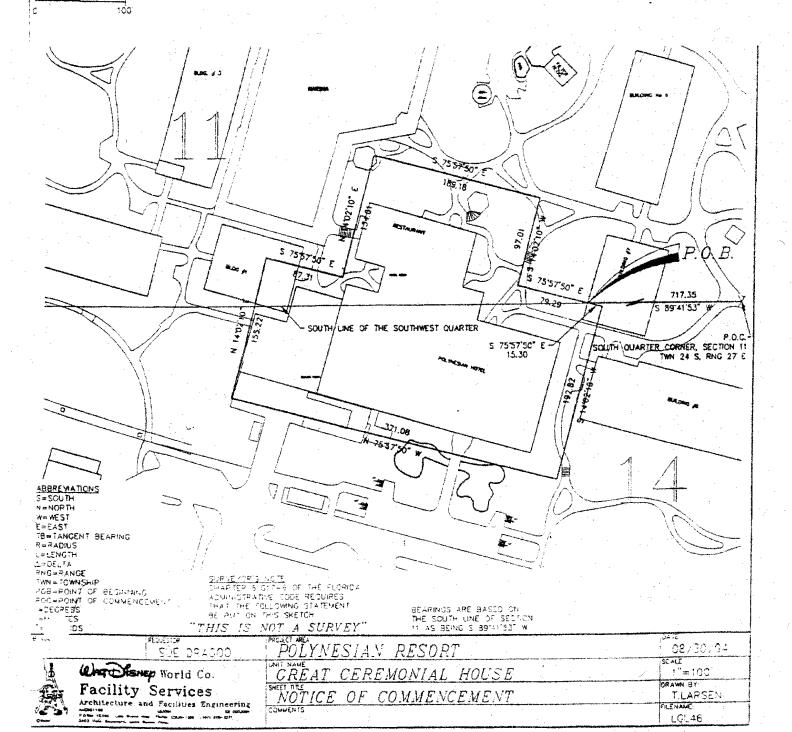


GRAPHIC SCALE SCALE 1 = 100'

DESCRIPTION

A parcel of land lying in Sections 11 and 14, Township 24 South, Range 27 East, in the City of Bay Lake, Orange County, Florida, and being more particularly described as follows:

Commence at the South Quarter corner of said Section 11, run along the South Line of his Southwest 1/4 of said Section, S 89'41'53" W, 717.35 feet, to the Point of Beginning: thence S 75'57'50" E, 15.30 feet; thence S 14'02'10" W, 192.82 feet; thence N 75'57'50" W, 371.08 feet; thence N 14'02'10" E, 155.22 feet; thence S 75'57'50" E, 87.31 feet; thence N 14'02'10" E, 134.61 feet; thence S 75'57'50" E, 189.18 feet; thence S 14'02'10" W, 97.01 feet; thence S 75'57'50" E, 79.29 feet, to the Point of Beginning, containing 1.989 scress more or less:



Prepared by/record and return to:

Walt Disney World Resort Attn: Dennis Askins

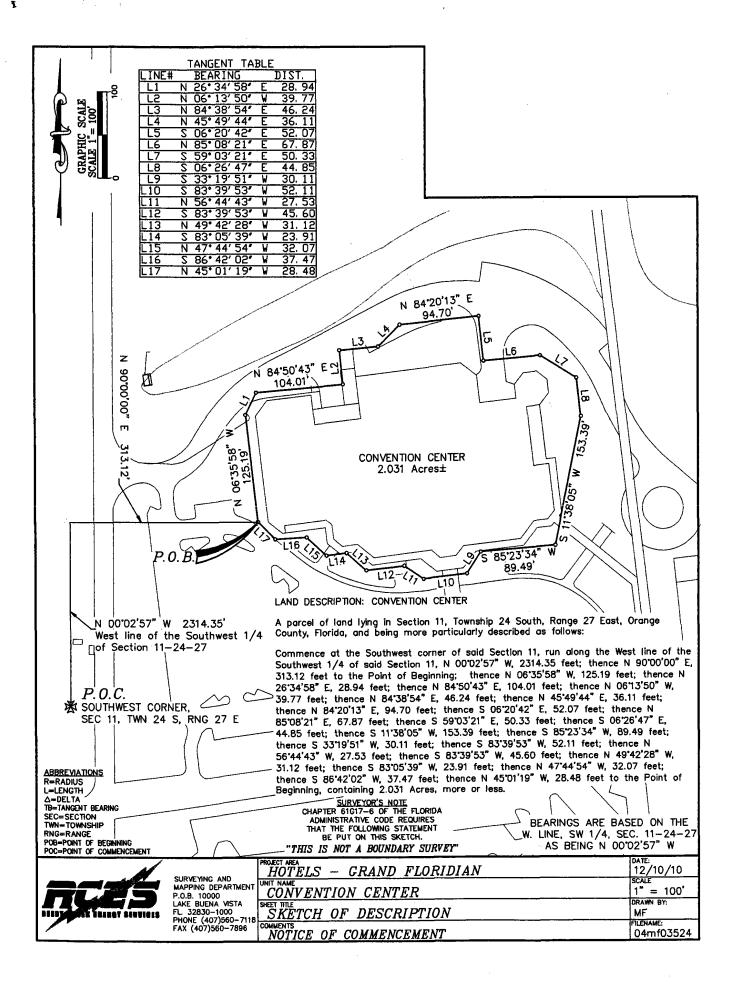
P.O. Box 10000

DOC# 20150374019 B: 10953 P: 8794 07/21/2015 12:24:42 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 COMMEN	ICEMENT		
Sta	te of Fl	orida, County of Orange			
		signed hereby gives notice that improvements will be ter 713, Florida Statutes, the following information is	· · · · · · · · · · · · · · · · · · ·		
1.	Des	cription of property: See Attached			
 General description of improvements: Electrical Owner Information: 					
	(a)	Name and address: Walt Disney World Resort, P.	D. Box 10000, Lake Buena Vista, FL 32830		
	(b)	Interest in property: Owner			
	(c)	Name and address of fee simple titleholder (if other	r than Owner):		
4.	(a)	Contractor (name and address): Westbrook Service Orlando, Fl 32805			
	(b)	Contractor's phone number: 407-841-3310			
5.	Sure				
	(a) (b)	Name and address: Phone number:			
	(c)	Amount of Bond:			
6.	(a) (b)	Lender (name and address): Lender's phone number:			
 (a) Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(a)7., Florida Statues: (name and address): Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-16 (b) Phone numbers of designated persons: (407) 828-3582 					
	(a)	In addition to himself or herself, Owner designates to receive a copy of the Lienor's Notice as provide	Dennis Askins of WDW and in Section 713.13 (1)(b), Florida Statutes.DavDa		
^	• •	(b) Phone number of person or entity designated by owner: 407-824-1146			
9.		ration date of notice of commencement (the expirati ss a different date is specified): 7/14/2016	on date is 1 year from the date of recording		
OF C SEC MPF POS CON	COMMETION <u>7</u> ROVEN TED O	TO OWNER: ANY PAYMENTS MADE BY THE OWNENCEMENT ARE CONSIDERED IMPROPER PAYM 13.13, FLORIDA STATUTES, AND CAN RESULT MENTS TO YOUR PROPERTY. A NOTICE OF CONTON THE JOB SITE BEFORE THE FIRST INSPECTION WITH YOUR LENDER OR AN ATTORNEY BEFORE TICE OF COMMENCEMENT. Signature of Owner	MENTS UNDER CHAPTER 713, PART I, IN YOUR PAYING TWICE FOR IMENCEMENT MUST BE RECORDED AND ON. IF YOU INTEND TO OBTAIN FINANCING,		
			٠. ١		
		er's Authorized officer/Director/Partner/Manager)	1)111 IT Appair MeliAIC		
Γhe fo		er's Authorized officer/Director/Partner/Manager) instrument was acknowledged before me this day of	1014 . 20 15 , by Denni's Askins., as		
Γhe fo	pregoing	instrument was acknowledged before me this day of Authorized Signatory	Walt Disney World Resort		
Γhe fo	pregoing	instrument was acknowledged before me this day of	J		
Γhe fo	(Type o	Authorized Signatory of authority, e.g., officer, trustee, attorney-in-fact)	Walt Disney World Resort (name of party on behalf of whom instrument was executed) KhinwJ Har-Leld		
Γhe fo	(Type o	Authorized Signatory of authority, e.g., officer, trustee, attorney-in-fact) gnature of Notary Public - State of Florida	Walt Disney World Resort (name of party on behalf of whom instrument was executed) Khinw Harteld (Print, Type, or Stamp Commissioned Name of Notary Public)		
Γhe fo	(Type o	Authorized Signatory of authority, e.g., officer, trustee, attorney-in-fact)	Walt Disney World Resort (name of party on behalf of whom instrument was executed) KhinwJ Har-Leld		

Signature of Natural Person Signing Above



Permit Number:	DOC # 20150376464 B: 10954 P: 5615 07/22/2015 10:23 AM Page 1 of 1 Rec Fee: \$10.00	
Folio/Parcel ID #: Prepared by:	Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00 Intangible Tax: \$0.00	
	Martha O. Haynie, Comptroller	
Return to: ABBY BRANDENBURG	Orange County, FL	
1365 AVENUE OF THE STARS/PO BOX 10321 LAKE BUENA VISTA, FL 32830	Ret To: CSC INC	
LAKE BUENA VISTA, FL 32830	•	
NOTICE OF COMMENCEMENT		
State of Florida, County of Orange		
The undersigned hereby gives notice that improvement will be	made to certain real property, and in accordance	
with Chapter 713, Florida Statutes, the following information is		
 Description of property (legal description of the property, a 1400 AVENUE OF THE STARS, BAY LAKE, FL 32830 	and street address if available)	
2. General description of improvement EPCOT INNOVENTIONS SHOW SET INSTALLATION		
3. Owner information or Lessee information if the Lessee	contracted for the improvement	
Name <u>WALT DISNEY IMAGINEERING</u> Address <u>PO BOX 10321, LAKE BUENA VISTA, FL 32830</u>		
Interest in Property N/A		
Name and address of fee simple titleholder (if different f Name N/A	,	
Address N/A		
4. Contractor		
Name JON RICHARDS COMPANY Address 10890 GENERAL DR., ORLANDO, FL 32824	Telephone Number_407-581-9166	
5. Surety (if applicable, a copy of the payment bond is attache		
Name N/A Address N/A	Telephone Number N/A Amount of Bond \$ N/A	
6. Lender	···	
Name N/A	Telephone Number <u>N/A</u>	
7. Persons within the State of Florida designated by Owne	er upon whom notices or other documents may	
be served as provided by §713.13(1)(a)7, Florida Statut	es.	
Name RUSSELL STOKES Address PO BOX 10321, LAKE BUENA VISTA, FL 32830	Telephone Number_407-560-3660	
8. In addition to himself or herself, Owner designates the	following to receive a copy of the Lienor's	
Notice as provided in §713.13(1)(b), Florida Statutes.	•	
Name BETH DOUGHERTY - CONTRACT ACCOUNTING	Telephone Number <u>407-560-3660</u>	
Address PO BOX 10321, LAKE BUENA VISTA, FL 32830 9. Expiration date of notice of commencement (the expirate	ion date may not be before the completion of	
construction and final payment to the contractor, but will be different date is specified)		
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER 1	THE EXPIDATION OF THE NOTICE OF COMMENCEMENT	
ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROP RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPE WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK	I, SECTION 713.13, FLORIDA STATUTES, AND CAN ERTY. A NOTICE OF COMMENCEMENT MUST BE CTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT	
× .	₽₩ VP & GM	
Signature of Owner or Leasee, or Owner's or Lessee's Authorized Officer/Direct	stor/Partner/Manager Signatory's Title/Office	
The foregoing instrument was acknowledged before me this 2	م العالي by John C. Blitch	
as Vice-President & General Manager for W	month/yealr name of person /alt Disney Imagineering	
	Name of party on behalf of whom instrument was executed	
Signature of Northry Public - State of Florida	Print, type, or stary commissioned name of Notary Public	
1/	. mis, type, or staight commissioned marile of Notaly Public	
Personally KnownOR Produced ID Type of ID Produced	CAROLYN MARY BELLINO	
- , , , , , , , , , , , , , , , , , , ,	NOTARY PUBLIC	
	ESTATE OF FLORIDA	
	Comm# FF099835 Expires 7/5/2018	
Form content revised: 10/17/12	ACS 18. EVINES LINES	

Form content revised: 10/17/12

Permit Number: BD140768	DOC# 20150378144 B: 10954 P: 8894
Folio/Parcel ID #:	07/22/2015 04:13:38 PM Page 1 of 1 Rec Fee: \$10.00
Prepared by: Michael Robert / Wood Craft	Martha O. Havnie Committee
	Orange County, FL MB - Ret To: WOOD CRAFT
Return to: Wood Craft	
1611 Broad Street,	
Kissimmee, Florida 34746	
NOTICE OF COMMENCEMEN State of Florida, County of Orange	
The undersigned hereby gives notice that improvement will b	
with Chapter 713, Florida Statutes, the following information	
 Description of property (legal description of the property 2101 Epcot Resorts Blvd 	v, and street address if available)
2. General description of improvement	
Replace existing Kiosk	
3. Owner information or Lessee Information if the Lesse	e contracted for the improvement

Name Walt Disney Parks and Resorts US Inc./ Buena Vista Concessions

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

The foregoing instrument was acknowledged before me this 21 day of 7/15

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

Signature of Notary Public - State of Florida

erie Fulrmon

Personally Known ___OR Produced ID

Name and address of fee simple titleholder (if different from Owner listed above)

Address PO Box 10000 Lake Buena Vista FI

Interest in Property

Name Wood Craft Address 1611 Broad Street, Kissimmee Fl. 34746 4. Contractor Telephone Number 407 873 4805 Name Phillip Hendricks Construction Address 46 Idora Blvd, Kissimmee Fl. 34741 5. 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 §713.13(1)(a)7, Florida Statutes. Name Michael Robert Telephone Number 407 933 1557 Address 611 Broad Street, Kissimmee Fl. 34746 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes. Name Phillip Hendricks Telephone Number<u>407 873 4805</u> Address 46 Idora Blvd, Kissimmee Fl. 34741 Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified) WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE 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 MENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Partner

Michael Robert

name of person

by

Wood Craft
Name of party on behalf of whom instrument was executed

Notary Public State

Gerrie Fuhrman My Commission FF 115139 Expires 04/22/2018

Fuhrman

Print, type, or stamp commissioned name of Notary Public

month/year

JERRIE

Signatory's Title/Office

Form content revised: 01/23/14

Type of ID Produced

as Partner

Permit Number: Folio/Parcel Identification Number: Prepared by and Return to: Walt Disney World Resort - FAM Attn: Brian Crain P.O. Box 10000

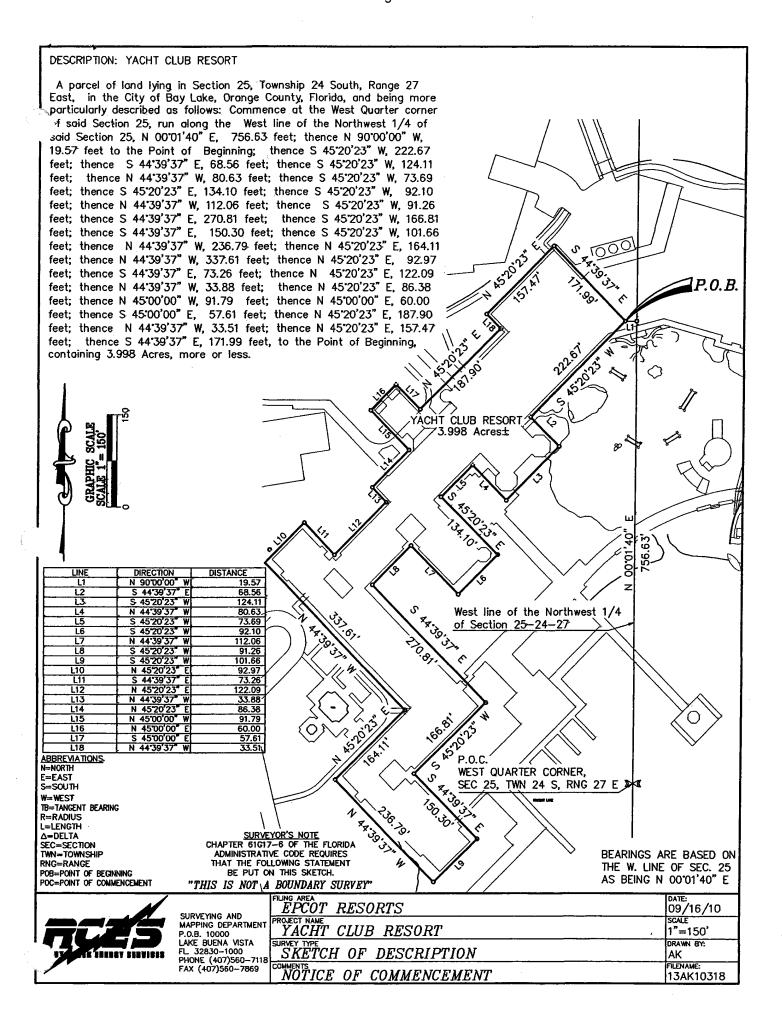
DOC# 20150380342 B: 10955 P: 4297 07/23/2015 12:04:05 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



Type of ID Produced

Lake Buena Vista, FL 32830-1000

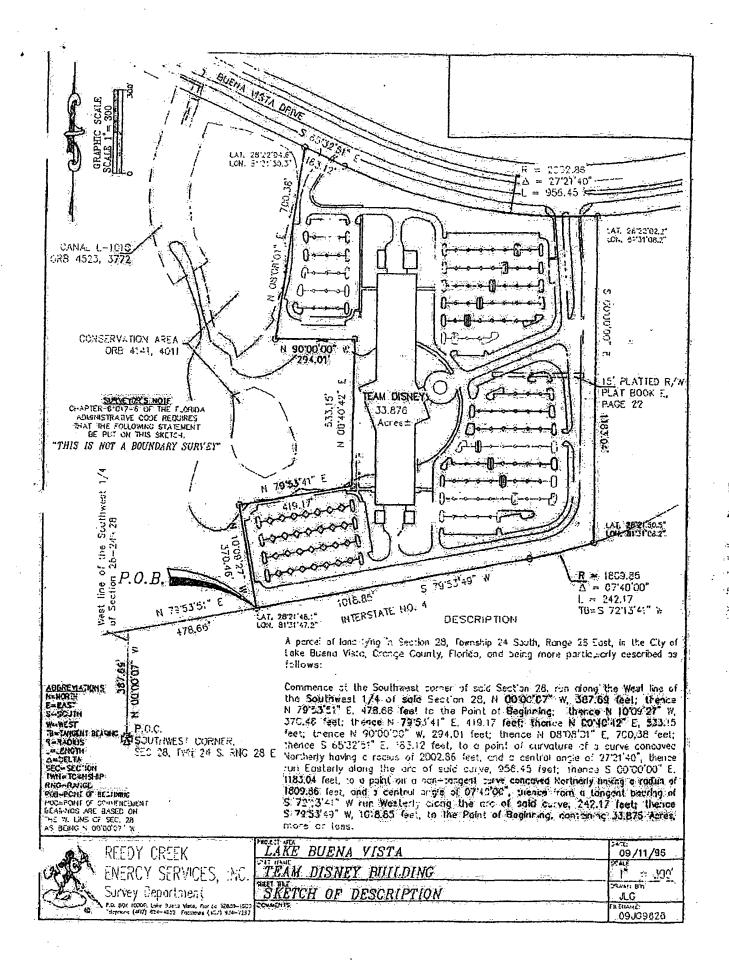
	NOTICE OF COMMENCE	MENI
Stat	te of Florida, County of Orange	
The	undersigned hereby gives notice that improvement will be made to	certain real property, and in accordance with
Cha	apter 713, Florida Statues, the following information is provided in th	is Notice of Commencement.
	Description of property (legal description of the property, and si	
	See Attached	
2.	General description of improvement	
	Mechanical	
3.	Owner information or Lessee information if the Lessee contract	cted 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 0	Owner listed above)
	Name	
	Address	
4	Contractor	
••	Name Ferran Services & Contracting Inc	Telephone Number (407) 422-3551
	Address 530 Grand St, Orlando , FL 32805-4795	relephone remack <u>1017102 0001</u>
5	Surety (if applicable, a copy of the payment bond is attached)	
Ο.	Name	Telephone Number
	Address	Amount of Bond \$
6	Lender	/ Allount of Bond \$
Ο.	1.	Telephone Number
	NameAddress	Telephone Hamber
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.	whom houses 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	
0	In addition to himself or herself, Owner designates the following	
Ο.		ig to receive a copy of the Lienor's Notice as
	provided by Section 713.13(1)(b), Florida Statutes.	Telephone Number (407)934-7572
	Name Brian Crain	
0	Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000 Expiration date of notice of commencement (the expiration da	
9.		
	and final payment to the contractor, but will be 1 year from the date	of recording unless a different date is specified)
	10/30/2015	
CON PAY THE ATT	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EX ISIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 71 ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COIL JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF CO	13.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR IMENCEMENT MUST BE RECORDED AND POSTED ON FINANCING, CONSULT WITH YOUR LENDER OR AN OMMENCEMENT.
stat	der penalty of perjury, I declare that I have read the foregoing n ted in it are true to the best of my knowledge and belief.	otice of commencement and that the facts
	R // R α	- a DMALEA.
<u>//.</u>	Drian -	Crain / 1/4/ H
		gnatory's Printed Name/Title/Office
Les	see's Authorized Officer/Director/Partner/Manager	
The	e foregoing instrument was acknowledged before me this	day of 1215 by Brian Crain
as	Authorized Signatory for	Walt Disney World Resort
- uu		e of party on behalf of whom instrument was executed
(Radio Char	
_	- June Juane	
	Signature of Notary Public - State of Florida	ACINIA DA DESERVA DE PROPERTO DE ESCRICIO
Ρ	ersonally Known OR Produced ID	Notary Public State of Florida Rosalie Creamer My Commission FF 117844
т.	voe of ID Produced	OF NOT Expires 05/22/2018



Folio/Parcel ID #:	07/23/2015 12:04:05 PM Page 1 of 2
Troparca by. Trait Disting World - I Aw	
	Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO
	MB - Ret To: WALT DISNEY WORLD CO
Return to: Chris Dickman	
P.O. Box 10000	
P.O. Box 10000 Lake Buena Vista, FL 32830-1000	
NOTICE OF COMMENCEMENT State of Florida, County of Orange The undersigned hereby gives notice that improvement will be m with Chapter 713, Florida Statutes, the following information is pr 1. Description of property (legal description of the property, and	rovided in this Notice of Commencement.
See attached 2. General description of improvement	
2. General description of improvement	
Painting	
 Owner information or Lessee information if the Lessee co Name Walt Disney World Resort 	-
Address P. O. Box 10000, Lake Buena Vista, FL 32830	
Name and address of fee simple titleholder (if different fro	
Name	
Address 4 Contractor	
4. Contractor	Tolonhono Number
Address 3433 Lithia Dinecrest Dd. Volsice, El 2350/	r elebuoue ixamper
Name Intex Coatings, Inc. Address 3433 Lithia Pinecrest Rd, Valrico, FL 33594 5. Surety (if applicable, a copy of the payment bond is attached)	
Name	7 Telenhone Number
NameAddress	Amount of Bond \$
6. Lender	Aniodric of Dollo W
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 \$713.13(1)(a)7. Florida Statutes	š .
Name Judy Wells, Facility Asset Management Address P. O. Box 10000, Lake Buena Vista, FL 32830-1000 8. In addition to himself or herself, Owner designates the form	Telephone Number 407-934-6052
Address P. O. Box 10000, Lake Buena Vista, FL 32830-100	0
In addition to himself or herself, Owner designates the for	ollowing to receive a copy of the Lienor's
Notice as provided in §713.13(1)(b), Florida Statutes.	
Name	Telephone Number
Address	
 Expiration date of notice of commencement (the expiration unless a different date is specified) 09/30/2015 	n date will be 1 year from the date of recording
NING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EX CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SEC' ULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. ORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RE	TION 713.13, FLORIDA STATUTES, AND CAN A NOTICE OF COMMENCEMENT MUST BE IF YOU INTEND TO OBTAIN FINANCING, CONSULT CORDING YOUR NOTICE OF COMMENCEMENT
Mu Jucan	SEPLAMER/NDWF
ture of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Par	tner/Manager Signatory's Title/Office
foregoing instrument was acknowledged before me this day	volub 2015 by Chris Dickman
day	y of LOS by CMS DICKING name of person
Authorized Signatory for Wa Type of authority, e.g., officer, trustee, attorney in fact Name of	17 Disney World Resort
Randi C	• • • • • • • • • • • • • • • • • • • •
Signature of Notary Public – State of Florida Pri	int, type, or stamp commissioned name of Notary Public
	· · · · · · · · · · · · · · · · · · ·
Personally Known X OR Produced ID Type of ID Produced	
Type of its Produced	

Form content revised: 01/23/14





Prepared by/record and return to:

1

Walt Disney World Resort Attn: Rich Wills P.O. Box 10000 Lake Buena Vista, FL 32830-1000 DOC# 20150380344 B: 10955 P: 4301 07/23/2015 12:04:05 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



Permit No.

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this notice of commencement.

- Description of property: Legal description attached
- General description of improvements: Mechanical
- Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
- Contractor (name and address): Ferron Services and Contracting (a)
 - Contractor's phone number: 407-422-3551 (b)
- 5. Suretv:
 - Name and address: (a)
 - (b) Phone number:
 - (c) Amount of Bond:
- Lender (name and address): 6. (a)
 - Lender's phone number: (b)
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section <u>713.13</u> (1)(a)7., Florida Statues: (name and address):

 Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - Phone numbers of designated persons: (407) 828-3582 (b)
- 8. In addition to himself or herself, Owner designates Jonny Seamon to receive a copy of the **Lienor's Notice** as provided in Section <u>713.13</u> (1)(b), Florida Statutes DavDa Phone number of person or entity designated by owner: 407-934-5172
 - (b)
 - Expiration date of notice of commencement (the expiration date is 1 year from the date of recording 9. unless a different date is specified): 7-22-16

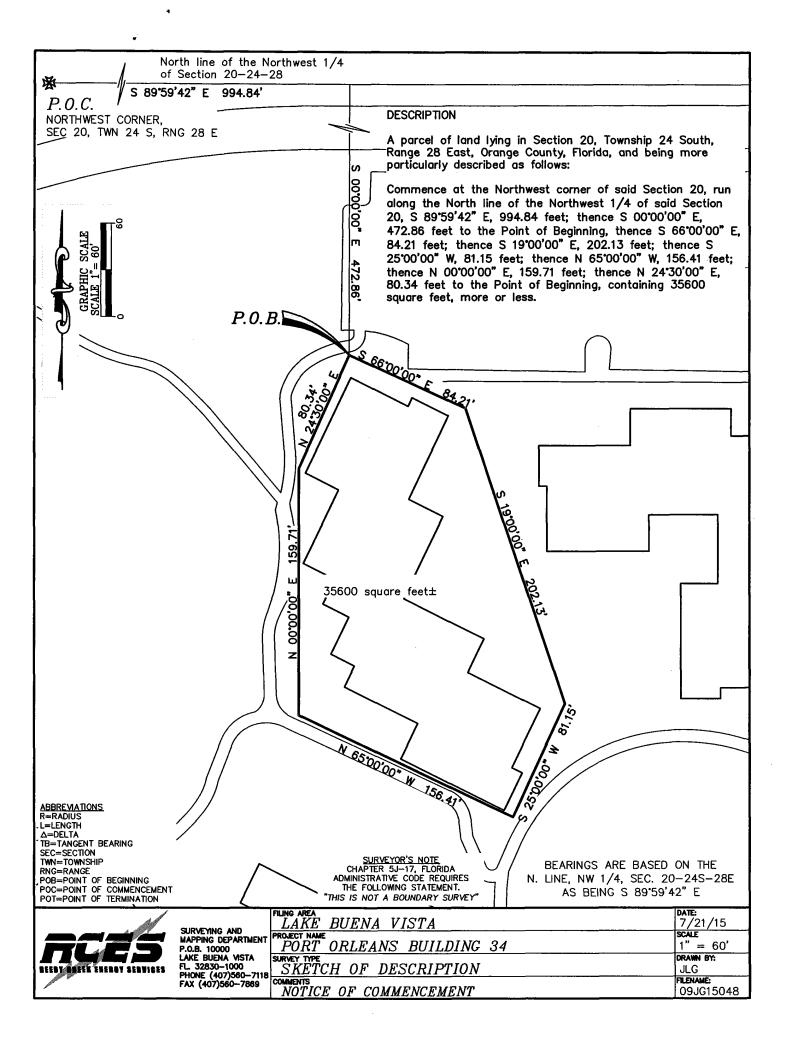
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION $\underline{713.13}$, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT 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. Seamo Xon Signatory's Printed Name/Title/Office О Signature of Owner (or O Authorized officer/Director/Partn The foregoing instrument was acknowledged before me this 20 15 DUONATHA Walt Disney World Resort Authorized Signatory (Type of authority, e.g., of Norsi / Public State of Plorida Nancy A Kohlman My Commission EE 211485 (*) Personally Known OR Type of ID Produced Expires 09/07/2016 Verification pursuant to Section 92.525 ,Florida Statutes: Under penalties of perjury, Ld

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

Sean

_ Signature of Natural Person Signing Above



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

Altn: Cameron Tysor P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150380345 B: 10955 P: 4303 07/23/2015 12:04:05 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO



NOTICE OF COMMENCEMENT State of Florida, County of Orange The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statues, the following information is provided in this Notice of Commencement. 1. Description of property (legal description of the property, and street address if available) See attached legal description 2. General description of improvement Iron Work 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 Owner listed above) Name Address 4. Contractor Name Southeastern Construction & Maint. Telephone Number 407-933-7700 Address 4712 Old Tampa Hwy, Kissimmee, FL 34746 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 receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes. Name Cameron Tysor Telephone Number 407-824-5676 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) 07/29/2016 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. (grea er or Lessee, or Owner's or The foregoing instrument was acknowledged before me this day of m/ Authorized Signatory Walt Disney World Resort Type of a e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

mp name of Notary Public

Kelly L Nobles
My Commission EE 220221

Expires 07/29/2016

Notary Public State of Florida

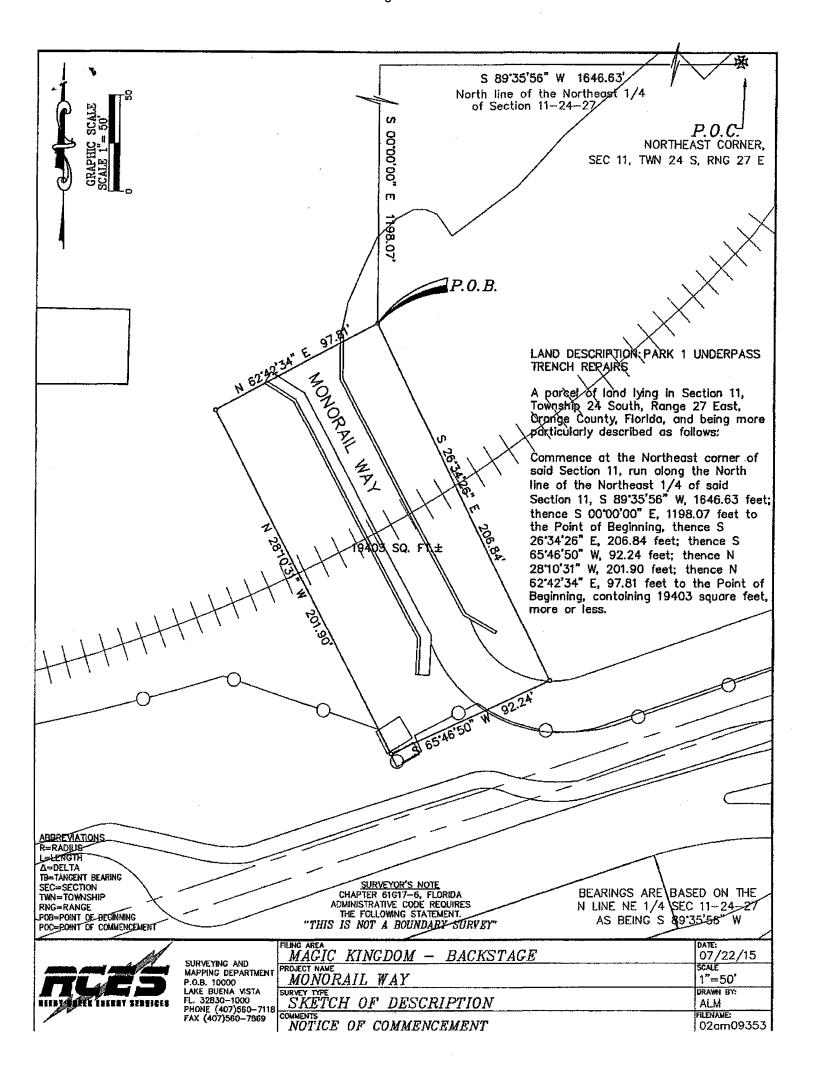
Print, type, or sta

Notary Public - State of Florida

OR Produced ID

Personally Known

Type of ID Produced



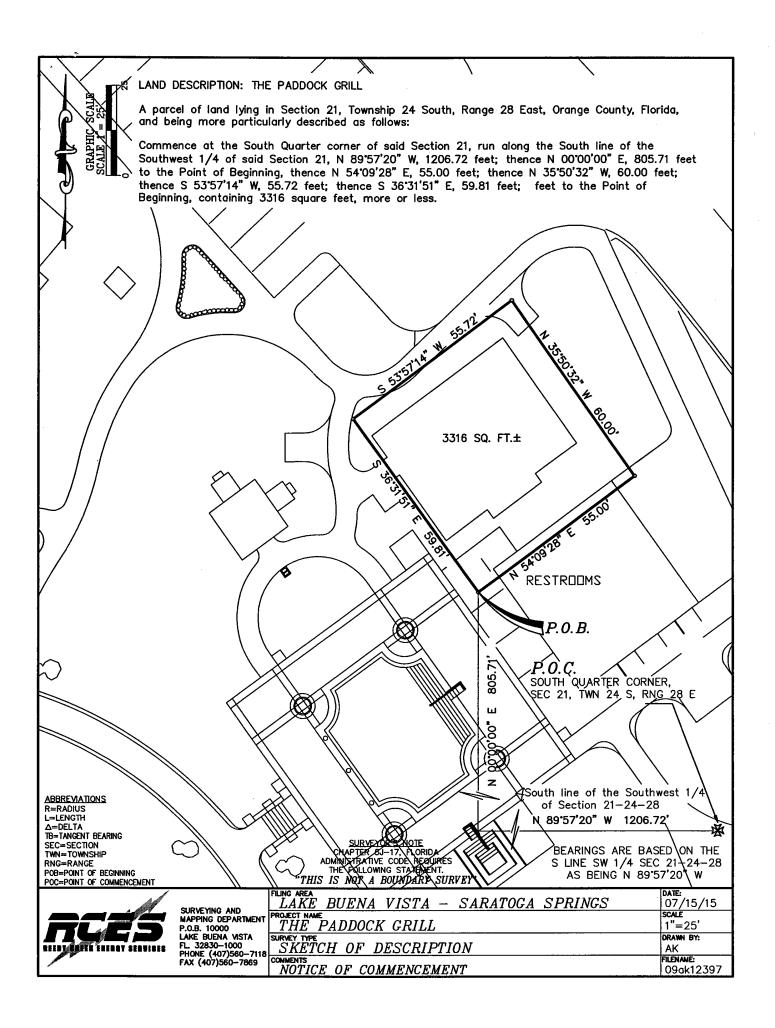
Prepared by/record and return to: Walt Disney World Resort Attn: Don Hughes P.O. Box 10000 Lake Buena Vista, FL 32830-1000

8.

		Permit No Tax Folio No
		NOTICE OF COMMENCEMENT
Stat	e of F	orida, County of Orange
The with	under Chap	signed hereby gives notice that improvements will be made to certain real property, and in accordance ter 713, Florida Statutes, the following information is provided in this notice of commencement.
1.	Des	cription of property: Saratoga Springs Paddock Pool
2.	Gen	eral description of improvements: Mechanical
3,	Owr (a)	ner Information: Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
	(b)	Interest in property: Owner Name and address of fee simple titleholder (if other than Owner):
4.	(a)	Contractor (name and address): LO-Temp Engineering Inc. 1001 Crown Park Circle Winter Garden Fl. 34787
	(b)	Contractor's phone number: 407-654-4086
5.	Sure (a) (b) (c)	ety: Name and address: Phone number: Amount of Bond;
6.	(a) (b)	Lender (name and address): Lender's phone number:
, 7 ,	(a) (b)	Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section. <u>713:13</u> (1)(a)7., Florida Statues: (name and address): Dave Ellts., Sourcing & Procurement Administration, P.O., Box 10000, Lake Buena Vista, Florida 32830-1000 Phone numbers of designated persons: (407) 828-3582
	(a) (b)	In addition to himself or herself, Owner designates Elaine Schomburg-LaFleur of Saratoga Springs to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes.DavDa Phone number of person or entity designated by owner: 407-827-4868
9.	Ехрі	ration date of notice of commencement (the expiration date is 1 year from the date of recording ss a different date is specified): 11/2/15
OF C SECT IMPR POST CONS	OMMI TION ? OVEN TED O SULT	TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE ENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, 13.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR MENTS TO YOUR PROPERTY A NOTICE OF COMMENCEMENT MUST BE RECORDED AND IN THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING 132E OF COMMENCEMENT.
:	4	Signature of Owner Signatory's Printed Name/Title/Office
8.3 %		ore Authorized officency action Protection age of the Commission of States o
		Authorized Signatory Walt Disney World Resort
	Si Person	fauthority, e.g., efficer, trustee, attorney-in-fact) (name of party on behalf of whom instrument was executed) (Print, Top 3, Signity Contractions All Market (Policy Ruce)) (Print, Top 3, Signity Contractions All Market (Policy Ruce)) (Print, Top 3, Signity Contractions All Market (Policy Ruce)) (Print, Top 3, Signity Contractions Contractions All Market (Policy Ruce)) (Print, Top 3, Signity Contraction EEE 211465) (Print, Top 3, Signity Contraction
		pursuant to Section 92.525 Florida Statutes: Under penalties of parjury, I declare that I have read
the f	oregold	g and that the facts stated in it are true to the best of my knowledge and belief.

DOC# 20150380346 B: 10955 P: 4305 07/23/2015 12:04:05 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO





Folio/Parcel Identification Number:

Prepared by and Return to:

Walt Disney World Resort - FAM

Attn: Michael Mcginnis

Type of ID Produced

P.O. Box 10000

Lake Buena Vista, FL 32830-1000

DOC# 20150380347 B: 10955 P: 4307 07/23/2015 12:04:05 PM Page 1 of 2 Rec Fee: \$18.50 Martha O. Haynie, Comptroller Orange County, FL MB - Ret To: WALT DISNEY WORLD CO

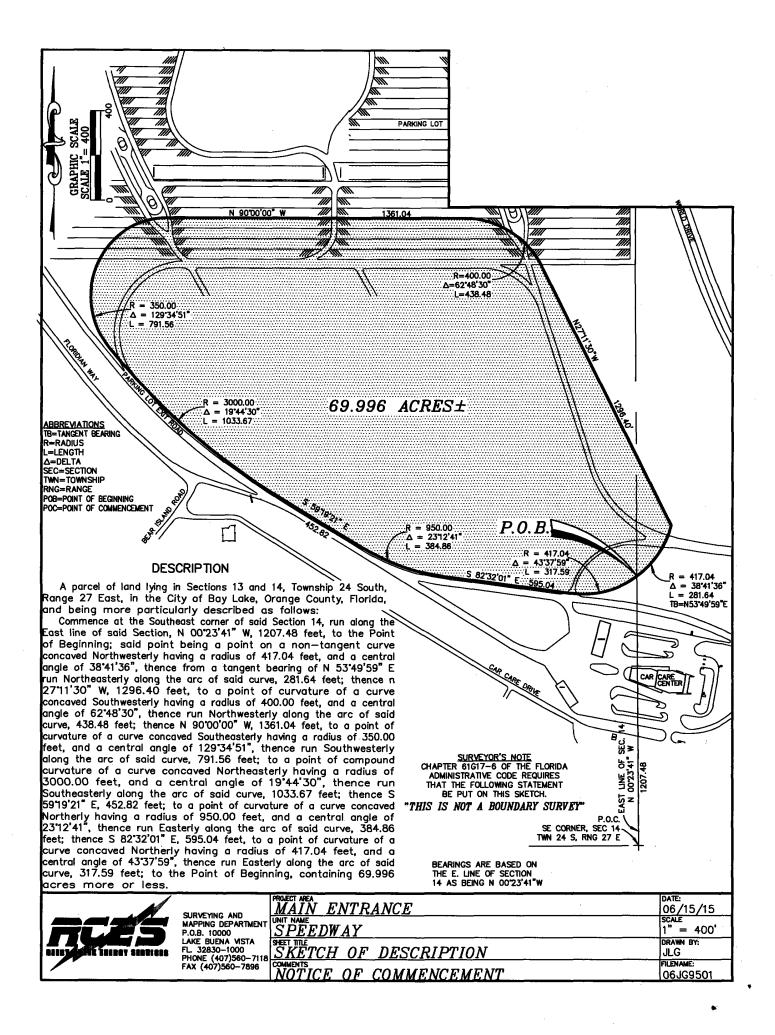


NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1.	Description of property (legal description of the property See Legal Description	ty, and street address if available)
2.	General description of improvement	
	Roadwork	
3.	Owner information or Lessee information if the Lessee	contracted for the improvement
.	Name Walt Disney World Resort	oomitaatea for the improvement
	Address P.O. Box 10000, Lake Buena Vista, FL 32830	
	Interest in Property Owner	
	Name and address of fee simple titleholder (if differe	ant from Owner listed above)
	Name ,	•
	Address	
1.	Contractor	
т.		Talanhana Number 407 656 0255
	Name Ranger Construction Industries Inc	Telephone Number 407-656-9255
.	Address 1200 Elboc Way, Winter Garden, FL 34787	
5.	Surety (if applicable, a copy of the payment bond is attach	
	Name	Telephone Number
,	Address	Amount of Bond \$
3.	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)	
	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 Michael Mcginnis	Telephone Number
	Address P.O. Box 10000, Lake Buena Vista, Florida 328	330-1000
9.	Expiration date of notice of commencement (the expir	ation 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)
	05/27/20)16
CON PAY THE ATT	RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER SIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SE ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE IS JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO ORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOT DEEP DEEP OF D	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 ICE OF COMMENCEMENT. Segoing notice of commencement and that the facts
	1 1 1 2 1 1	,
	Michael MICHAEL	MCGINNIS PRESENT MANAGER FAM
Les	Signature of Owner or Lessee, or Owner's or see's Authorized Officer/Director/Partner/Manager	MCGINNIS PRIJECT MANAGER FRM Signatory's Printed Name/Title/Office
Γhe	e foregoing instrument was acknowledged before me this	day of July 2015, by Michael Ma signal month/year
as_	Authorized Signatory	for Walt Disney World Resort
	Type of authority, e.g., officer, trustee, attorney in fact	Name of party on behalf of whom instrument was executed
	Signature of Notary Public - State of Florida	Print, type, or stamp name of Notary Public
P	ersonally Known OR Produced ID	Notary Public State of Florida Kelly L Nobles



Permit Number: BD15-0014		
Folio/Parcel ID #:		DOC# 20150384383 B: 10956 P: 3733
Prepared by: Kathy Rey - Goff Communi	cations, Inc.	07/24/2015 02:06:22 PM Page 1 of 1
6448 Parkland Drive		Rec Fee: \$10.00 Martha O. Haynie, Comptroller
Sarasota, FL 34243		Orange County, FL MB - Ret To: GOFF COMMUNICATIONS INC
Return to: Kathy Rey - Goff Communications	. Inc.	MB - Ret To: GOFF COMMUNICATIONS INC
6448 Parkland Drive		
Sarasota, FL 34243		
Animal Kingdom 2C NOTICE OF COM	MENCEMENT	
	INICIACEINICIAI	
State of Florida, County of Orange	م ما الثين في مسيد	and to contain used were said to secondary
		nade to certain real property, and in accordance
with Chapter 713, Florida Statutes, the following 1. Description of property (legal description		
662 W. Savannah Circle, Lake Buena Vis		
2. General description of improvement	sta, Lengthy Legar	Allacited
Swap out one antenna per sector, install	2 TMA's per secto	r and install oncy
3. Owner information or Lessee information		
Name Walt Disney Parks and Resorts US		ontracted for the improvement
Address PO Box 10000, Lake Buena Vist		
	a, FL 32030	
Interest in Property Owner Name and address of fee simple titleho	nidae (it dittaunut f-	om Oumar listed above
A.*	•	·
Name	······································	
Address	·····	
4. Contractor		Tolonhone Number 041 055 7406
Name Goff Communications, Inc.	EI 24242	Telephone Number 941-955-7106
Name Goff Communications, Inc. Address 6448 Parkland Drive, Sarasota,	<u>-1 54243</u>	1
5. Surety (II applicable, a copy of the payme	ni bond is allached	<i>i)</i>
Name		Telephone Number
Address		Amount of Bond \$
6. Lender		Tolonhone Museban
		Telephone Number
Address	ignated by Owne	r upon whom notices or other documents may
be served as provided by §713.13(1)(a)		
Name Frank Ruscio	i, riorida Statute	Telephone Number 407-828-2655
Address PO Box 10000, Lake Buena Vist	a FI 32830	relephone Number 407-020-2000
8. In addition to himself or herself, Owne		following to receive a copy of the Liener's
Notice as provided in §713.13(1)(b), Flo	ı uesiyilales ille i oridə Statlitoc	onowing to receive a copy of the Lienor's
Name Frank Ruscio	Mua Statutes.	Tolonhana Number 407 828 2655
Address PO Box 10000, Lake Buena Vist	a El 32830	Telephone Number 407-828-2655
		on date will be 1 year from the date of recording
unless a different date is specified)	intent (the expiration	on date will be 1 year from the date of recording
uniess a different date is specified)		
RNING TO OWNER: ANY PAYMENTS MADE BY THE C E CONSIDERED IMPROPER PAYMENTS UNDER CHAP SULT IN YOUR PAYING TWICE FOR IMPROVEMENTS CORDED AND POSTED ON THE JOB SITE BEFORE TH TH YOUR LENDER OR AN APPORNEY BEFORE COMM	PTER 713, PART I, SEC TO YOUR PROPERTY HE FIRST INSPECTION	CTION 713.13, FLORIDA STATUTES, AND CAN . A NOTICE OF COMMENCEMENT MUST BE I. IF YOU INTEND TO OBTAIN FINANCING. CONSULT
Trank Muses		Say Man
nature of Owner or Lessee, or Owner's or Lessee's Author	rized Officer/Director/Pa	artner/Manager Signatory's Title/Office
e foregoing instrument was acknowledged before	<u> </u>	month/year name of person
Type of authority, e.g., officer, trustee) attorney in fa	for W (of party on behalf of whom instrument was executed
Janey a Schneid	és)	
Signature of Notary Public - State of Florida	H	Print, type or stemp commissioned name of Notes Public
Personally Known OR Produced ID		NANCY A SCHNEIDER Commission # FF 26382 My Commission Expires
1 JPC OF ID FROUNCEU		West 15 0017