

Rec Fee: \$10.00

Deed Doc Tax: \$0.00

Mortgage Doc Tax: \$0.00

Intangible Tax: \$0.00

Martha O. Haynie, Comptroller

Orange County, FL

Ret To: SIMPLIFILE LC

Permit Number: BD15-0079
Folio/Parcel Identification Number: _____
Prepared by: Maria McCabe
Buena Vista Construction Company
Return to: P.O. Box 10000, Lake Buena Vista, FL 32830

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

- 1. **Description of property** (legal description of the property, and street address if available)
EC Germany avillon Glas & Porzellan Wall Bay, 1750 Avenue of the Stars, Bay Lake, FL 32830 JMEC6010
- 2. **General description of improvement**
Provide labor, material and/or electrical for construction
- 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 _____
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
- 4. **Contractor**
Name Buena Vista Construction Company Telephone Number 407-934-6070
Address P.O. Box 10000, 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. **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 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 following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name David Caesar, Construction Manager Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, Florida 32830
- 9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

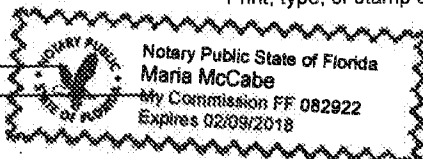
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED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

The foregoing instrument was acknowledged before me this 15 day of Sep 15 by Tom Troffer
month/year name of person
as Director for Buena Vista Construction Company
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed
Maria McCabe Maria McCabe
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID
Type of ID Produced _____



Permit Number: _____
Folio/Parcel ID #: _____
Prepared by: _____

DOC # 20150633696 B: 11024 P: 2264
12/08/2015 09:27 AM Page 1 of 1
Rec Fee: \$10.00
Deed Doc Tax: \$0.00
Mortgage Doc Tax: \$0.00
Intangible Tax: \$0.00
Martha O. Haynie, Comptroller
Orange County, FL
Ret To: CSC INC

Return to: Abby Brandenburg
1365 AVENUE OF THE STARS/PO BOX 10321
LAKE BUENA VISTA, FL 32830

NOTICE OF COMMENCEMENT

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

- Description of property** (legal description of the property, and street address if available)
1600 AVENUE OF THE STARS, BAY LAKE, FL
- General description of improvement**
NORWAY ATTRACTION REHAB SHOWSET INSTALLATION
- Owner information or Lessee information if the Lessee contracted for the improvement**
Name WALT DISNEY IMAGINEERING
Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321
Interest in Property N/A
Name and address of fee simple titleholder (if different from Owner listed above)
Name N/A
Address _____
- Contractor**
Name ADIRONDACK SCENIC, INC. Telephone Number 407-342-2535
Address 4173 CRUMP ROAD #16, LAKE HAMILTON, FL 33851
- Surety** (if applicable, a copy of the payment bond is attached)
Name N/A Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name N/A Telephone Number _____
Address _____
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name RUSSELL STOKES Telephone Number 407-560-7697
Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321
- 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 407-560-3660
Address PO BOX 10321, LAKE BUENA VISTA, FL 32830-0321
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

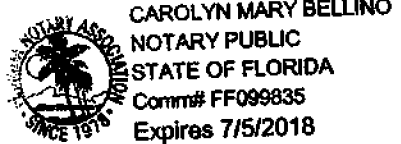
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED 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 [Signature] VP & GM
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 7 day of Dec by John C. Blicht
month/year name of person
as Vice President & General Manager for Walt Disney Imagineering
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed
Carolyn Bellino Carolyn Bellino
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID _____
Type of ID Produced _____



Permit Number:
Folio/Parcel Identification Number:
Prepared by and Return to:
Walt Disney World Resort - FAM
Attn: Kent (Robert) Bradley
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 made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. **Description of property** (legal description of the property, & street address if available)
SEE ATTACHED
2. **General description of improvement**
POOL & FILTER RENOVATION
3. **Owner information of 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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
Address: _____
4. **Contractor**
Name: Welbro Building Corp Telephone Number: 407-475-0800
Address: 2301 Maitland Center Parkway, Ste 25, Maitland, FL 32751
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: Kent (Robert) Bradley Telephone Number: (407)939-4771
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)

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 PAYMENT 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 for 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.

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

Kent Bradley / PMA / FAM
Signatory's Printed Name/Title/Office

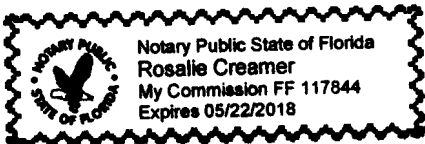
The foregoing instrument was acknowledged before me this 8th day of Dec 2015, by R. Kent Bradley
month/year

as Authorized Signatory
Type of authority, e.g., officer, trustee, attorney in fact
Rosalie Creamer
Signature of Notary Public - State of Florida

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Print, type, or stamp name of Notary Public

Personally known OR Produced ID _____
Type of ID Produced _____



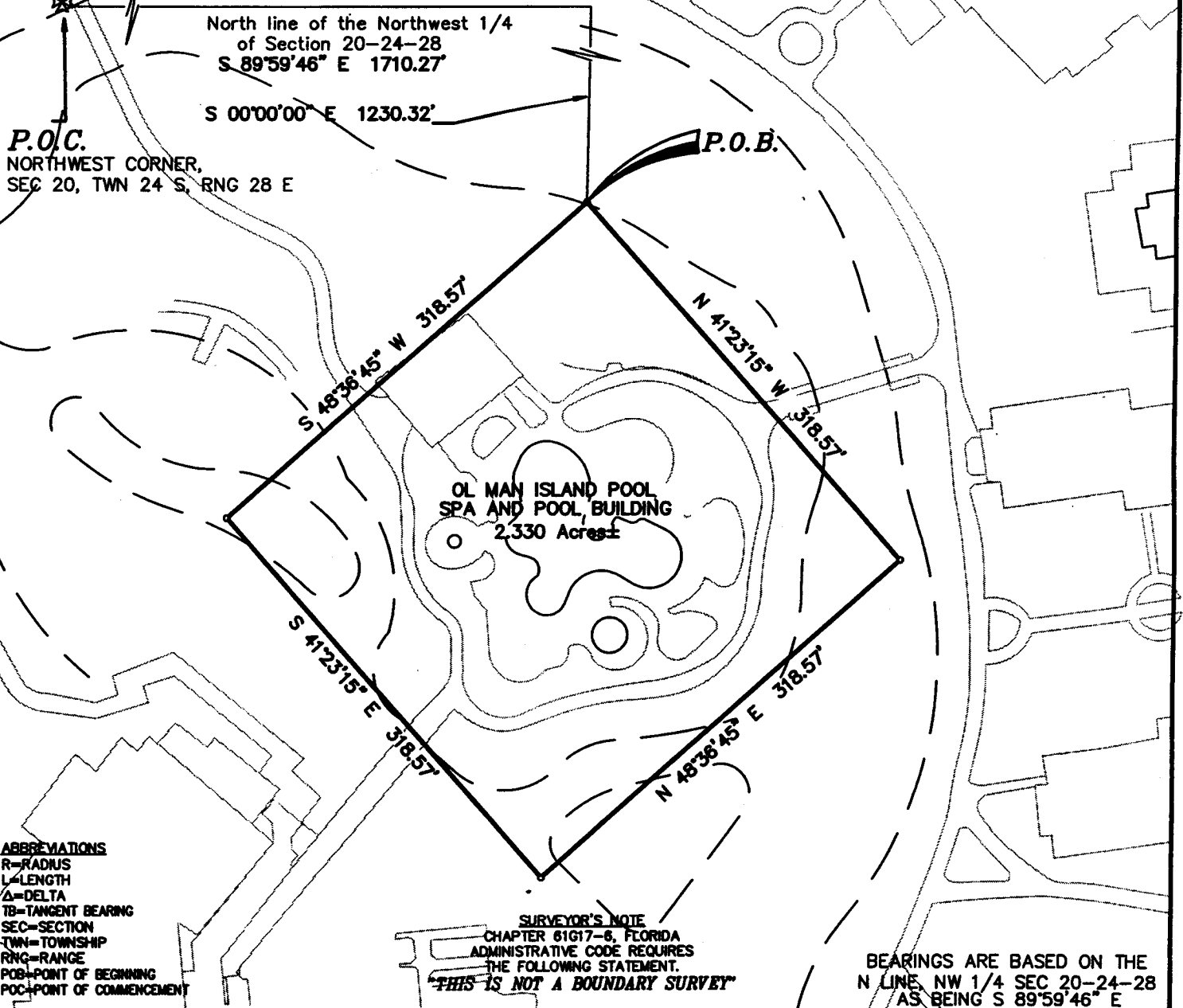
DOC# 20150634832 B: 11024 P: 4770
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT



LAND DESCRIPTION: PORT ORLEANS RIVERSIDE OL' MAN ISLAND POOL, SPA, AND POOL BUILDING

A PARCEL OF LAND LYING IN SECTION 20, TOWNSHIP 24 SOUTH, RANGE 28 EAST, ORANGE COUNTY, FLORIDA, AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCE AT THE NORTHWEST CORNER OF SAID SECTION 20, RUN ALONG THE NORTH LINE OF THE NORTHWEST 1/4 OF SAID SECTION 20, S 89°59'46" E, 1710.27 FEET; THENCE S 00°00'00" E, 1230.32 FEET TO THE POINT OF BEGINNING THENCE S 48°36'45" W, 318.57 FEET; THENCE S 41°23'15" E, 318.57 FEET; THENCE N 48°36'45" E, 318.57 FEET; THENCE N 41°23'15" W, 318.57 FEET TO THE POINT OF BEGINNING, CONTAINING 2.330 ACRES, MORE OR LESS.



P.O.C.
NORTHWEST CORNER,
SEC 20, TWN 24 S, RNG 28 E

P.O.B.

OL' MAN ISLAND POOL
SPA AND POOL BUILDING
2.330 Acres ±

- ABBREVIATIONS**
 R=RADIUS
 L=LENGTH
 Δ=DELTA
 TB=TANGENT BEARING
 SEC=SECTION
 TWN=TOWNSHIP
 RNG=RANGE
 POB=POINT OF BEGINNING
 POC=POINT OF COMMENCEMENT

SURVEYOR'S NOTE
 CHAPTER 61G17-6, FLORIDA
 ADMINISTRATIVE CODE REQUIRES
 THE FOLLOWING STATEMENT.
"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
 N LINE, NW 1/4 SEC 20-24-28
 AS BEING S 89°59'46" E



SURVEYING AND
 MAPPING DEPARTMENT
 P.O.B. 10000
 LAKE BUENA VISTA
 FL 32830-1000
 PHONE (407)580-7118
 FAX (407)580-7869

FILING AREA LAKE BUENA VISTA - P.O. RIVERSIDE	DATE: 9/25/08
PROJECT NAME OL' MAN ISLAND POOL SPA AND POOL BUILDING	SCALE 1:100
SURVEY TYPE SKETCH OF DESCRIPTION	DRAWN BY: ALM
COMMENTS NOTICE OF COMMENCEMENT	FILENAME: 09AM08283

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

DOCH 20150634833 B: 11024 P: 4772
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT

NOTICE OF COMMENCEMENT



State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
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: _____
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: 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 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)

Mar 4, 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 PAYMENT 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.

J-KM 20
Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager

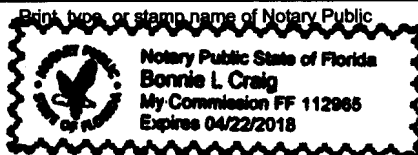
James K Marshall Manager - FAM
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 8 day of Dec., by James K Marshall
month/year
2015

as Bonnie L Craig Authorized Signatory
Type of authority, e.g., officer, trustee, attorney in fact
Signature of Notary Public - State of Florida

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Personally known OR Produced ID
Type of ID Produced _____



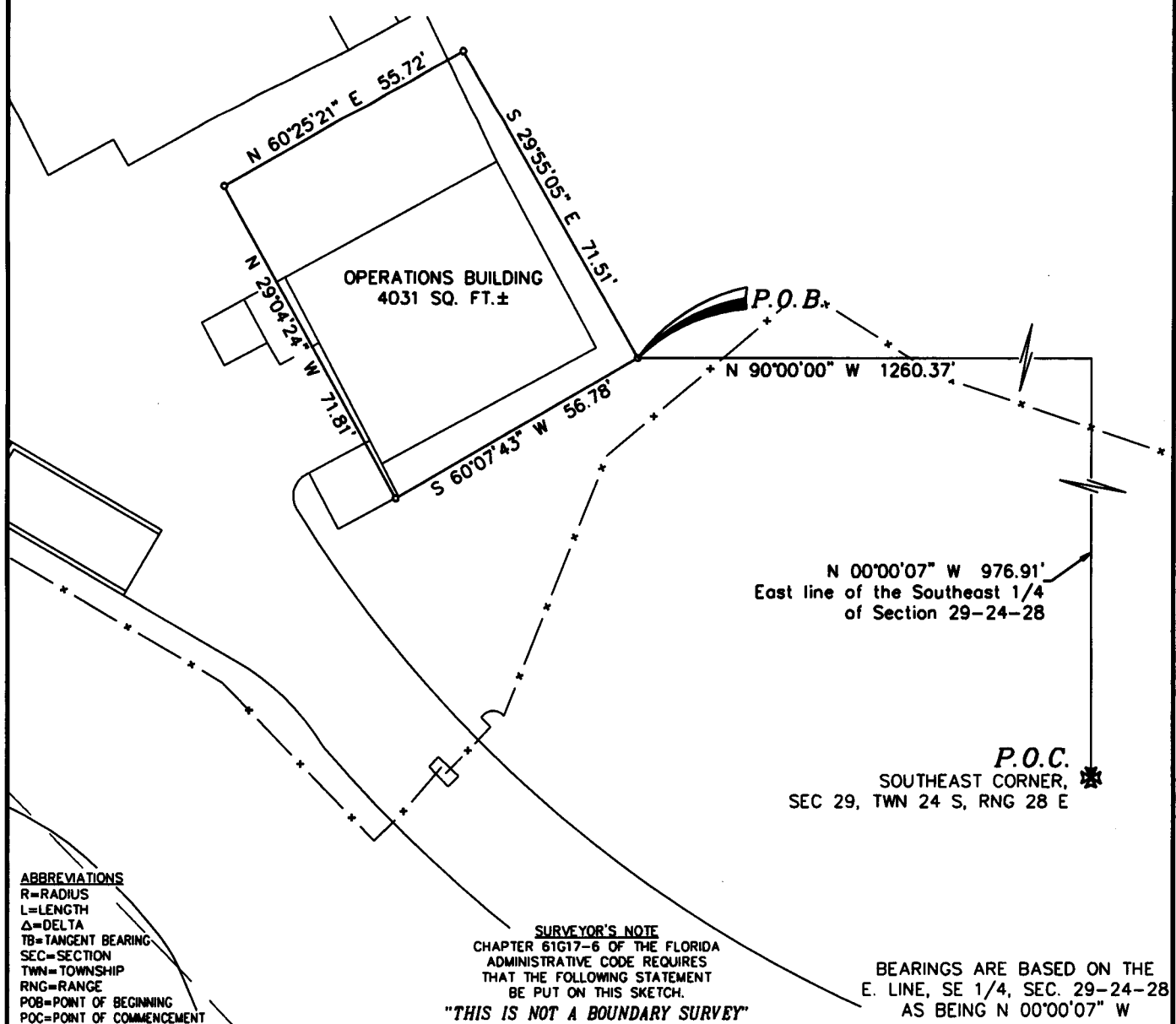
LAND DESCRIPTION: OPERATIONS BUILDING

A parcel of land lying in Section 29, Township 24 South, Range 28 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Southeast corner of said Section 29, run along the East line of the Southeast 1/4 of said Section 29, N 00°00'07" W, 976.91 feet; thence N 90°00'00" W, 1260.37 feet to the Point of Beginning; thence S 60°07'43" W, 56.78 feet; thence N 29°04'24" W, 71.81 feet; thence N 60°25'21" E, 55.72 feet; thence S 29°55'05" E, 71.51 feet to the Point of Beginning, containing 4031 square feet, more or less.



MAIN FOODS.



- ABBREVIATIONS**
 R=RADIUS
 L=LENGTH
 Δ=DELTA
 TB=TANGENT BEARING
 SEC=SECTION
 TWN=TOWNSHIP
 RNG=RANGE
 POB=POINT OF BEGINNING
 POC=POINT OF COMMENCEMENT

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, SE 1/4, SEC. 29-24-28 AS BEING N 00°00'07" W



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

PROJECT AREA LAKE BUENA VISTA - TYPHOON LAGOON	DATE: 12/8/15
UNIT NAME OPERATIONS BUILDING	SCALE 1" = 30'
SHEET TITLE SKETCH OF DESCRIPTION	DRAWN BY: MF
COMMENTS NOTICE OF COMMENCEMENT	FILENAME: 09mf03533

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

Document Number: 20150546585
Book Number: 11000
Page Number: 6189

AMENDMENT TO NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
2. **General description of improvement**
Roofing
3. **Owner information of 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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
Address: _____
4. **Contractor**
Name: RSS ROOFING SERVICES & SOLUTIONS Telephone Number: 407-883-5821
Address: 216 South Norton Street, Orlando, FL 32805
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: 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 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)

Mar 18, 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 PAYMENT 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]
Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager

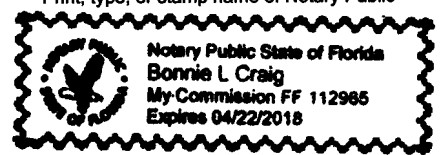
ANNE E M. BUCHELE / PLANNER
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 8th day of Dec 2015, by Anne EM Buchele
month/year

as Bonnie L Craig
Type of authority, e.g., officer, trustee, attorney in fact
Signature of Notary Public - State of Florida

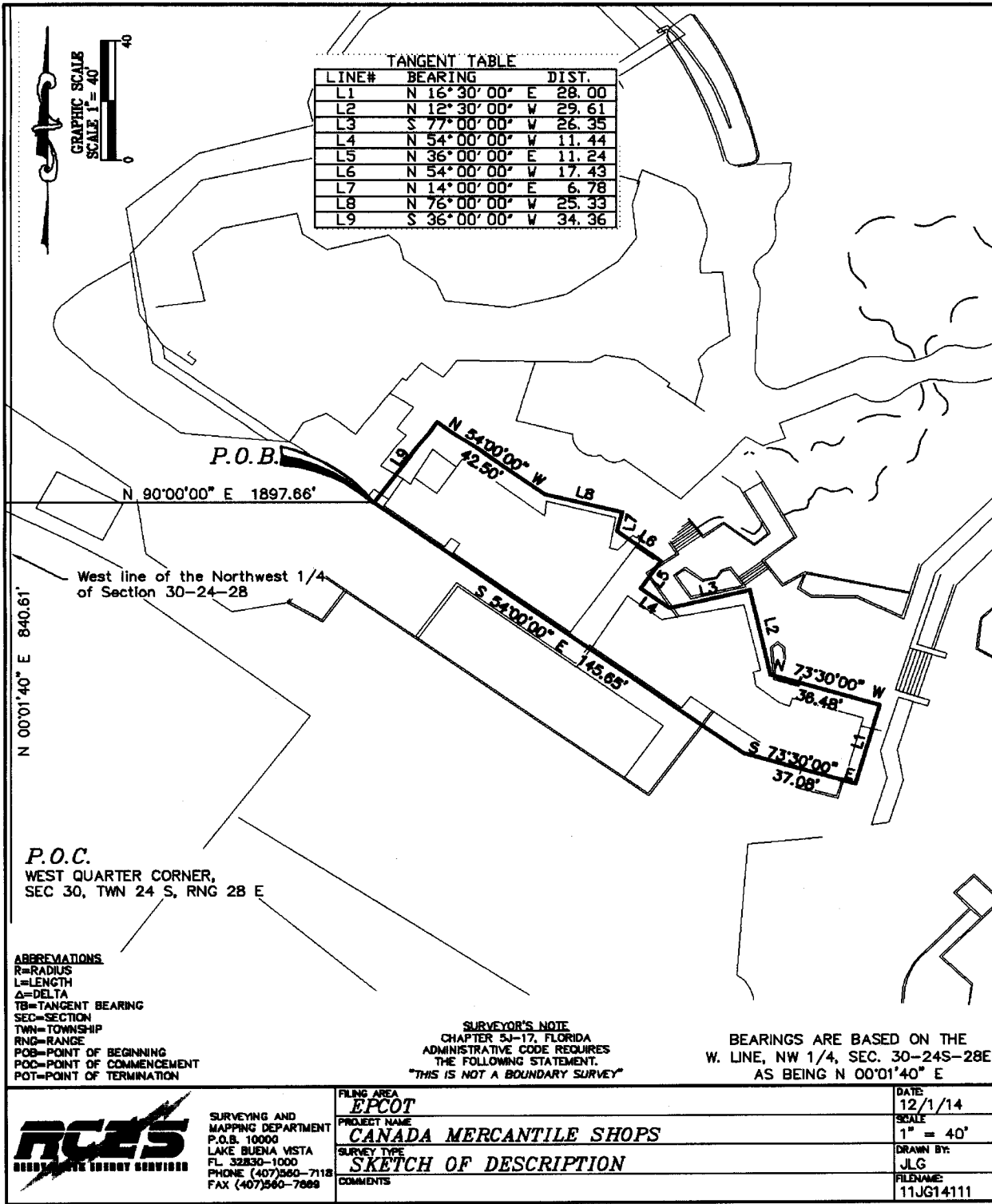
for Walt Disney World Resort
Name of party on behalf of whom instrument was executed
Print, type, or stamp name of Notary Public

Personally known OR Produced ID



DOCH 20150634834 B: 11024 P: 4774
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT





DESCRIPTION

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 West Quarter corner of said Section 30, run along the West line of the Northwest 1/4 of said Section 30, N 00°01'40" E, 840.61 feet; thence N 90°00'00" E, 1897.66 feet to the Point of Beginning, thence S 54°00'00" E, 145.65 feet; thence S 73°30'00" E, 37.08 feet; thence N 16°30'00" E, 28.00 feet; thence N 73°30'00" W, 36.48 feet; thence N 12°30'00" W, 29.61 feet; thence S 77°00'00" W, 26.35 feet; thence N 54°00'00" W, 11.44 feet; thence N 36°00'00" E, 11.24 feet; thence N 54°00'00" W, 17.43 feet; thence N 14°00'00" E, 6.78 feet; thence N 76°00'00" W, 25.33 feet; thence N 54°00'00" W, 42.50 feet; thence S 36°00'00" W, 34.36 feet to the Point of Beginning, containing 6019 square feet, more or less.

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

DOCH 20150634835 B: 11024 P: 4776
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT

NOTICE OF COMMENCEMENT



State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
Address: _____
4. **Contractor**
Name: S&S Tile Roofing Company Telephone Number: (407) 696-4334
Address: 2949 State Road 434, West, Longwood, FL 32779
(if applicable, a copy of the payment bond is attached)
5. **Surety**
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: 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 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)

Apr 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 PAYMENT 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 for 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.

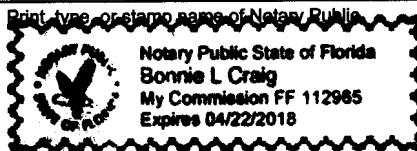
Anne Buchele
Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager

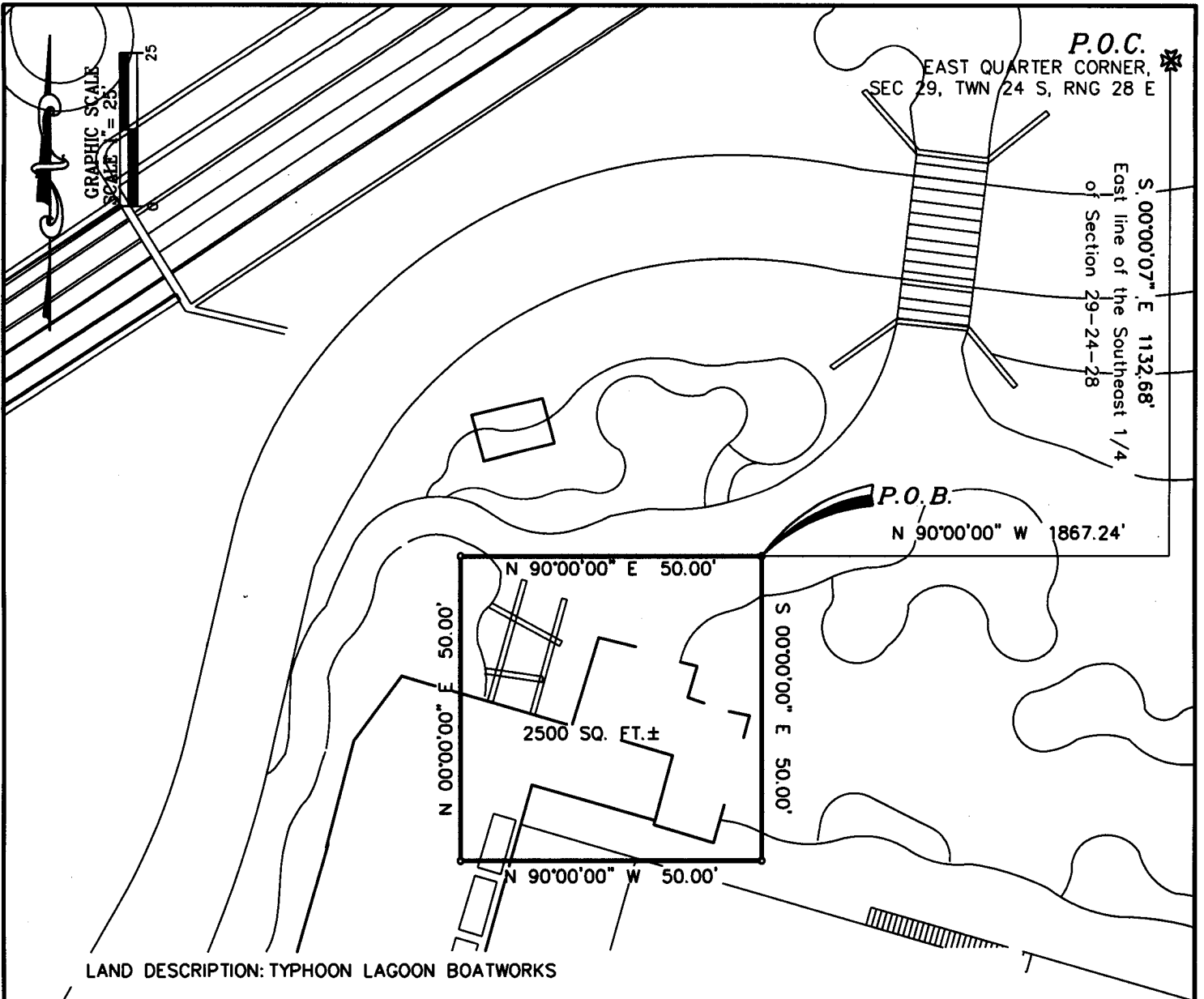
ANNE EM BUCHELE/PLANNER
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 8th day of Dec 2015, by Anne E.M. Buchele
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
Bonnie L Craig
Signature of Notary Public - State of Florida

Personally known OR Produced ID
Type of ID Produced _____





LAND DESCRIPTION: TYPHOON LAGOON BOATWORKS

A parcel of land lying in Section 29, 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 29, run along the East line of the Southeast 1/4 of said Section 29, S 00°00'07" E, 1132.68 feet; thence N 90°00'00" W, 1867.24 feet to the Point of Beginning, thence S 00°00'00" E, 50.00 feet; thence N 90°00'00" W, 50.00 feet; thence N 00°00'00" E, 50.00 feet; thence N 90°00'00" E, 50.00 feet; feet to the Point of Beginning, containing 2500 square feet, more or less.


ABBREVIATIONS

- R=RADIUS
- L=LENGTH
- Δ=DELTA
- TB=TANGENT BEARING
- SEC=SECTION
- TWN=TOWNSHIP
- RNG=RANGE
- PDB=POINT OF BEGINNING
- PDC=POINT OF COMMENCEMENT

SURVEYOR'S NOTE
 CHAPTER 5J-17, FLORIDA
 ADMINISTRATIVE CODE REQUIRES
 THE FOLLOWING STATEMENT.

"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
 E LINE SE 1/4 SEC 29-24-28
 AS BEING S 00°00'07" E

	SURVEYING AND MAPPING DEPARTMENT P.O.B. 10000 LAKE BUENA VISTA FL. 32830-1000 PHONE (407)560-7118 FAX (407)560-7869	FILING AREA LAKE BUENA VISTA - TYPHOON LAGOON	DATE: 11/24/15
	PROJECT NAME BOATWORKS	SCALE 1"=25'	DRAWN BY: AK
	SURVEY TYPE SKETCH OF DESCRIPTION	FILENAME: 09AK13078	
	COMMENTS NOTICE OF COMMENCEMENT		

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

DOCH 20150634836 B: 11024 P: 4778
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT

NOTICE OF COMMENCEMENT



State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
Address: _____
4. **Contractor**
Name: Tecta America Corp/Tecta America SE Telephone Number: (407) 330-9303
Address: 588 Monroe Rd., Sanford, FL 32771
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: 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 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)

Jun 3, 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 PAYMENT 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.

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

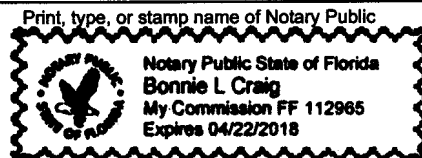
ANNE E M BUCHELE / PLANNER
Signatory's Printed Name/Title/Office

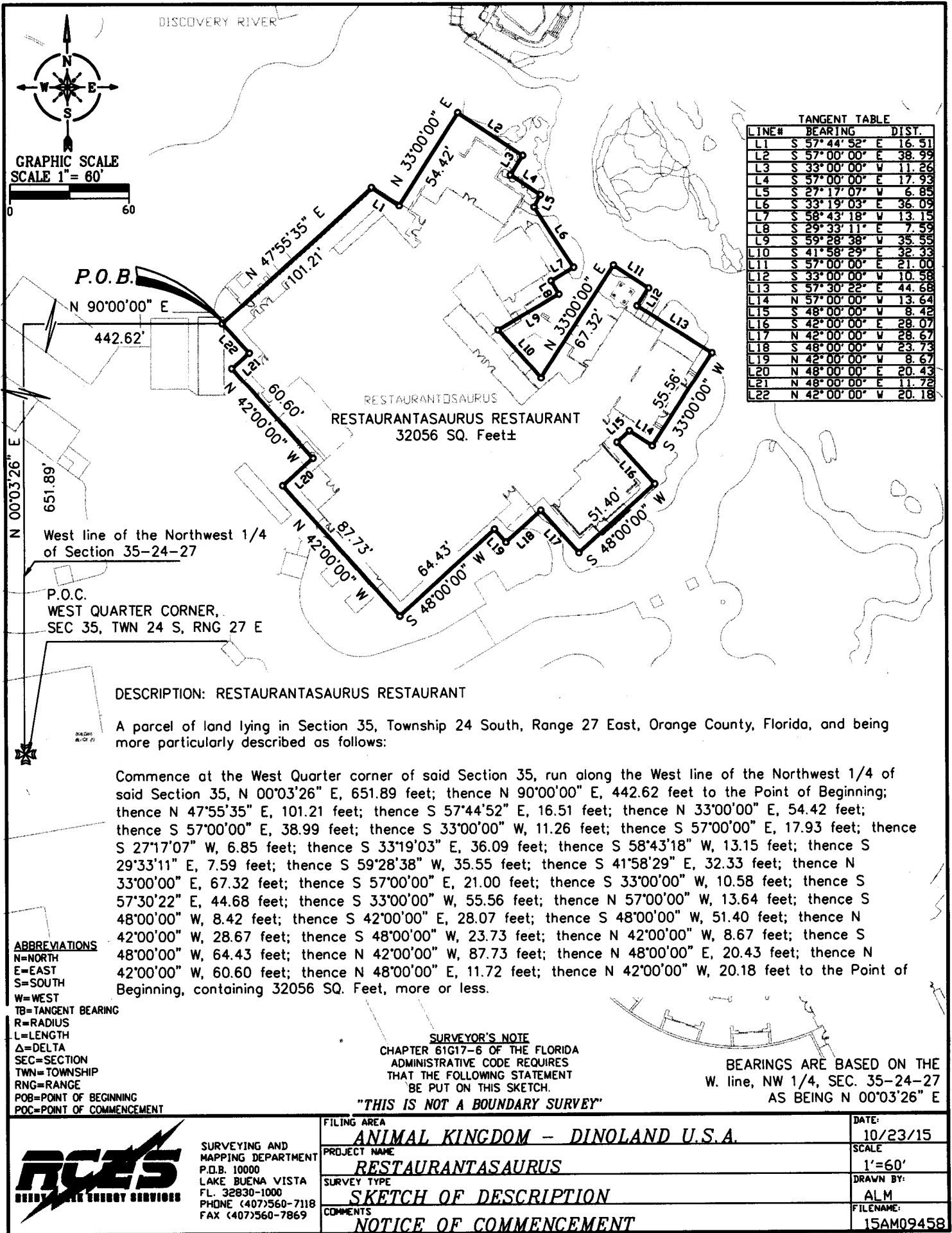
The foregoing instrument was acknowledged before me this 8th day of Dec. 2015, by Anne E.M. Buchele
month/year

as Bonnie L Craig Authorized Signatory
Type of authority, e.g., officer, trustee, attorney in fact
Signature of Notary Public - State of Florida

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Personally known X OR Produced ID _____
Type of ID Produced _____





LINE#	BEARING	DIST.
L1	S 57°44'52" E	16.51
L2	S 57°00'00" E	38.99
L3	S 33°00'00" W	11.26
L4	S 57°00'00" E	17.93
L5	S 27°17'07" W	6.85
L6	S 33°19'03" E	36.09
L7	S 58°43'18" W	13.15
L8	S 29°33'11" E	7.59
L9	S 59°28'38" W	35.55
L10	S 41°58'29" E	32.33
L11	S 57°00'00" E	21.00
L12	S 33°00'00" W	10.58
L13	S 57°30'22" E	44.68
L14	N 57°00'00" W	13.64
L15	S 48°00'00" W	8.42
L16	S 42°00'00" E	28.07
L17	N 42°00'00" W	8.67
L18	S 48°00'00" W	23.73
L19	N 42°00'00" W	8.67
L20	N 48°00'00" E	20.43
L21	N 48°00'00" E	11.72
L22	N 42°00'00" W	20.18

DESCRIPTION: RESTAURANTASURUS RESTAURANT

A parcel of land lying in Section 35, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the West Quarter corner of said Section 35, run along the West line of the Northwest 1/4 of said Section 35, N 00°03'26" E, 651.89 feet; thence N 90°00'00" E, 442.62 feet to the Point of Beginning; thence N 47°55'35" E, 101.21 feet; thence S 57°44'52" E, 16.51 feet; thence N 33°00'00" E, 54.42 feet; thence S 57°00'00" E, 38.99 feet; thence S 33°00'00" W, 11.26 feet; thence S 57°00'00" E, 17.93 feet; thence S 27°17'07" W, 6.85 feet; thence S 33°19'03" E, 36.09 feet; thence S 58°43'18" W, 13.15 feet; thence S 29°33'11" E, 7.59 feet; thence S 59°28'38" W, 35.55 feet; thence S 41°58'29" E, 32.33 feet; thence N 33°00'00" E, 67.32 feet; thence S 57°00'00" E, 21.00 feet; thence S 33°00'00" W, 10.58 feet; thence S 57°30'22" E, 44.68 feet; thence S 33°00'00" W, 55.56 feet; thence N 57°00'00" W, 13.64 feet; thence S 48°00'00" W, 8.42 feet; thence S 42°00'00" E, 28.07 feet; thence S 48°00'00" W, 51.40 feet; thence N 42°00'00" W, 8.67 feet; thence S 48°00'00" W, 23.73 feet; thence N 42°00'00" W, 8.67 feet; thence S 48°00'00" W, 64.43 feet; thence N 42°00'00" W, 87.73 feet; thence N 48°00'00" E, 20.43 feet; thence N 42°00'00" W, 60.60 feet; thence N 48°00'00" E, 11.72 feet; thence N 42°00'00" W, 20.18 feet to the Point of Beginning, containing 32056 SQ. Feet, more or less.

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

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 W. line, NW 1/4, SEC. 35-24-27 AS BEING N 00°03'26" E

	SURVEYING AND MAPPING DEPARTMENT P.O.B. 10000 LAKE BUENA VISTA FL. 32830-1000 PHONE (407)560-7118 FAX (407)560-7869	FILING AREA ANIMAL KINGDOM - DINOLAND U.S.A.	DATE: 10/23/15
	PROJECT NAME RESTAURANTASURUS	SCALE 1"=60'	DRAWN BY: ALM
	SURVEY TYPE SKETCH OF DESCRIPTION	COMMENTS NOTICE OF COMMENCEMENT	FILENAME: 15AM09458
	RESTAURANTASURUS RESTAURANT 32056 SQ. Feet±		

Prepared by/record and return to:
Walt Disney World Resort
Attn: Joe Alameda -DC-2 Office 2164
P.O. Box 10000
Lake Buena Vista, FL 32830-1000



Permit No. 3006804200

Tax Folio No. _____

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. Description of property: DC-2 (See Attached Legal Description).
2. General description of improvements: Plumbing - water Cooler
3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
4. (a) Contractor (name and address): Heichel Plumbing, Inc. 647 Business Park Blvd. Winter Garden, Florida 34787
 - (b) Contractor's phone number: 407 656 7073
5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
6. (a) Lender (name and address):
 - (b) Lender's phone number:
7. (a) Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(a)7., Florida Statutes: (name and address):
Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
 - (b) Phone numbers of designated persons: (407) 828-3582
8. (a) In addition to himself or herself, Owner designates Dave Ellis of Procurement to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes. DavDa
 - (b) Phone number of person or entity designated by owner:
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 12/7/2016

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.

[Signature]
Signature of Owner

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

Joe Alameda Manager
Signatory's Printed Name/Title/Office

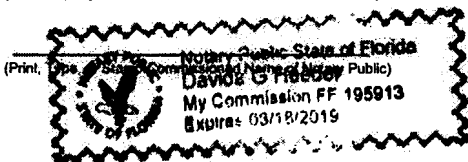
The foregoing instrument was acknowledged before me this 7 day of December 2015, by Jose Alameda

Authorized Signatory
(Type of authority, e.g., officer, trustee, attorney-in-fact)

[Signature]
Signature of Notary Public - State of Florida

Personally Known _____ OR Produced ID _____
Type of ID Produced _____

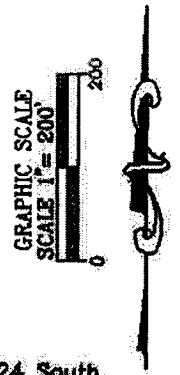
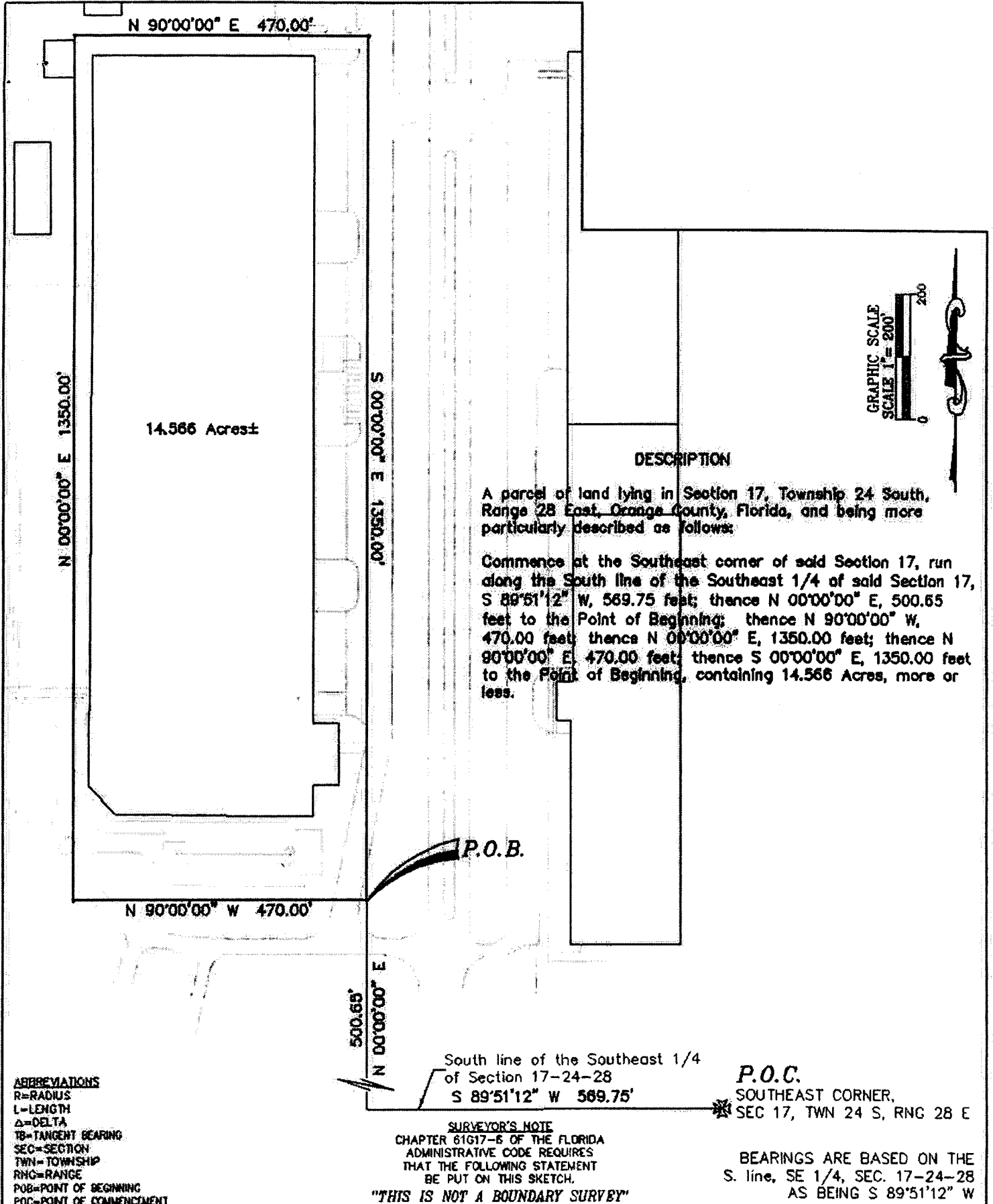
Walt Disney World Resort
(name of party on behalf of whom instrument was executed)



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

[Signature]

Signature of Natural Person Signing Above



DESCRIPTION

A parcel of land lying in Section 17, Township 24 South, Range 28 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Southeast corner of said Section 17, run along the South line of the Southeast 1/4 of said Section 17, S 89°51'12" W, 569.75 feet; thence N 00°00'00" E, 500.65 feet to the Point of Beginning; thence N 90°00'00" W, 470.00 feet; thence N 00°00'00" E, 1350.00 feet; thence N 90°00'00" E, 470.00 feet; thence S 00°00'00" E, 1350.00 feet to the Point of Beginning, containing 14.566 Acres, more or less.

P.O.B.

South line of the Southeast 1/4 of Section 17-24-28
S 89°51'12" W 569.75'

P.O.C.
SOUTHEAST CORNER,
SEC 17, TWN 24 S, RNG 28 E

BEARINGS ARE BASED ON THE
S. line, SE 1/4, SEC. 17-24-28
AS BEING S 89°51'12" W


ABBREVIATIONS

- R=RADIUS
- L=LENGTH
- Δ=DELTA
- TB=TANGENT BEARING
- SEC=SECTION
- TWN=TOWNSHIP
- RNG=RANGE
- POB=POINT OF BEGINNING
- POC=POINT OF COMMENCEMENT

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"

	SURVEYING AND MAPPING DEPARTMENT P.O.B. 10000 LAKE BUENA VISTA FL. 32830-1000 PHONE (407)560-7118 FAX (407)560-7896	PROJECT AREA LAKE BUENA VISTA	DATE 8/22/01
		UNIT NAME DC-2	SCALE 1" = 200'
		SHEET TITLE SKETCH OF DESCRIPTION	DRAWN BY: JLG
		COMMENTS	FILENAME: 09JG0137

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

Document Number: 20140602351
Book Number: 10840
Page Number: 4919

AMENDMENT TO NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
2. **General description of improvement**
Roofing
3. **Owner information of 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 & address of fee simple titleholder (if different from Owner listed above)
Name:
Address:
4. **Contractor**
Name: Atlas Apex Roofing LLC Telephone Number: 407-859-3797
Address: 281 NE 32nd St, Oakland Park, FL 33334
5. **Surety** (if applicable, a copy of the payment bond is attached)
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: Jon Ruth Telephone Number: (407)828-3159
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)

DOC# 20150634838 B: 11024 P: 4782
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT



Jan 15, 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 PAYMENT 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]
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

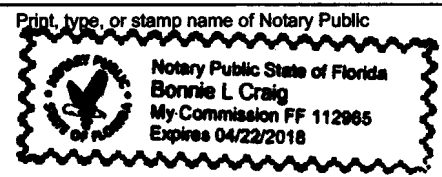
James K. Marshall FAM Manager
Signatory's Printed Name/Title/Office

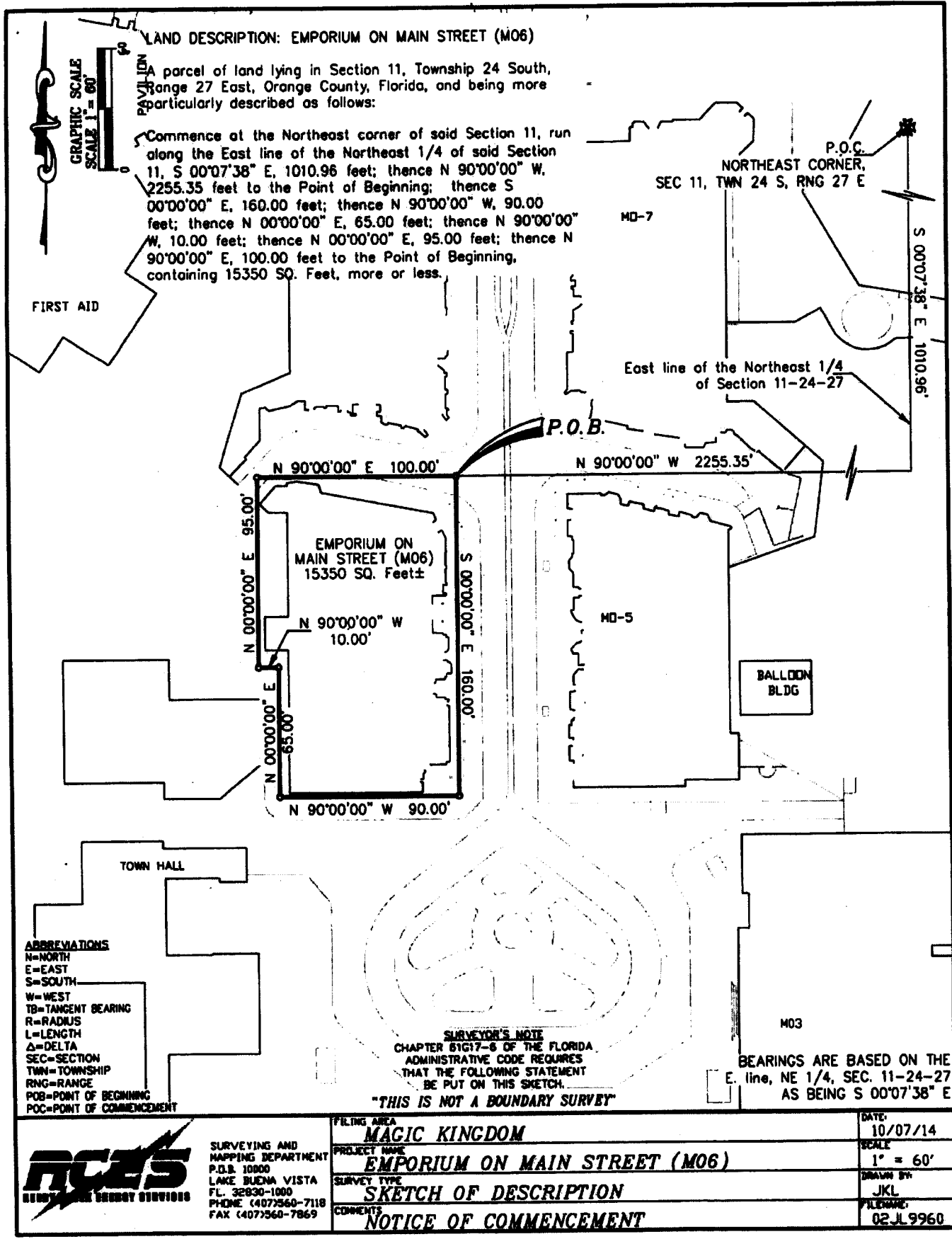
The foregoing instrument was acknowledged before me this 7 day of Dec., by James K. Marshall month/year 2015

as [Signature] Authorized Signatory
Type of authority, e.g., officer, trustee, attorney in fact
Signature of Notary Public - State of Florida

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Personally known OR Produced ID
Type of ID Produced _____





SURVEYING AND MAPPING DEPARTMENT
 P.O.B. 10000
 LAKE BUENA VISTA
 FL. 32830-1000
 PHONE (407)560-7118
 FAX (407)560-7869

FILING AREA MAGIC KINGDOM	DATE 10/07/14
PROJECT NAME EMPORIUM ON MAIN STREET (M06)	SCALE 1" = 60'
SURVEY TYPE SKETCH OF DESCRIPTION	DRAWN BY JKL
COMMENTS NOTICE OF COMMENCEMENT	FILE NO. 02 JL 9960

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

Document Number: 2015 0374011
Book Number: 10953
Page Number: 8778

AMENDMENT TO NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
2. **General description of Improvement**
Roofing
3. **Owner information of 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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
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: _____
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: Jon Ruth Telephone Number: (407)828-3159
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)

Jan 15, 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 PAYMENT 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.

J K M OO
Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager

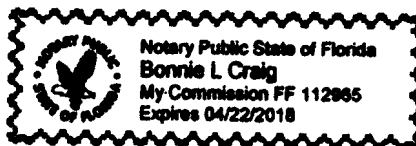
James K. Marshall Manager
Signatory's Printed Name/Title/Office
FAM

The foregoing instrument was acknowledged before me this 3 day of Dec 2015, by James K. Marshall
month/year

as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact
Bonnie L Craig
Signature of Notary Public - State of Florida

Walt Disney World Resort
Name of party on behalf of whom instrument was executed
Print, type, or stamp name of Notary Public

Personally known OR Produced ID _____
Type of ID Produced _____



DOCH 20150634839 B: 11024 P: 4784
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT



LAND DESCRIPTION: ROOF REPLACEMENT

A parcel of land lying in Section 36, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Northeast corner of said Section 36, run along the East line of the Northeast 1/4 of said Section 36, S 00°00'14" W, 951.85 feet; thence N 90°00'00" W, 386.49 feet to the Point of Beginning; thence S 44°45'38" W, 64.14 feet; thence N 43°29'47" W, 120.99 feet; thence N 47°21'15" E, 64.78 feet; thence S 43°10'28" E, 118.08 feet to the Point of Beginning, containing 7703 square feet, more or less.



P.O.C.
NORTHEAST CORNER,
SEC 36, TWN 24 S, RNG 27 E

S 00°00'14" W 951.85'
East line of the Northeast 1/4
of Section 36-24-27

P.O.B.

ROOF
REPLACEMENT
7703 SQ. FT.±

N 90°00'00" W 386.49'

ABBREVIATIONS

- R=RADIUS
- L=LENGTH
- Δ=DELTA
- TB=TANGENT BEARING
- SEC=SECTION
- TWN=TOWNSHIP
- RNG=RANGE
- POB=POINT OF BEGINNING
- POC=POINT OF COMMENCEMENT

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, NE 1/4, SEC. 36-24-27
AS BEING S 00°00'14" W

**REEDY CREEK
ENERGY SERVICES**

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

PROJECT AREA	STUDIO - ATTRACTIONS	DATE:	07/13/15
UNIT NAME	BEAUTY AND THE BEAST ROOF REPLACEMENT	SCALE	1" = 40'
SHEET TITLE	SKETCH OF DESCRIPTION	DRAWN BY:	MF
COMMENTS	NOTICE OF COMMENCEMENT	FILENAME:	12mf03463

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

Document Number: 20150359121
Book Number: 10950
Page Number: 4237

AMENDMENT TO NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
2. **General description of Improvement**
Roofing
3. **Owner information of 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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
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: _____
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: Jim Marshall Telephone Number: 407-939-4693
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)

Jan 15, 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 PAYMENT 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.

J. K. Marshall
Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager

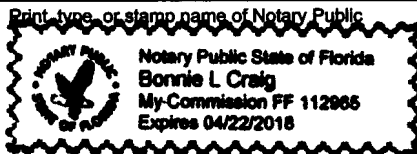
James K Marshall Manager, FAM
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 3 day of Dec 2015, by James K Marshall

as Bonnie L Craig
Authorized Signatory
Type of authority, e.g., officer, trustee, attorney in fact
Signature of Notary Public - State of Florida

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Personally known OR Produced ID
Type of ID Produced _____



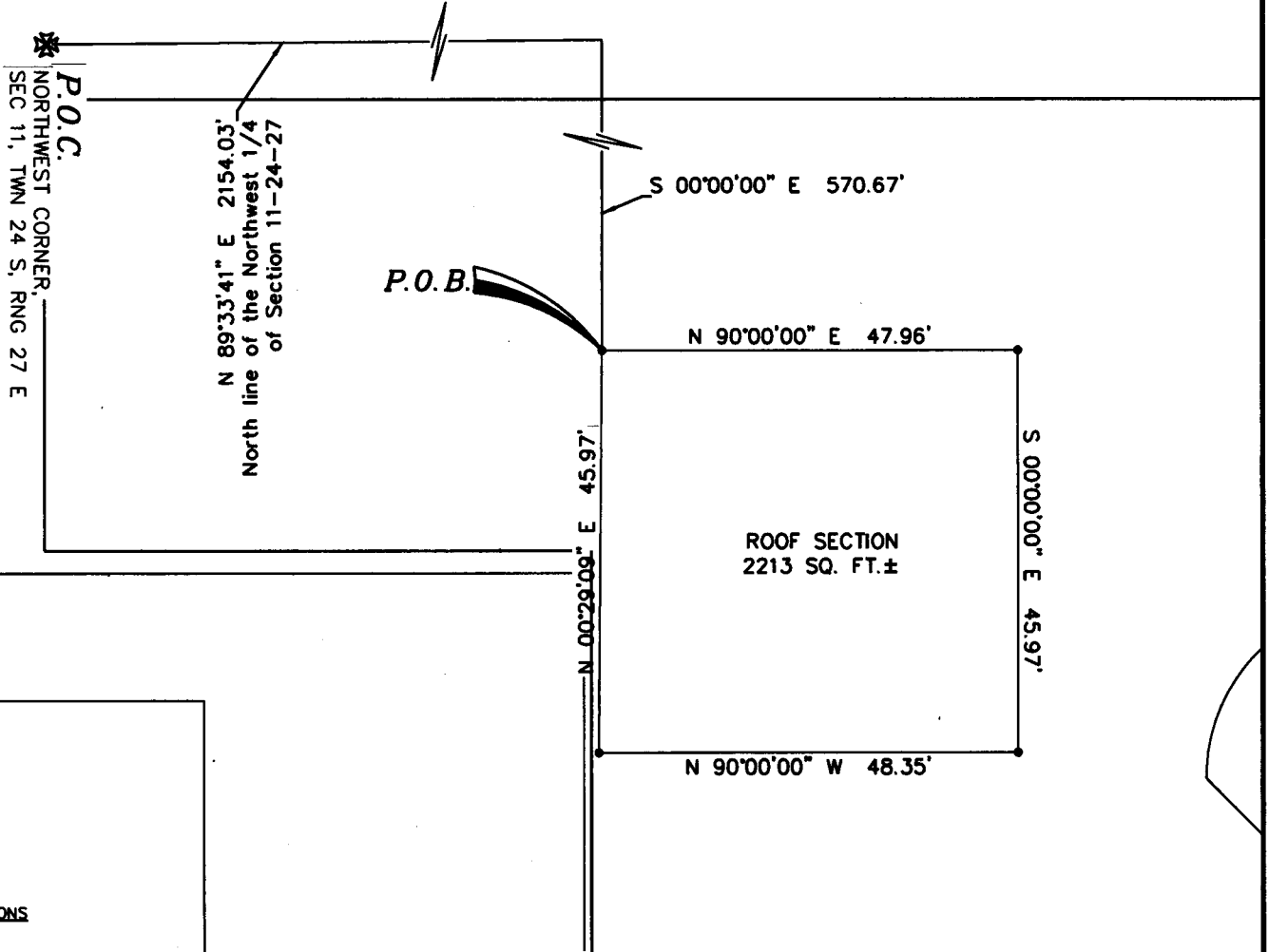
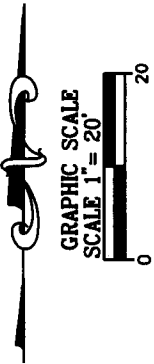
DOC# 20150634840 B: 11024 P: 4786
12/08/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT



LAND DESCRIPTION: TIKI ROOM- ROOF SECTION

A parcel of land lying in Section 11, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Northwest corner of said Section 11, run along the North line of the Northwest 1/4 of said Section 11, N 89°33'41" E, 2154.03 feet; thence S 00°00'00" E, 570.67 feet to the Point of Beginning; thence N 90°00'00" E, 47.96 feet; thence S 00°00'00" E, 45.97 feet; thence N 90°00'00" W, 48.35 feet; thence N 00°29'09" E, 45.97 feet to the Point of Beginning, containing 2213 square feet, more or less.



ABBREVIATIONS
 R=RADIUS
 L=LENGTH
 Δ=DELTA
 TB=TANGENT BEARING
 SEC=SECTION
 TWN=TOWNSHIP
 RNG=RANGE
 POB=POINT OF BEGINNING
 POC=POINT OF COMMENCEMENT

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, NW 1/4, SEC. 11-24-27 AS BEING N 89°33'41" E

	SURVEYING AND MAPPING DEPARTMENT P.O.B. 10000 LAKE BUENA VISTA FL. 32830-1000 PHONE (407)560-7118 FAX (407)560-7896	PROJECT AREA MAGIC KINGDOM - BACKSTAGE	DATE: 10/30/14
		UNIT NAME TIKI ROOM ROOF SECTION	SCALE 1" = 20'
		SHEET TITLE SKETCH OF DESCRIPTION	DRAWN BY: MF
		COMMENTS NOTICE OF COMMENCEMENT	FILENAME: 02mf06222

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

Document Number: 20150359720
Book Number: 10950
Page Number: 4235

AMENDMENT TO NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. **Description of property** (legal description of the property, & street address if available)
See Attached
2. **General description of improvement**
Roofing
3. **Owner information of 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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
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: _____
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: Jon Ruth Telephone Number: (407)828-3159
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)

Jan 15, 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 PAYMENT 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.

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

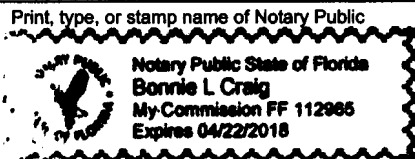
James K. Marshall Manager
Signatory's Printed Name/Title/Office
FAM

The foregoing instrument was acknowledged before me this 3 day of Dec, 2015, by James K. Marshall
month/year

as Bonnie L Craig Authorized Signatory
Type of authority, e.g., officer, trustee, attorney in fact
Signature of Notary Public - State of Florida

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Personally known OR Produced ID _____
Type of ID Produced _____



DOCH 20150634841 B: 11024 P: 4788
12/06/2015 12:19:44 PM Page 1 of 2
Rec Fee: \$18.50
Martha O. Haynie, Comptroller
Orange County, FL
MB - Ret To: WALT DISNEY WORLD RESORT



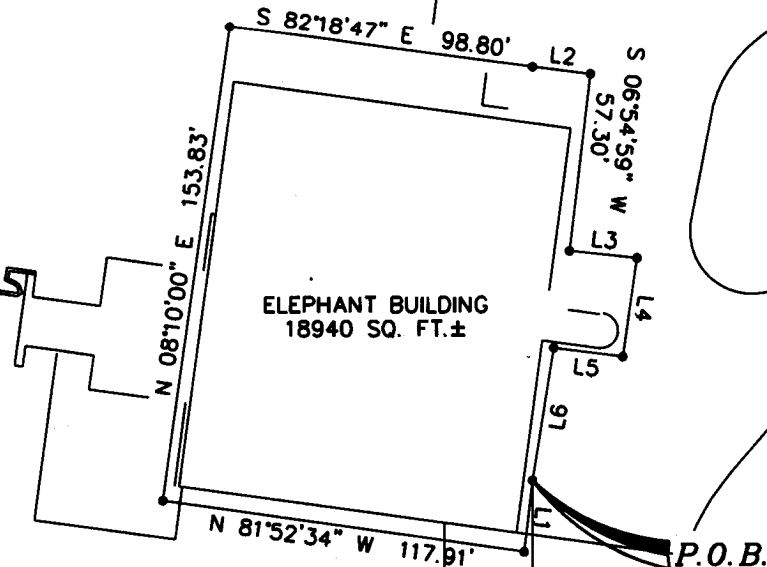
LAND DESCRIPTION: ELEPHANT BUILDING

A parcel of land lying in Sections 27 & 26, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Southwest corner of said Section 27, run along the West line of the Southwest 1/4 of said Section 27, N 00°06'38" E, 969.41 feet, to the Point of Beginning; thence S 06°53'40" W, 23.15 feet; thence N 81°52'34" W, 117.91 feet; thence N 08°10'00" E, 153.83 feet; thence S 82°18'47" E, 98.80 feet; thence S 83°02'12" E, 18.96 feet; thence S 06°54'59" W, 57.30 feet; thence S 83°59'44" E, 21.97 feet; thence S 08°16'56" W, 31.94 feet; thence N 82°41'59" W, 22.61 feet; thence S 09°20'39" W, 43.09 feet to the Point of Beginning, containing 18940 square feet, more or less.



LINE#	BEARING	DIST.
L1	S 06°53'40" W	23.15
L2	S 83°02'12" E	18.96
L3	S 83°59'44" E	21.97
L4	S 08°16'56" W	31.94
L5	N 82°41'59" W	22.61
L6	S 09°20'39" W	43.09



N 00°06'38" E 969.41'
West line of the Southwest 1/4
of Section 27-24-27

BLDG.#16
WHITE RHINO

P.O.C.
* SOUTHWEST CORNER,
SEC 27, TWN 24 S, RNG 27 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
W. line, SW 1/4, SEC. 27-24-27
AS BEING N 00°06'38" E

- ABBREVIATIONS**
R=RADIUS
L=LENGTH
Δ=DELTA
TB=TANGENT BEARING
SEC=SECTION
TWN=TOWNSHIP
RNG=RANGE
POB=POINT OF BEGINNING
POC=POINT OF COMMENCEMENT



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

PROJECT AREA
ANIMAL KINGDOM - AFRICA
UNIT NAME
ELEPHANT BUILDING
SHEET TITLE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
06/30/15
SCALE
1" = 60'
DRAWN BY:
MF
FILENAME:
15mf05005

Prepared by/record and return to:

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



Permit No. _____

Tax Folio No. _____

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. Description of property: *See ATTACHED*
2. General description of improvements: *Mechanical*
3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
4. (a) Contractor (name and address): Gunther General Contracting Services 4401 Albritton Rd. St. Cloud, FL 34772
(b) Contractor's phone number: 407-957-9929
5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
6. (a) Lender (name and address):
(b) Lender's phone number:
7. (a) Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(a)7., Florida Statutes: (name and address): **Dave Ellis**, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
(b) Phone numbers of designated persons: (407) 828-3582
8. (a) In addition to himself or herself, Owner designates **Donald Hudson** of WDW to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes. **DavDa**
(b) Phone number of person or entity designated by owner: 407-827-4890
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 12-2-2016

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.

[Handwritten Signature]
Signature of Owner

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

Donald Hudson Manager WDW
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 2nd day of December, 2015, by Donald Hudson, as manager Org Sigs.

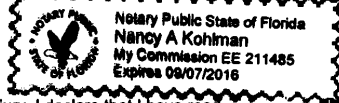
Authorized Signatory
(Type of authority, e.g., officer, trustee, attorney-in-fact)

Walt Disney World Resort
(name of party on behalf of whom instrument was executed)

Nancy A Kohlman
Signature of Notary Public - State of Florida

(Print Name, State, Commission and Name of Notary Public)

Personally Known OR Produced ID



Type of ID Produced _____

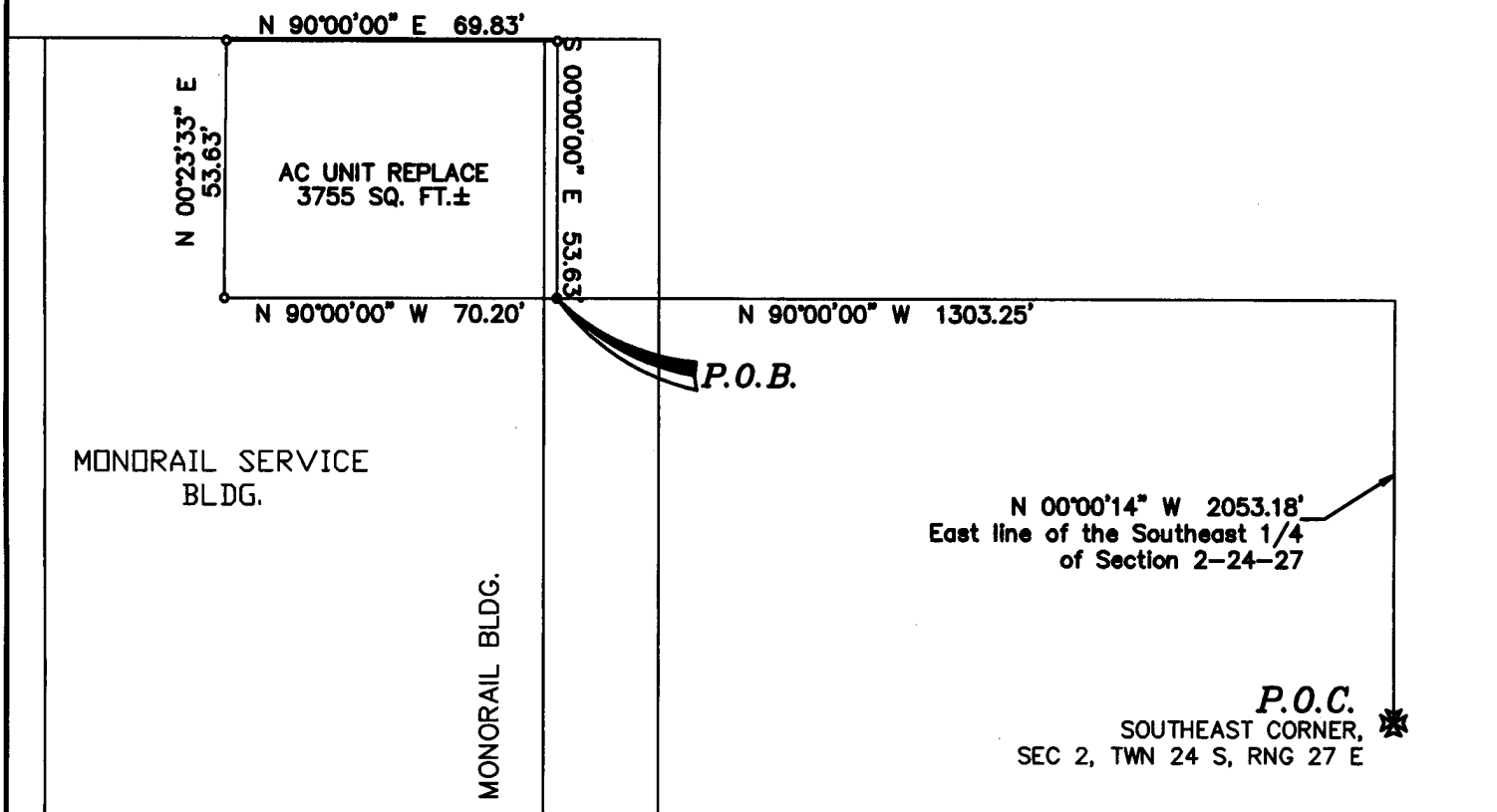
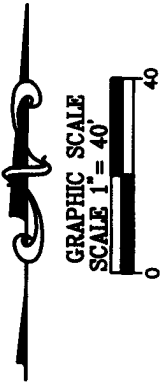
Verification pursuant to Section 92.525, Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

[Handwritten Signature]
Signature of Natural Person Signing Above

LAND DESCRIPTION: AC UNIT REPLACEMENT

A parcel of land lying in Section 2, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Southeast corner of said Section 2, run along the East line of the Southeast 1/4 of said Section 2, N 00°00'14" W, 2053.18 feet; thence N 90°00'00" W, 1303.25 feet to the Point of Beginning; thence N 90°00'00" W, 70.20 feet; thence N 00°23'33" E, 53.63 feet; thence N 90°00'00" E, 69.83 feet; thence S 00°00'00" E, 53.63 feet to the Point of Beginning, containing 3755 square feet, more or less.



ABBREVIATIONS
 R=RADIUS
 L=LENGTH
 Δ=DELTA
 TB=TANGENT BEARING
 SEC=SECTION
 TWN=TOWNSHIP
 RNG=RANGE
 POB=POINT OF BEGINNING
 POC=POINT OF COMMENCEMENT

SURVEYOR'S NOTE
 CHAPTER 61G17-6, FLORIDA
 ADMINISTRATIVE CODE REQUIRES
 THE FOLLOWING STATEMENT.

"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
 E. LINE, SE 1/4, SEC. 2-24-27
 AS BEING N 00°00'14" W

<p>ACES SURVEYING AND MAPPING DEPARTMENT P.O.B. 10000 LAKE BUENA VISTA FL. 32830-1000 PHONE (407)560-7118 FAX (407)560-7889</p>	PROJECT AREA	NORTH SERVICE - MONORAIL BLDG	DATE	05/29/14
	UNIT NAME	AC UNIT REPLACEMENT	SCALE	1" = 40'
	SHEET TITLE	SKETCH OF DESCRIPTION	DRAWN BY:	MF
	COMMENTS	NOTICE OF COMMENCEMENT	FILENAME:	01mf074671

Rec Fee: \$10.00

Deed Doc Tax: \$0.00

Mortgage Doc Tax: \$0.00

Intangible Tax: \$0.00

Martha O. Haynie, Comptroller

Orange County, FL

Ret To: SIMPLIFILE LC

Permit Number: _____
Folio/Parcel Identification Number: _____
Prepared by: Maria McCabe
Buena Vista Construction Company

Return to: P.O. Box 10000, Lake Buena Vista, FL 32830

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

- Description of property** (legal description of the property, and street address if available)
BB Chilled Water Line, 1586 W Buena Vista Dr, BL JFBB6011
- General description of improvement**
Provide labor, material and/or electrical for construction
- 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 _____
Name and address of fee simple titleholder (if different from Owner 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
- Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name _____ Telephone Number _____
Address _____
- 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 Telephone Number 407-828-3582
Address P.O. Box 10000, Lake Buena Vista, FL 32830
- 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 Colleen M Ladd, Construction Manager Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, Florida 32830
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

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

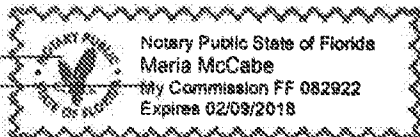
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager _____ Director
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 09 day of Dec 15 by Tom Troffer
month/year name of person
as Director for Buena Vista Construction Company
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida _____ Maria McCabe
Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID
Type of ID Produced _____



Permit Number: _____
Folio/Parcel Identification Number: _____
Prepared by: Maria McCabe
Buena Vista Construction Company
Return to: P.O. Box 10000, Lake Buena Vista, FL 32830

NOTICE OF COMMENCEMENT

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

- Description of property** (legal description of the property, and street address if available)
HS Back Stage Warehouse Rehab, 300 Showbiz Blvd JWHS6002
- General description of improvement**
Provide labor, material and/or electrical for construction
- 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 _____
Name and address of fee simple titleholder (if different from Owner 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
- Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name _____ Telephone Number _____
Address _____
- 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 Telephone Number 407-828-3582
Address P.O. Box 10000, Lake Buena Vista, FL 32830
- 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 Paul Mahood, Construction Manager Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, Florida 32830
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

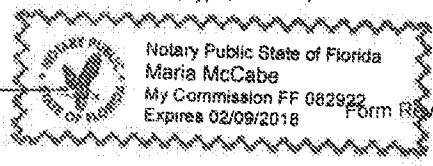
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED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

The foregoing instrument was acknowledged before me this 09 day of Dec 15 by Tom Troffer
month/year name of person
as Director _____ for Buena Vista Construction Company
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed
Maria McCabe
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID _____
Type of ID Produced _____



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

DOC# 20150640318 B: 11025 P: 9168
12/10/2015 12:08:00 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 Statutes, the following information is provided in this Notice of Commencement.

1. **Description of property** (legal description of the property, & street address if available)
See Attached
2. **General description of improvement**
Roofing/Ext. Rehab
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 & 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:
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: Jon Ruth Telephone Number: (407)828-3159
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)

Sep 30, 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 PAYMENT 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.

J. K. Marshall
Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager

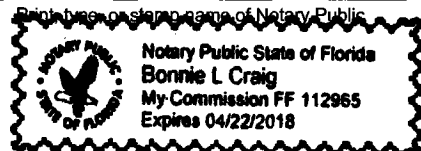
James K. Marshall Manger, FAM
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 9 day of 12/2015, by J. K. Marshall
month/year

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

for Walt Disney World Resort
Name of party on behalf of whom instrument was executed

Bonnie L. Craig
Signature of Notary Public - State of Florida



Personally known OR Produced ID

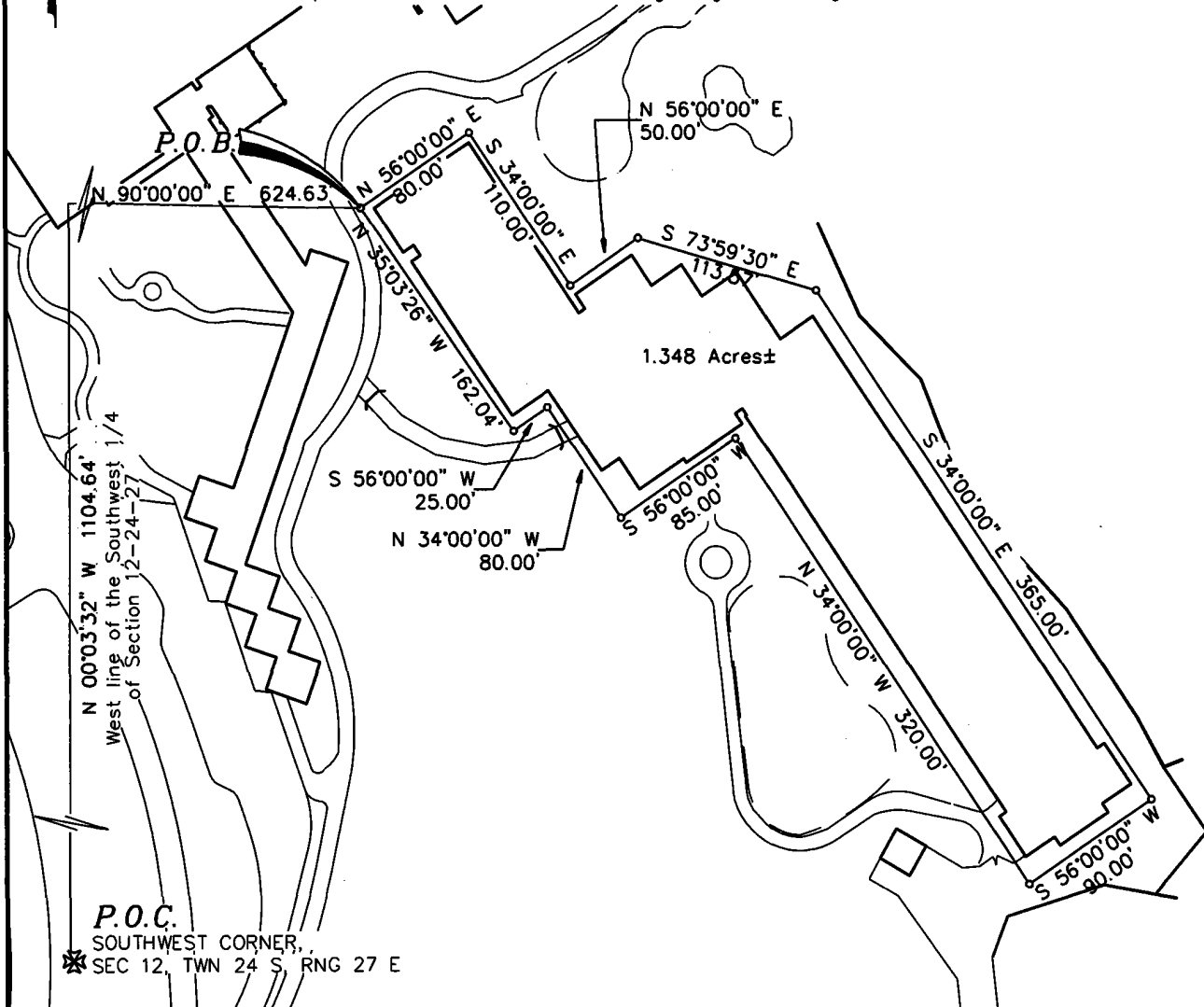
Type of ID Produced _____

LAND DESCRIPTION: WILDERNESS LODGE VILLAS

A parcel of land lying in Section 12, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Southwest corner of said Section 12, run along the West line of the Southwest 1/4 of said Section 12, N 00°03'32" W, 1104.64 feet; thence N 90°00'00" E, 624.63 feet to the Point of Beginning, thence N 56°00'00" E, 80.00 feet; thence S 34°00'00" E, 110.00 feet; thence N 56°00'00" E, 50.00 feet; thence S 73°59'30" E, 113.57 feet; thence S 34°00'00" E, 365.00 feet; thence S 56°00'00" W, 90.00 feet; thence N 34°00'00" W, 320.00 feet; thence S 56°00'00" W, 85.00 feet; thence N 34°00'00" W, 80.00 feet; thence S 56°00'00" W, 25.00 feet; thence N 35°03'26" W, 162.04 feet to the Point of Beginning, containing 1.348 Acres, more or less.

GRAPHIC SCALE
SCALE 1" = 100'



P.O.C.
SOUTHWEST CORNER,
* SEC 12, TWN 24 S, RNG 27 E

ABBREVIATIONS
R=RADIUS
L=LENGTH
Δ=DELTA
TB=TANGENT BEARING
SEC=SECTION
TWN=TOWNSHIP
RNG=RANGE
POB=POINT OF BEGINNING
POC=POINT OF COMMENCEMENT

SURVEYOR'S NOTE
CHAPTER 5J-17, FLORIDA
ADMINISTRATIVE CODE REQUIRES
THE FOLLOWING STATEMENT.

"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
W LINE SW 1/4 SEC 12-24-27
AS BEING N 00°03'32" W



SURVEYING AND
MAPPING DEPARTMENT
P.O.B. 10000
LAKE BUENA VISTA
FL. 32830-1000
PHONE (407)560-7118
FAX (407)560-7869

FILING AREA	HOTELS - WILDERNESS LODGE
PROJECT NAME	VILLAS
SURVEY TYPE	SKETCH OF DESCRIPTION
COMMENTS	NOTICE OF COMMENCEMENT

DATE:	06/19/15
SCALE	1"=100'
DRAWN BY:	AK
FILENAME:	04ok12041

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



Permit No. _____

Tax Folio No. _____

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

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

1. Description of property: See attached
2. General description of improvements: Electrical
3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
4. (a) Contractor (name and address): ERMCO of Florida
PO Box 10000, 1555 Dopey Drive Lake Buena Vista FL 32830
 - (b) Contractor's phone number: 407.934.8084
5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
6. (a) Lender (name and address):
(b) Lender's phone number:
7. (a) Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(a)7., Florida Statutes: (name and address):
Dave Ellis, Sourcing & Procurement Administration, P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
(b) Phone numbers of designated persons: (407) 828-3582
8. (a) In addition to himself or herself, Owner designates Kurt L McLaughlin of Building Property to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes. DavDa
(b) Phone number of person or entity designated by owner: 407.939.2615
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): April 30 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.

Signature of Owner

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

Signatory's Printed Name/Title/Office *MANAGER*

The foregoing instrument was acknowledged before me this 10th day of December 2015, by Kurt McLaughlin, as

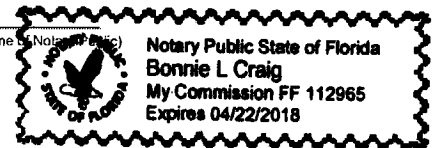
Authorized Signatory
(Type of authority, e.g., officer, trustee, attorney-in-fact)

Walt Disney World Resort
(name of party on behalf of whom instrument was executed)

Signature of Notary Public - State of Florida

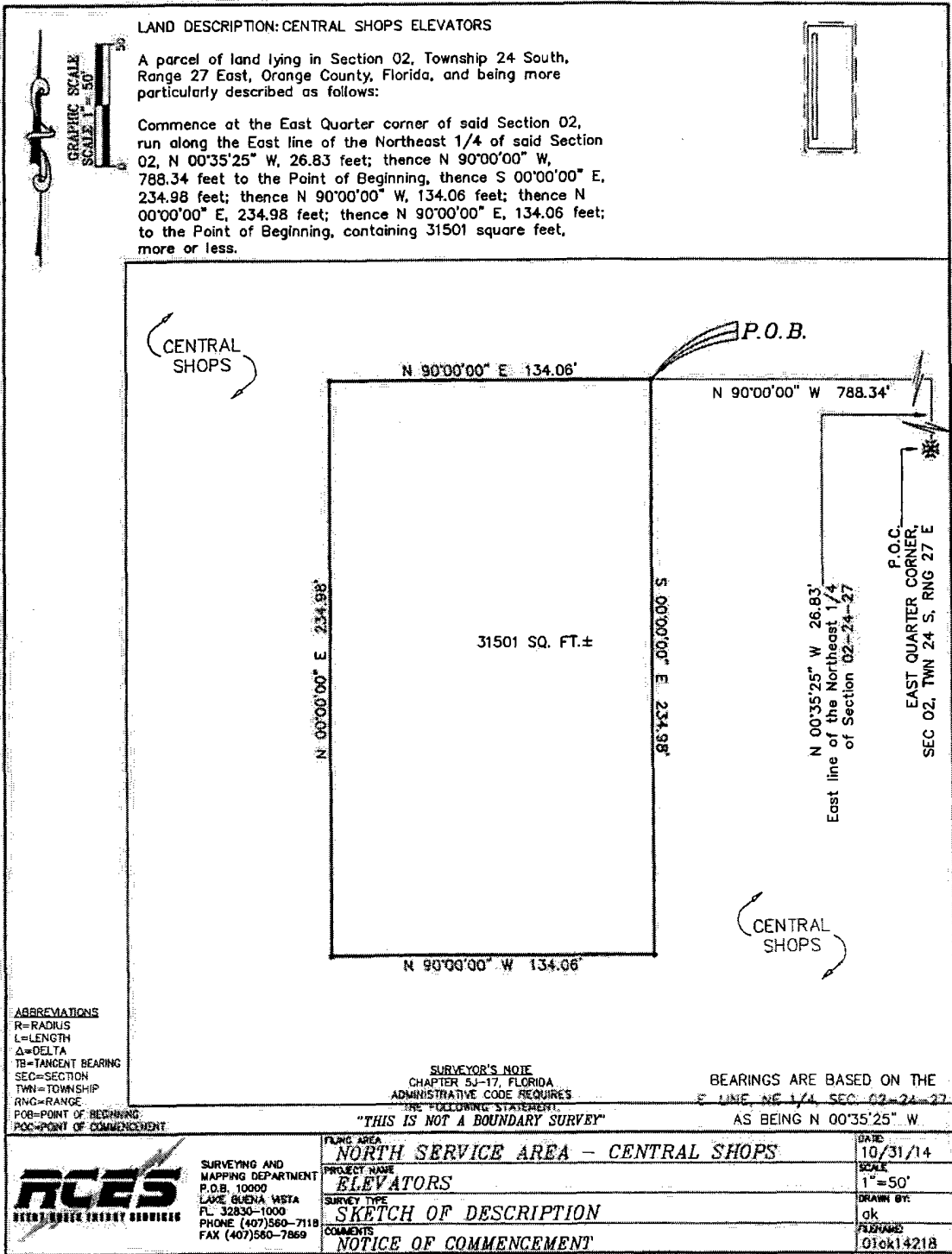
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced ID
Type of ID Produced _____



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

Signature of Natural Person Signing Above



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

DOC# 20150640320 B: 11025 P: 9172
12/10/2015 12:08:00 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 Statutes, the following information is provided in this Notice of Commencement.

1. **Description of property** (legal description of the property, & street address if available)
Disney University
2. **General description of improvement**
Mechanical Work
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 & address of fee simple titleholder (if different from Owner listed above)
Name: _____
Address: _____
4. **Contractor**
Name: RANDALL MECHANICAL, INC. Telephone Number: 407.464.7776
Address: 3307 S. CLARCONA RD., APOPKA, FL 32703-8778
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: Jimmy Bellows Telephone Number: 407-939-4789
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)

Feb 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 PAYMENT 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.

J. Bell

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

James Bellows / APM / WDW FAM

Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 10th day of Dec 2015, by James Bellows
month/year

as _____ Authorized Signatory _____ for _____
Type of authority, e.g., officer, trustee, attorney in fact

Walt Disney World Resort
Name of party on behalf of whom instrument was executed

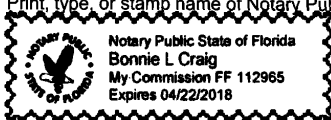
Bonnie L. Craig

Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

Personally known OR Produced ID _____

Type of ID Produced _____

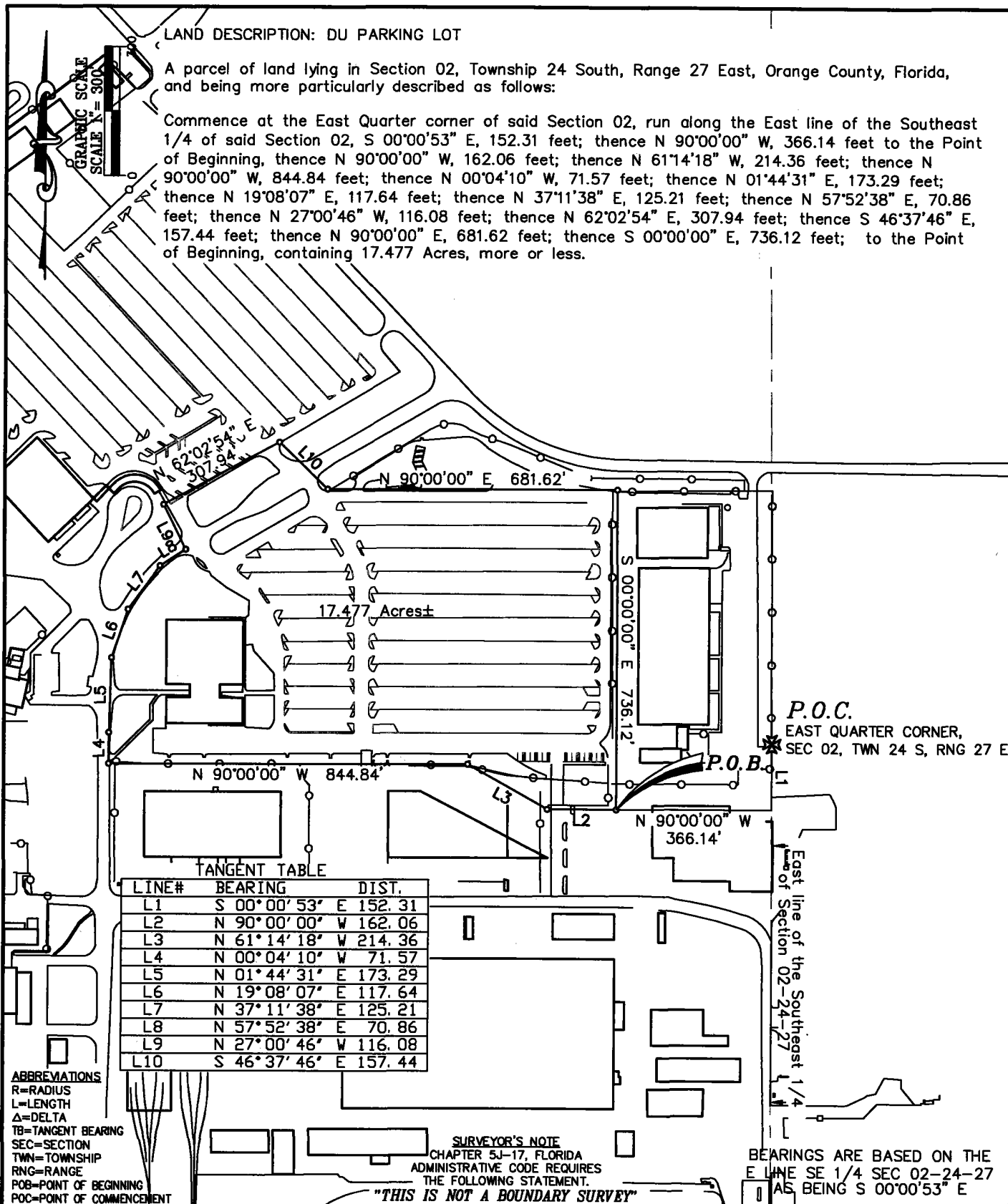


LAND DESCRIPTION: DU PARKING LOT

A parcel of land lying in Section 02, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the East Quarter corner of said Section 02, run along the East line of the Southeast 1/4 of said Section 02, S 00°00'53" E, 152.31 feet; thence N 90°00'00" W, 366.14 feet to the Point of Beginning, thence N 90°00'00" W, 162.06 feet; thence N 61°14'18" W, 214.36 feet; thence N 90°00'00" W, 844.84 feet; thence N 00°04'10" W, 71.57 feet; thence N 01°44'31" E, 173.29 feet; thence N 19°08'07" E, 117.64 feet; thence N 37°11'38" E, 125.21 feet; thence N 57°52'38" E, 70.86 feet; thence N 27°00'46" W, 116.08 feet; thence N 62°02'54" E, 307.94 feet; thence S 46°37'46" E, 157.44 feet; thence N 90°00'00" E, 681.62 feet; thence S 00°00'00" E, 736.12 feet; to the Point of Beginning, containing 17.477 Acres, more or less.

GRAPHIC SCALE
SCALE 1" = 300'



TANGENT TABLE

LINE#	BEARING	DIST.
L1	S 00°00'53" E	152.31
L2	N 90°00'00" W	162.06
L3	N 61°14'18" W	214.36
L4	N 00°04'10" W	71.57
L5	N 01°44'31" E	173.29
L6	N 19°08'07" E	117.64
L7	N 37°11'38" E	125.21
L8	N 57°52'38" E	70.86
L9	N 27°00'46" W	116.08
L10	S 46°37'46" E	157.44

ABBREVIATIONS
 R=RADIUS
 L=LENGTH
 Δ=DELTA
 TB=TANGENT BEARING
 SEC=SECTION
 TWN=TOWNSHIP
 RNG=RANGE
 POB=POINT OF BEGINNING
 POC=POINT OF COMMENCEMENT

SURVEYOR'S NOTE
 CHAPTER 5J-17, FLORIDA
 ADMINISTRATIVE CODE REQUIRES
 THE FOLLOWING STATEMENT.

"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
 E LINE SE 1/4 SEC 02-24-27
 AS BEING S 00°00'53" E



SURVEYING AND
 MAPPING DEPARTMENT
 P.O.B. 10000
 LAKE BUENA VISTA
 FL 32830-1000
 PHONE (407)560-7118
 FAX (407)560-7869

FILING AREA
NORTH SERVICE AREA
 PROJECT NAME
DU PARKING LOT
 SURVEY TYPE
SKETCH OF DESCRIPTION
 COMMENTS
NOTICE OF COMMENCEMENT

DATE:
 02/04/14
 SCALE
 1"=300'
 DRAWN BY:
 AK
 FILENAME:
 01ak14033

Permit Number: _____
Folio/Parcel Identification Number: _____
Prepared by: Maria McCabe
Buena Vista Construction Company

Return to: P.O. Box 10000, Lake Buena Vista, FL 32830

NOTICE OF COMMENCEMENT

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

- Description of property** (legal description of the property, and street address if available)
BH Central Shop Break Room Electrical, 1301 Facilities Way JFBH6003
- General description of improvement**
Provide labor, material and/or electrical for construction
- 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 _____
Name and address of fee simple titleholder (if different from Owner 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
- Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name _____ Telephone Number _____
Address _____
- 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 Telephone Number 407-828-3582
Address P.O. Box 10000, Lake Buena Vista, FL 32830
- 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 David Caesar, Construction Manager Telephone Number 407-934-6070
Address P.O. Box 10000, Lake Buena Vista, Florida 32830
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

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

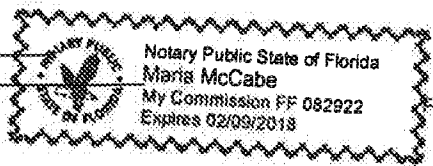
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager _____ Director
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 10 day of Dec 15 by Tom Troffer
month/year name of person

as Director _____ for Buena Vista Construction Company
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed
Maria McCabe _____
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID _____
Type of ID Produced _____



Permit Number: _____
Folio/Parcel ID #: _____
Prepared by: Nicholas Frasca-Ass. Contract Admin
1365 Avenue of the Stars
Lake Buena Vista, FL 32830
Return to: Nicholas Frasca
1365 Avenue of the Stars
Lake Buena Vista, FL 32830

DOC # 20150641006 B: 11026 P: 1904
12/11/2015 07:15 AM Page 1 of 1
Rec Fee: \$10.00
Deed Doc Tax: \$0.00
Mortgage Doc Tax: \$0.00
Intangible Tax: \$0.00
Martha O. Haynie, Comptroller
Orange County, FL
Ret To: CSC INC

NOTICE OF COMMENCEMENT

State of Florida, County of Orange

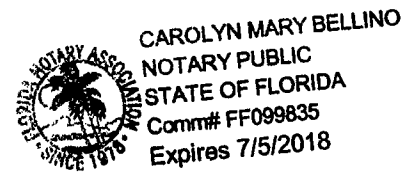
The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

- Description of property** (legal description of the property, and street address if available)
2006 Avenue of the Stars, Bay Lake, FL 32830
- General description of improvement**
Screen Installation - Project 87
- Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney Imagineering
Address P.O. Box 10321, Lake Buena Vista, FL 32830
Interest in Property Fee Simple
Name and address of fee simple titleholder (if different from Owner listed above)
Name N/A
Address N/A
- Contractor**
Name Spitz, Inc. Telephone Number 610-459-5200
Address 700 Brandywine Drive, Chadds Ford, PA 19317
- Surety** (if applicable, a copy of the payment bond is attached)
Name Not Applicable Telephone Number N/A
Address N/A Amount of Bond \$ Not Required
- Lender**
Name NONE Telephone Number N/A
Address N/A
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name Russell Stokes Telephone Number 407-560-7858
Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321
- In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name Contract Accounting Telephone Number 407-560-7858
Address WDI-FL Bldg/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE 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.
I certify that this Notice of Commencement has been filed for recording with Orange County.

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager *VP & GM*
The foregoing instrument was acknowledged before me this 10 day of Dec by John C. Blicht
as Vice President & GM for Walt Disney Imagineering
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed
Carolyn Bellino Carolyn Bellino
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID _____
Type of ID Produced _____



Permit Number: _____
Folio/Parcel ID #: _____
Prepared by: Eric C. Summers
1365 Avenue of the Stars
Lake Buena Vista, FL 32830
Return to: Eric C. Summers
1365 Avenue of the Stars
Lake Buena Vista, FL 32830

DOC # 20150641462 B: 11026 P: 2802
12/11/2015 10:15 AM Page 1 of 1
Rec Fee: \$10.00
Deed Doc Tax: \$0.00
Mortgage Doc Tax: \$0.00
Intangible Tax: \$0.00
Martha O. Haynie, Comptroller
Orange County, FL
Ret To: CSC INC

NOTICE OF COMMENCEMENT - AMENDED

State of Florida, County of Orange Amending NOC 20150628726 B: 11022 P: 7381

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

1. **Description of property** (legal description of the property, and street address if available)
Epcot - Germany - ~~1750~~ 1744 Avenue of the Stars, Bay Lake, FL 32830
2. **General description of improvement**
Fabricate and install Gazebo
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney Imagineering
Address P.O. Box 10321, Lake Buena Vista, FL 32830-0321
Interest in Property Fee Simple
Name and address of fee simple titleholder (if different from Owner listed above)
Name N/A
Address N/A
4. **Contractor**
Name Icarus Exhibits, Inc. Telephone Number 407.246.0012
Address P.O. Box 55146, Orlando, FL 32855
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name N/A Telephone Number N/A
Address N/A Amount of Bond \$ Not Required
6. **Lender**
Name None Telephone Number N/A
Address N/A
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name Russell Stokes Telephone Number 407.560.7697
Address WDI-FL BLDG/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name Contract Accounting Telephone Number 407.560.6500
Address WDI-FL BLDG/EPCOT, P.O. Box 10321, Lake Buena Vista, FL 32830-0321
9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) December 10, 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.

[Signature] VP & GM
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office

The foregoing instrument was acknowledged before me this 10 day of Dec, by John C. Blich
month/year name of person
as Vice President & General Manager for Walt Disney Imagineering
Type of authority, e.g. officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

Carolyn Bellino Signature of Notary Public - State of Florida
Carolyn Bellino Print, type, or stamp commissioned name of Notary Public

Personally Known OR Produced ID _____
Type of ID Produced _____

