

Permit Number: _____
Folio/Parcel ID #: _____
Prepared by: Jennifer Prichard
Associate Contract Administrator

Return to: Lance Hanson
WDI - 1365 Avenue of the Stars
P.O. Box 10321, Lake Buena Vista, FL 32830

DOC # 20150455931 B: 10975 P: 6217

08/31/2015 10:22 AM Page 1 of 2
Rec Fee: \$18.50
Deed Doc Tax: \$0.00
Mortgage Doc Tax: \$0.00
Intangible Tax: \$0.00
Martha O. Haynie, Comptroller
Orange County, FL
Ret To: CSC INC

NOTICE OF COMMENCEMENT

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

1. **Description of property** (legal description of the property, and street address if available)
1400 Magic Kingdom Drive, Lake Buena Vista, FL 32830
2. **General description of improvement**
MK HUB - Castle Stage Power
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney Imagineering
Address P.O. Box 10321, Lake Buena Vista, FL 32830
Interest in Property Fee Simple
Name and address of fee simple titleholder (if different from Owner listed above)
Name N/A
Address N/A
4. **Contractor**
Name Ref. Att. A for multiple IPD Agrmt. Parties Telephone Number N/A
Address N/A
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name Not Applicable Telephone Number N/A
Address N/A Amount of Bond \$ Not Required
6. **Lender**
Name NONE 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 407-560-7858
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 407-560-7858
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) November 17, 2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

The foregoing instrument was acknowledged before me this 27 day of Aug by John C. Blich
month/year name of person

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
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public
CAROLYN MARY BELLINO

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



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

Attachment "A"

This NOC pertains to a Tri Party IPD (Integrated Project Delivery) contract for MK HUB Refresh Project, which includes all parties identified below:

Owner Walt Disney Parks and Resorts (US), Inc., d/b/a Walt Disney Imagineering	John C. Blitch Vice President & General Manager Walt Disney Parks and Resorts (US), Inc. dba Walt Disney Imagineering 1365 Avenue of the Stars Lake Buena Vista, FL 32830
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The following "Contractors," as defined by F.S. §713.01(8), are in direct contract with Owner for the purpose of improving real property pursuant to the Tri Party IPD agreement:

Architect HHCP Architects	Michael K. Chatham, President HHCP Architects 120 N Orange Avenue Orlando, Florida 32801
Construction Manager/General Contractor Hoar Construction, LLC	Michael Parks, Vice President Hoar Construction, LLC 111 North Orange Avenue Suite 1150 Orlando, Florida 32801

Prepared by/record and return to:
Walt Disney World Resort
Attn:
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.

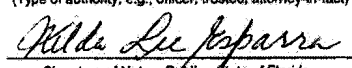
1. Description of property: Legal description attached
2. General description of improvements: Mechanical
3. Owner Information:
 - (a) Name and address: Walt Disney World Resort, P.O. Box 10000, Lake Buena Vista, FL 32830
 - (b) Interest in property: Owner
 - (c) Name and address of fee simple titleholder (if other than Owner):
4. Contractor (name and address): Page Piping, Inc. post office box 22180, lake buena vista, fl 32830
 - (b) Contractor's phone number: 407-828-0175
5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
6. Lender (name and address):
 - (b) Lender's phone number:
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(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. In addition to himself or herself, Owner designates Don Weschler of Magic Kingdom 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: 407-827-4817
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 5-04-2016


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

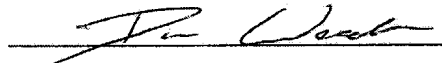
The foregoing instrument was acknowledged before me this 31 day of July, 20 15, by Don Weschler, as

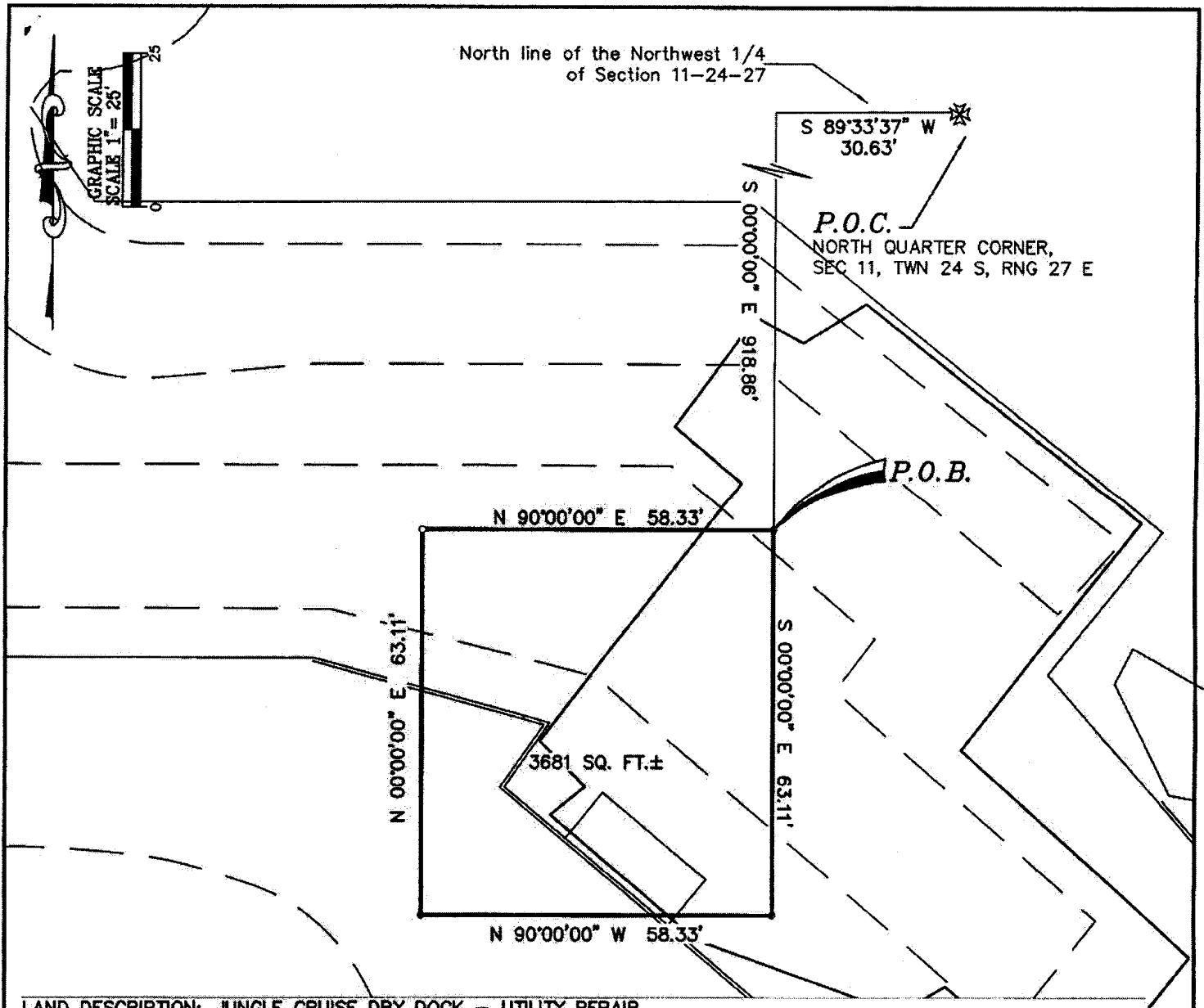
Authorized Signatory
(Type of authority, e.g., officer, trustee, attorney-in-fact)

Signature of Notary Public - State of Florida

Walt Disney World Resort
(name of person or entity on behalf of whom instrument was executed)

Nilda Lee Esparra
Commission # PF164889
Expires: OCT 01, 2018
(Print, Type or Stamp Complete Name of Notary Public)
1ST FLORIDA NOTARY, LLC

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



LAND DESCRIPTION: JUNGLE CRUISE DRY DOCK - UTILITY REPAIR

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 North Quarter corner of said Section 11, run along the North line of the Northwest 1/4 of said Section 11, S 89°33'37" W, 30.63 feet; thence S 00°00'00" E, 918.86 feet to the Point of Beginning, thence S 00°00'00" E, 63.11 feet; thence N 90°00'00" W, 58.33 feet; thence N 00°00'00" E, 63.11 feet; thence N 90°00'00" E, 58.33 feet; to the Point of Beginning, containing 3681 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 5J-17, FLORIDA
ADMINISTRATIVE CODE REQUIRES
THE FOLLOWING STATEMENT.
"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
N. LINE, NW 1/4, SEC. 11-24-27
AS BEING S 89°33'37" W



**SURVEYING AND
MAPPING DEPARTMENT**
P.O.B. 10000
LAKE BUENA VISTA
FL. 32830-1000
PHONE (407)560-7118
FAX (407)560-7889

FILED AREA	MAGIC KINGDOM - JUNGLE CRUISE	DATE	04/20/15
PROJECT NAME	DRY DOCK UTILITY REPAIR	SCALE	1"=25'
SURVEY TYPE	SKETCH OF DESCRIPTION	DRAWN BY:	ak
COMMENTS	NOTICE OF COMMENCEMENT	FILENAME:	02ak15067

Prepared by/record and return to:
Walt Disney World Resort
Attn:
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: LEGAL DESCRIPTION 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): WW GAY MECHANICAL
3220 39TH ST. ORLANDO, FLORIDA 32839
(b) Contractor's phone number: 407-841-4670
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 BEN ALGEE of MAGIC KINGDOM 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: 407-824-7921
9. Expiration date of notice of commencement (the expiration date is 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.


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


Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 28 day of August, 2015, by Don Weschler, as

Authorized Signatory
(Type of authority, e.g., officer, partner, 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.

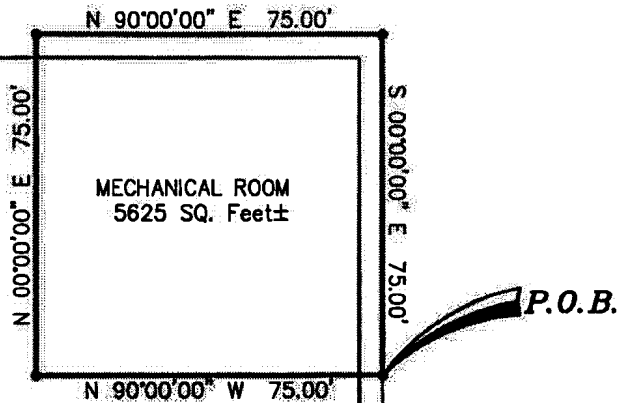


Signature of Natural Person Signing Above



Nilda Lee Esparra
Commission # FF164889
Expires: OCT 01, 2018
BONDED THRU
1ST FLORIDA NOTARY, LLC

GRAPHIC SCALE
SCALE 1" = 40'



DESCRIPTION OF MECHANICAL ROOM

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 South line of the Southeast 1/4 of said Section 2, S 89°35'51" W, 2113.94 feet; thence N 00°00'00" E, 161.56 feet to the Point of Beginning; thence N 90°00'00" W, 75.00 feet; thence N 00°00'00" E, 75.00 feet; thence N 90°00'00" E, 75.00 feet; thence S 00°00'00" E, 75.00 feet to the Point of Beginning, containing 5625 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"

P.O.C.
SOUTHEAST CORNER,
SEC 2, TWN 24 S, RNG 27 E

BEARINGS ARE BASED ON THE
S. line, SE 1/4, SEC. 2-24-27
AS BEING S 89°35'51" 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
MAGIC KINGDOM - TUNNEL
PROJECT NAME
MECHANICAL ROOM
SURVEY TYPE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE
08/27/15
SCALE
1"=40'
DRAWN BY
TRS
FILENAME
04TS9948

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

DOCH 20150455948 B: 10975 P: 6246
08/31/2015 10:26:32 AM 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, and street address if available)
Please see attached legal description.
2. **General description of improvement**
Electrical
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Maddox Electric Co Inc DBA ERMCO of Telephone Number (407) 934-8084
Address P.O. Box 22164, 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 Cynthia Reese Telephone Number 407-939-4808
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)
12/25/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

Cynthia Reese Cynthia Reese/FAM/Planner
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 31ST day of Aug 2015 by Cynthia Reese
month/year

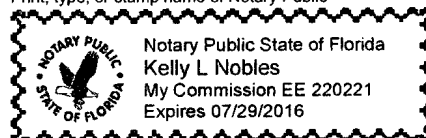
as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

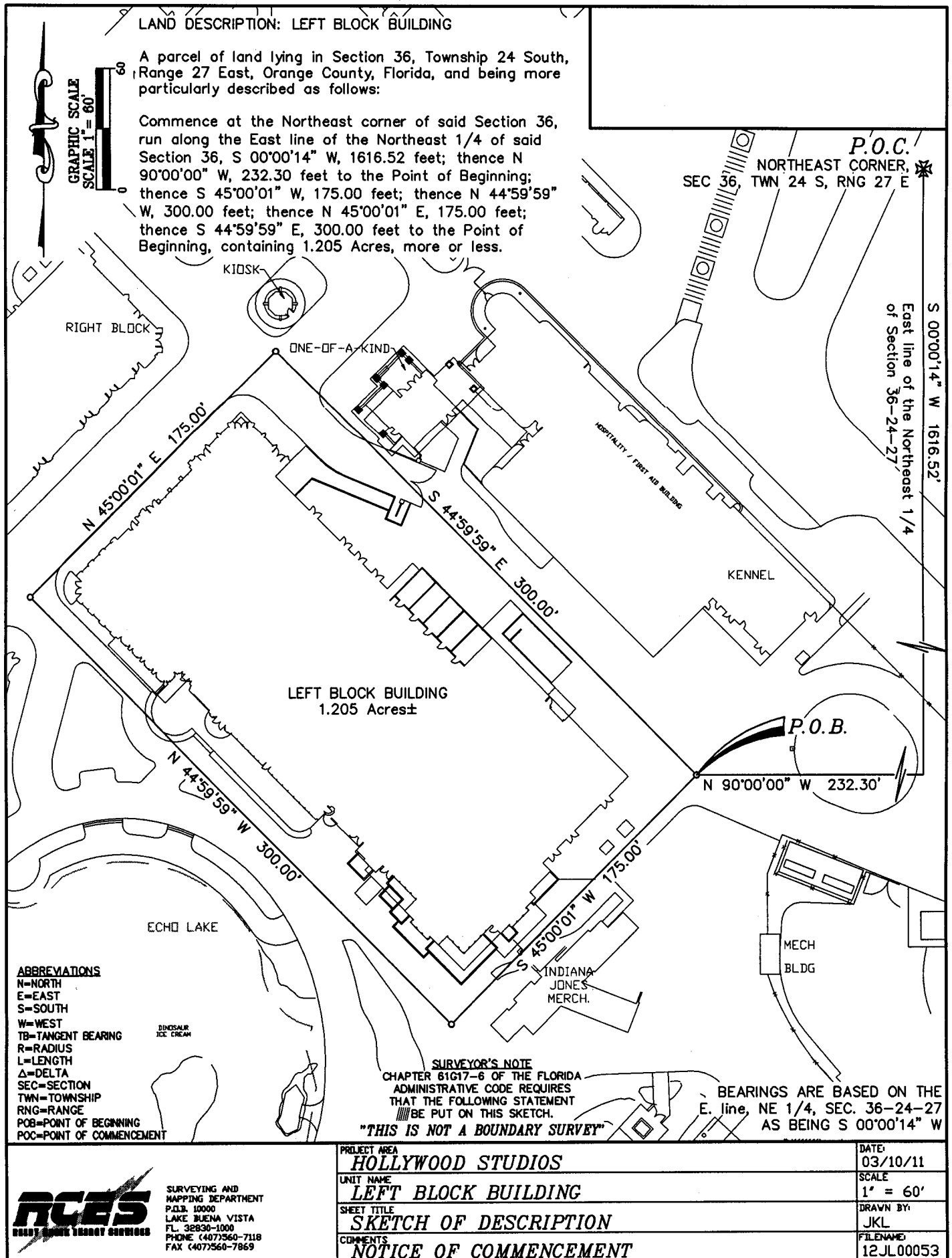
[Signature]
Signature of Notary Public - State of Florida

Personally Known X OR Produced ID _____

Type of ID Produced _____

Print, type, or stamp name of Notary Public





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

DOCH 20150455949 B: 10975 P: 6248
08/31/2015 10:26:32 AM 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, and street address if available)
See attached.
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Maddox Electric Co Inc DBA ERMCO of Telephone Number (407) 934-8084
Address P.O. Box 22164, 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 Andy George Telephone Number (407) 934-6648
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 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]
Signature of Owner or Lessee, or Owner's or
Lessee's Authorized Officer/Partner/Manager

A. George / PMA / FAM
Signatory's Printed Name/Title/Office

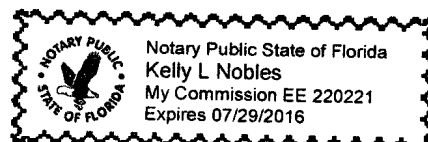
The foregoing instrument was acknowledged before me this 31ST day of Aug 2015 by Andy George
month/year

as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

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



LAND DESCRIPTION: ABC NEON MARQUEE REPL

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, 1885.35 feet; thence N 90°00'00" W, 594.43 feet to the Point of Beginning; thence S 44°14'17" W, 20.48 feet; thence N 74°07'09" W, 59.41 feet; thence N 49°47'11" W, 27.02 feet; thence N 43°28'29" E, 31.15 feet; thence N 84°12'43" E, 27.52 feet; thence S 44°14'43" E, 62.00 feet to the Point of Beginning, containing 3055 square feet, more or less.

GRAPHIC SCALE
SCALE 1" = 30'

TANGENT TABLE		
LINE#	BEARING	DIST.
L1	S 44°14'17" W	20.48

DINOSAUR
ICE CREAM

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

S 00°00'14" W 1885.35'
East line of the Northeast 1/4
of Section 36-24-27

P.O.B.

N 90°00'00" W 594.43'

3055 SQ. F.T.

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



SURVEYING AND
MAPPING DEPARTMENT
P.O.B. 10000
LAKE BUENA VISTA
FL 32830-1000
PHONE (407)560-7118
FAX (407)560-7898

PROJECT AREA
STUDIO - ATTRACTIONS
UNIT NAME
SHEET TITLE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
05/16/06
SCALE
1" = 30'
DRAWN BY:
MF
FILENAME:
12mf06210

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

DOCH 20150455950 B: 10975 P: 6250
08/31/2015 10:26:32 AM 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, and street address if available)
9911 - See Attached
2. **General description of improvement**
General Conditions
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Bruns Inc Telephone Number (407) 827-4338
Address P.O. Box 981, Windermere, FL 34786
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 Terry Stofflet Telephone Number (407) 828-3137
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 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

Terry Stofflet / FAM
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 31st day of August, 2015, by Terry Stofflet
month/year

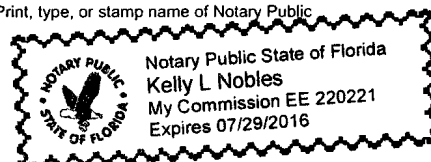
as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida

Personally Known X OR Produced ID _____

Type of ID Produced _____

Print, type, or stamp name of Notary Public



LAND DESCRIPTION: BOMA MODIFICATIONS

A parcel of land lying in Section 34, Township 24 South, Range 27 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Southwest corner of said Section 34, run along the West line of the Southwest 1/4 of said Section 34, N 00°01'08" E, 1929.70 feet; thence N 90°00'00" E, 1248.74 feet to the Point of Beginning; thence N 32°19'09" E, 132.15 feet; thence S 84°19'46" E, 99.73 feet to a point on a non-tangent curve concave Northwesterly having a radius of 94.39 feet, and a central angle of 130°01'42"; thence from a tangent bearing of S 22°20'07" E run Southwesterly along the arc of said curve, 214.22 feet; thence N 66°00'53" W, 58.99 feet to the Point of Beginning, containing 17369 square feet, more or less.

CURVE TABLE

CURVE	RADIUS	DELTA	LENGTH	TANG. BRG.
C1	94.39	130°01'42"	214.22	S 22°20'07" E

ANIMAL KINGDOM LODGE

BOMA
17369 SQ. FT.±

P.O.B.

N 90°00'00" E 1248.74'

N 00°01'08" E 1929.70'
West line of the Southwest 1/4,
of Section 34-24-27

P.O.C.

SOUTHWEST CORNER,
SEC 34, 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 61G17-6, FLORIDA
ADMINISTRATIVE CODE REQUIRES
THE FOLLOWING STATEMENT.

"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
W. LINE, SW 1/4, SEC. 34-24-27
AS BEING N 00°01'08" E

RCES
REEDY CREEK ENERGY SERVICES

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

PROJECT AREA
HOTELS - ANIMAL KINGDOM LODGE
UNIT NAME
BOMA
SHEET TITLE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
10/25/12
SCALE
1" = 50'
DRAWN BY:
MF
FILENAME:
04mf07350

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



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)
Legal Description Attached
2. **General description of improvement**
Equipment Installation
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Slalom Construction Services, Inc. Telephone Number 407-938-0244
Address PO Bpx 783211, Winter Garden, FL 34778-3211
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
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 Tim Keith Telephone Number (407) 560-4168
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
9. **Expiration date of notice of commencement** (the expiration date may 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)
11/01/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

Timothy A. Keith

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

TIMOTHY A. KEITH / PROJECT MANAGER / FACILITY

Signatory's Printed Name/Title/Office

ASSET MANAGEMENT

The foregoing instrument was acknowledged before me this 31ST day of August, by TIMOTHY KEITH
month/year

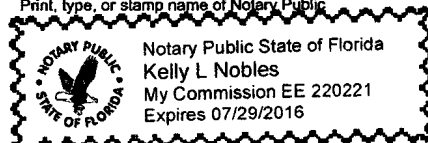
as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida

Personally Known ☒ OR Produced ID _____

Type of ID Produced _____

Print, type, or stamp name of Notary Public

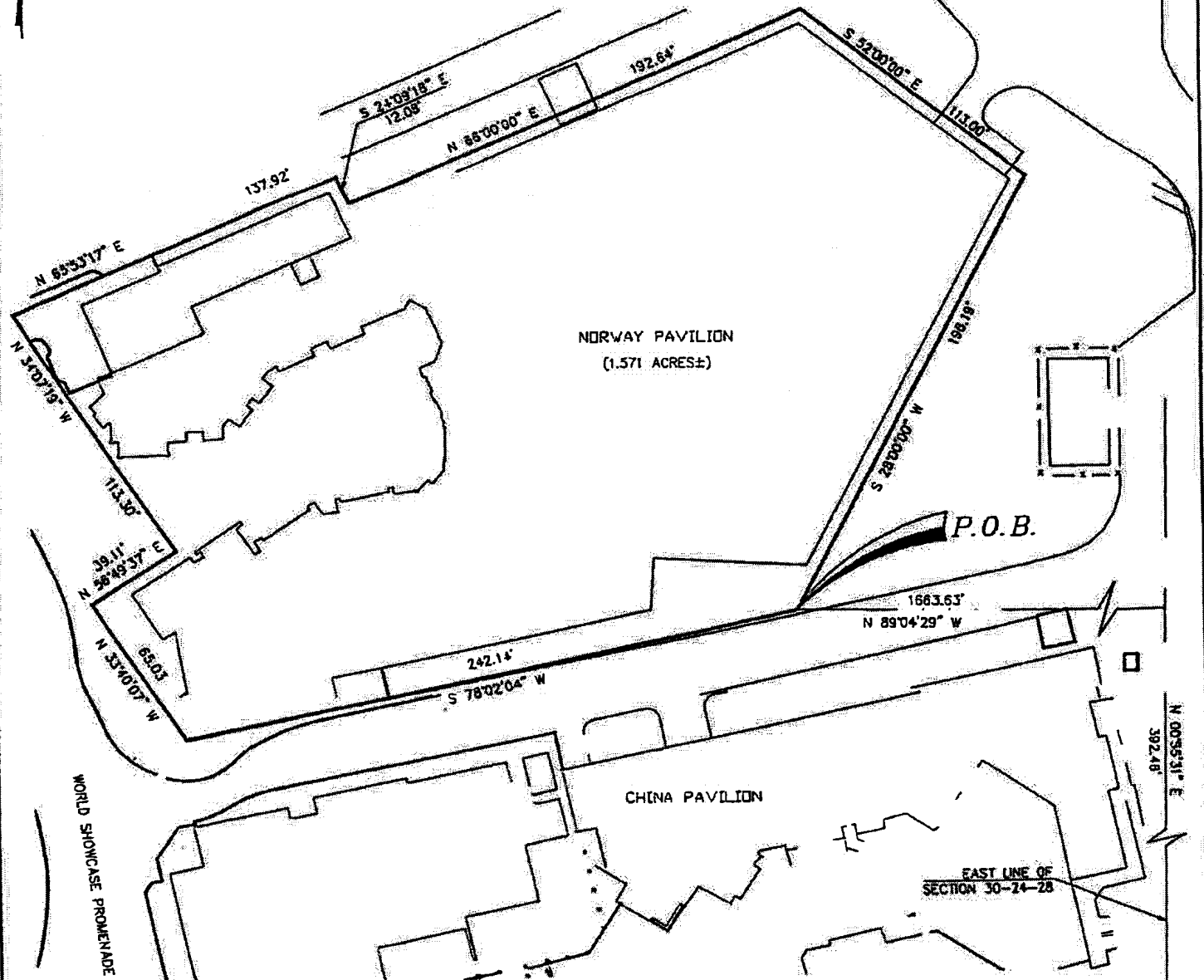


LAND DESCRIPTION:

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

Commence at the EAST QUARTER corner of said Section 30, run along the East line of said Section, N 00°55'31" E, 392.48 feet; thence N 89°04'29" W, 1663.63 feet to the Point of Beginning; thence S 78°02'04" W, 242.14 feet; thence N 33°40'07" W, 65.03 feet; thence N 56°49'37" E, 39.11 feet; thence N 34°07'19" W, 113.30 feet; thence N 65°53'17" E, 137.92 feet; thence S 24°09'18" E, 12.08 feet; thence N 66°00'00" E, 192.64 feet; thence S 52°00'00" E, 113.00 feet; thence S 28°00'00" W, 198.19 feet, to the Point of Beginning, containing 1.571 acres, more or less.

GRAPHIC SCALE:
SCALE 1" = 60'



ABBREVIATIONS


SECTION
POINT OF BEGINNING
POINT OF COMMENCEMENT
MORE OR LESS

SURVEYOR'S NOTE
CHAPTER 61G17-6 OF THE FLORIDA
ADMINISTRATIVE CODE REQUIRES
THAT THE FOLLOWING STATEMENT
BE PUT ON THIS SKETCH.

"THIS IS NOT A BOUNDARY SURVEY"

P.O.C.
EAST QUARTER CORNER
SECTION 30-24-28

BEARINGS ARE BASED ON
THE EAST LINE OF SECTION
30 AS BEING N 00°55'31" E

4501A0	REQUESTOR ANDY CALAMARI	PROJECT AREA EPCOT CENTER - WORLD SHOWCASE	DATE 11/16/95
 REEDY CREEK ENERGY SERVICES, INC. Survey Department P.O. BOX 10000, Lake Buena Vista, Florida 32830-1000 Telephone (407) 824-9922, Fax (407) 934-7297	UNIT NAME NORWAY	SHEET TITLE SKETCH OF DESCRIPTION	SCALE 1"=60'
	COMMENTS NOTICE OF COMMENCEMENT		DRAWN BY: W.C. ROWE
			FILENAME: 11WR9507

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

DOCH 20150460044 B: 10976 P: 6494
09/01/2015 02:06:02 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, and street address if available)
See legal description
2. **General description of improvement**
Signage
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Design Communications Ltd Telephone Number 407-856-9661
Address 10611 Satellite Blvd., Orlando, FL 32837
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 Randall Morcom Telephone Number 407-934-6440
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)
09/11/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

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

Randall Morcom/Planner/FAM
Signatory's Printed Name/Title/Office

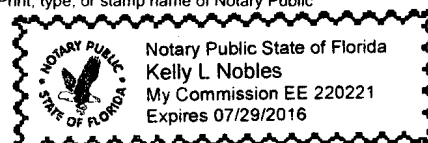
The foregoing instrument was acknowledged before me this 1st day of Sept, 2015, by Randall Morcom
month/year

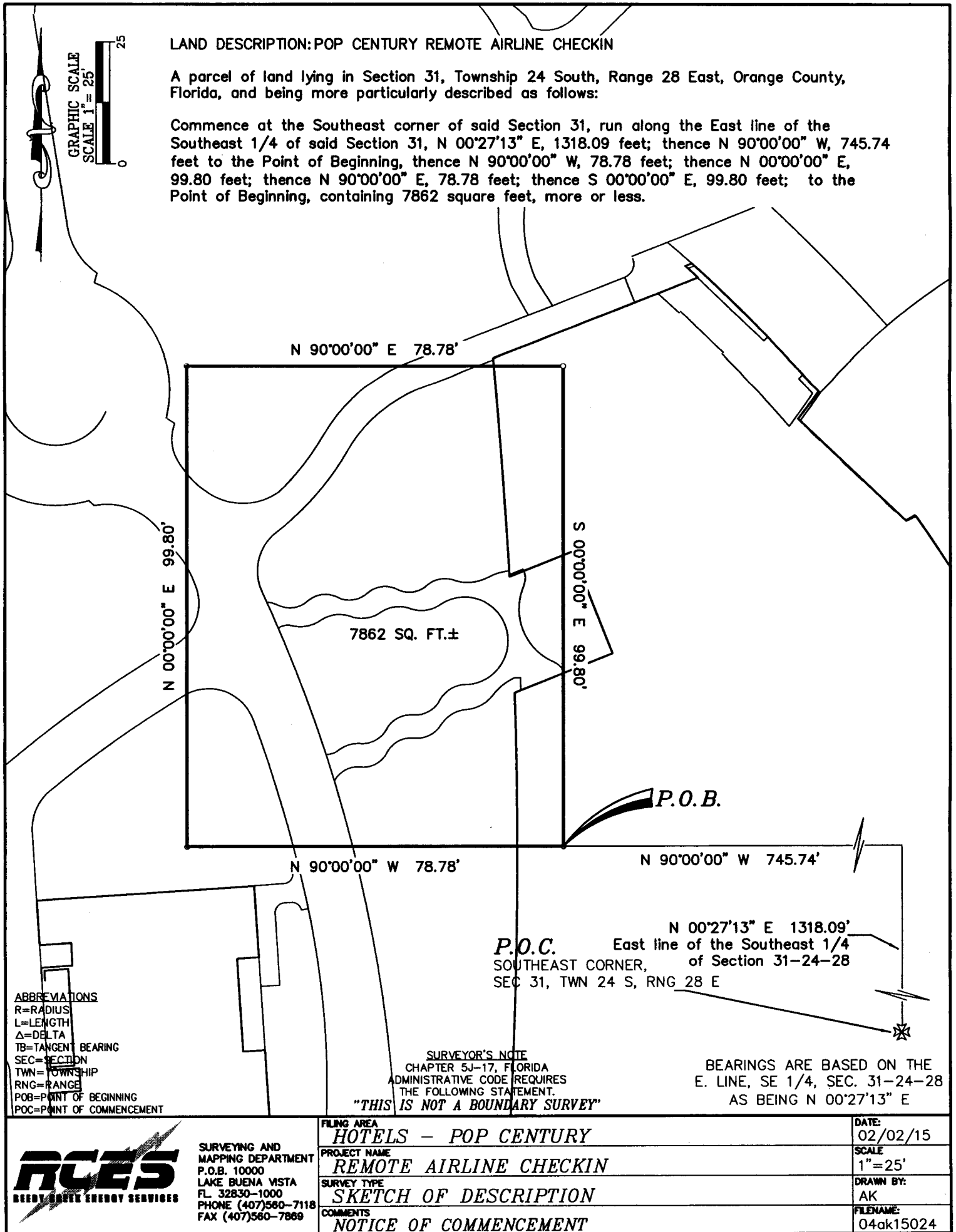
as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

Personally Known [Initials] OR Produced ID _____
Type of ID Produced _____

Print, type, or stamp name of Notary Public





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

DOCH 20150460045 B: 10976 P: 6496
09/01/2015 02:06:02 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, and street address if available)
See Legal Description
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Faden Builders Telephone Number 352-735-9805
Address 736 S Rossiter St, Mt Dora, FL 32757
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 Frannie L Stone Telephone Number (407) 939-4427
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)
11/30/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

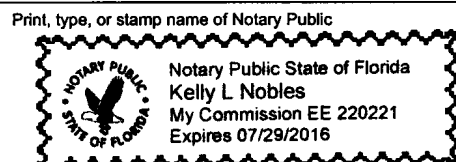
Frannie Stone / Proj. Mgr / FAM
Signature of Owner or Lessee, or Owner's or
Lessee's Authorized Officer/Director/Partner/Manager

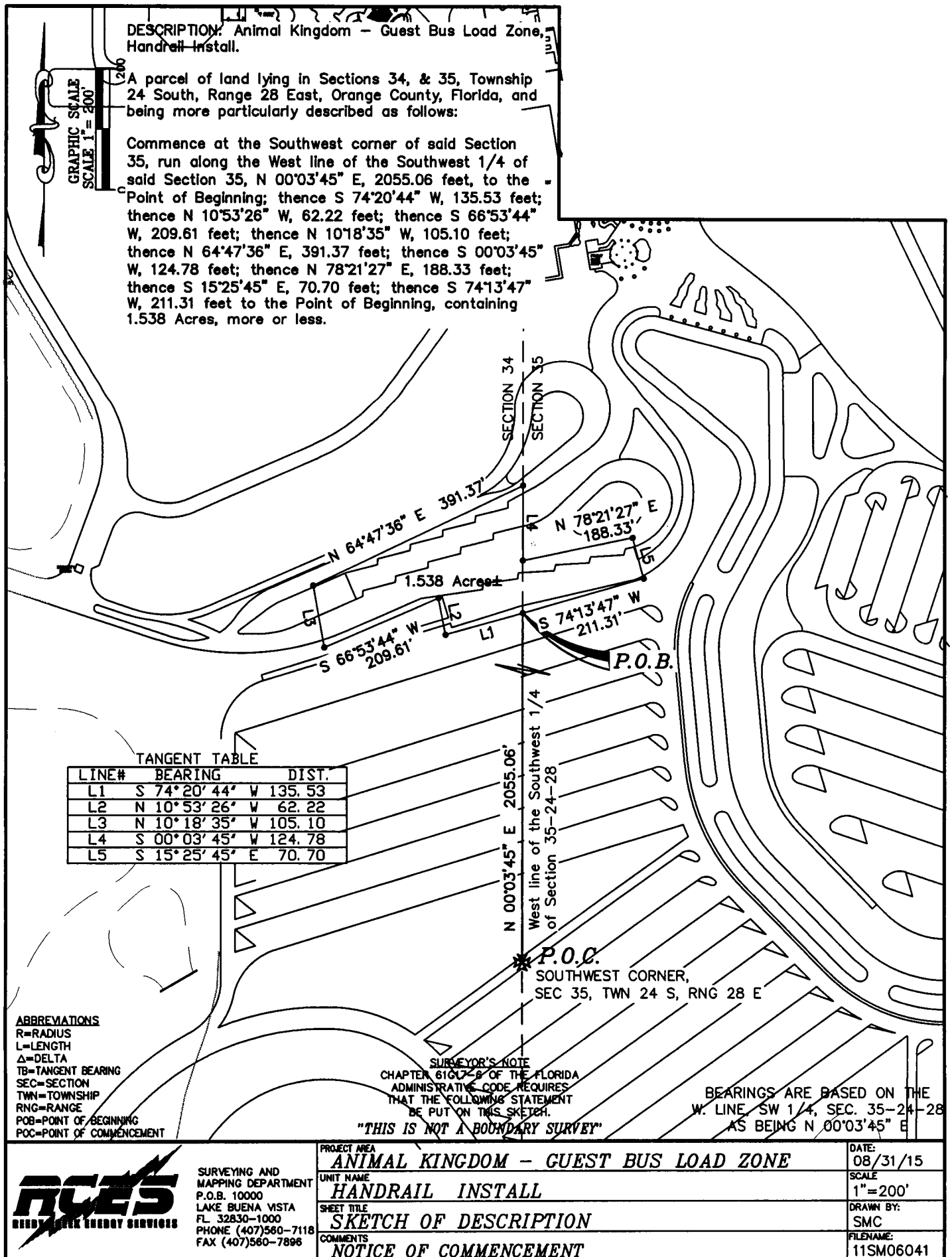
The foregoing instrument was acknowledged before me this 1ST day of SEP 2015, by FRANNIE STONE
month/year

as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

Personally Known X 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)560-7896

PROJECT AREA
ANIMAL KINGDOM - GUEST BUS LOAD ZONE

UNIT NAME
HANDRAIL INSTALL

SHEET TITLE
SKETCH OF DESCRIPTION

COMMENTS
NOTICE OF COMMENCEMENT

DATE:
08/31/15

SCALE
1"=200'

DRAWN BY:
SMC

FILENAME:
11SM06041

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

DOCM 20150460046 B: 10976 P: 6498
09/01/2015 02:06:02 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, and street address if available)
See Legal Description
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Faden Builders Telephone Number 352-735-9805
Address 736 S Rossiter St, Mt Dora, FL 32757
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 Frannie L Stone Telephone Number (407) 939-4427
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)
11/30/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

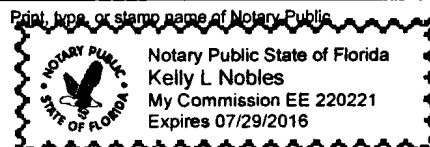
[Signature] Frannie Stone / Proj Mgr / FAM
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Printed Name/Title/Office

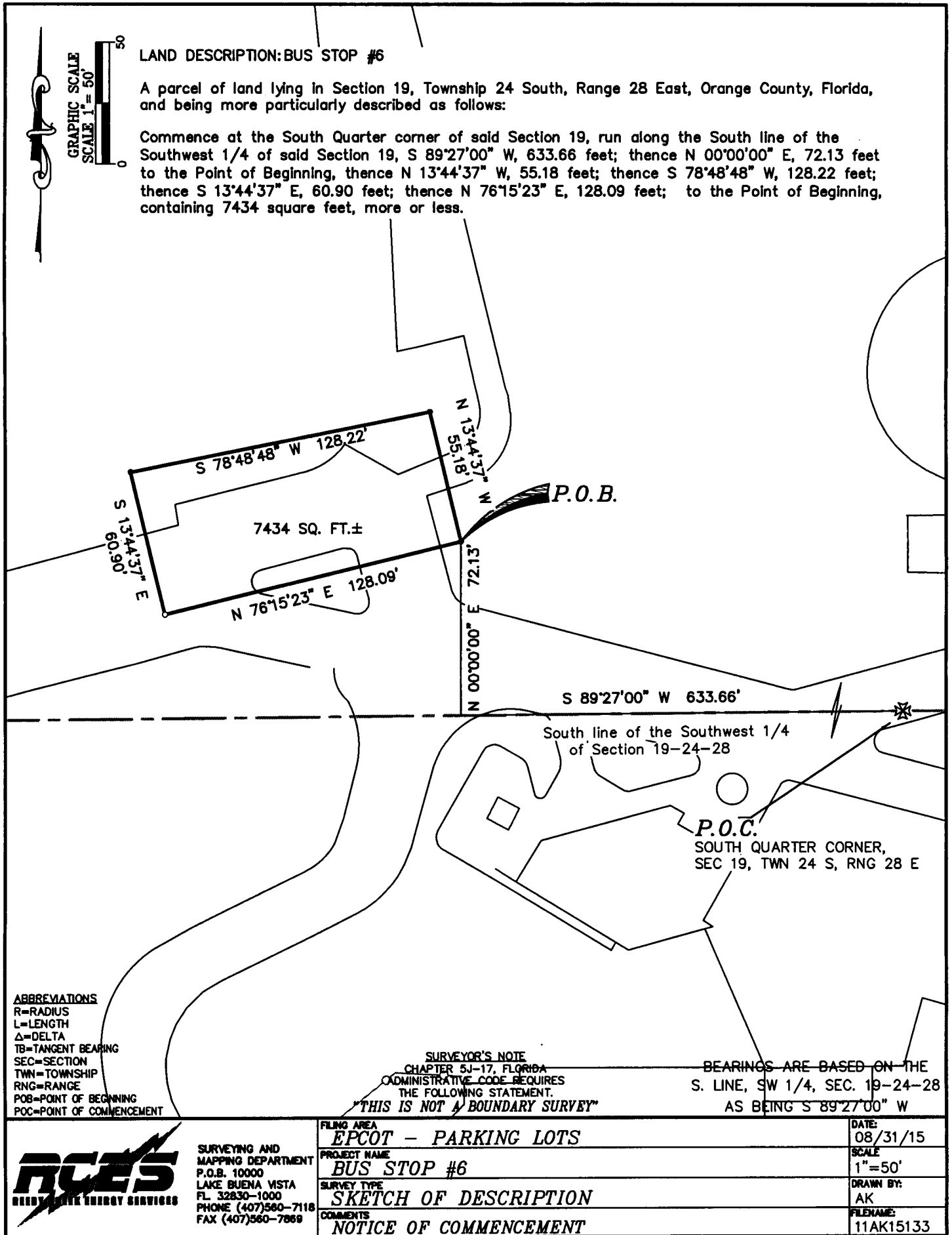
The foregoing instrument was acknowledged before me this 1st day of Sept, by Frannie Stone
month/year

as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

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

DOCH 20150460047 B: 10976 P: 6500
09/01/2015 02:06:02 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, and street address if available)
See attached Leagal Description
2. **General description of Improvement**
ELECTRICAL
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Sign Producers Inc Telephone Number 407-855-8864
Address 17713 Deer Isle Circle, Winter Garden, FL 34787
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 Cynthia Reese Telephone Number 407-939-4808
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)
10/07/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

Richard B. Goss Richard Goss / PMA / FAM
Signature of Owner or Lessee, or Owner's or Signatory's Printed Name/Title/Office
Lessee's Authorized Officer/Director/Partner/Manager

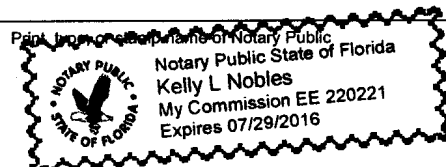
The foregoing instrument was acknowledged before me this 1st day of Sept 2015 by Richard Goss
month/year

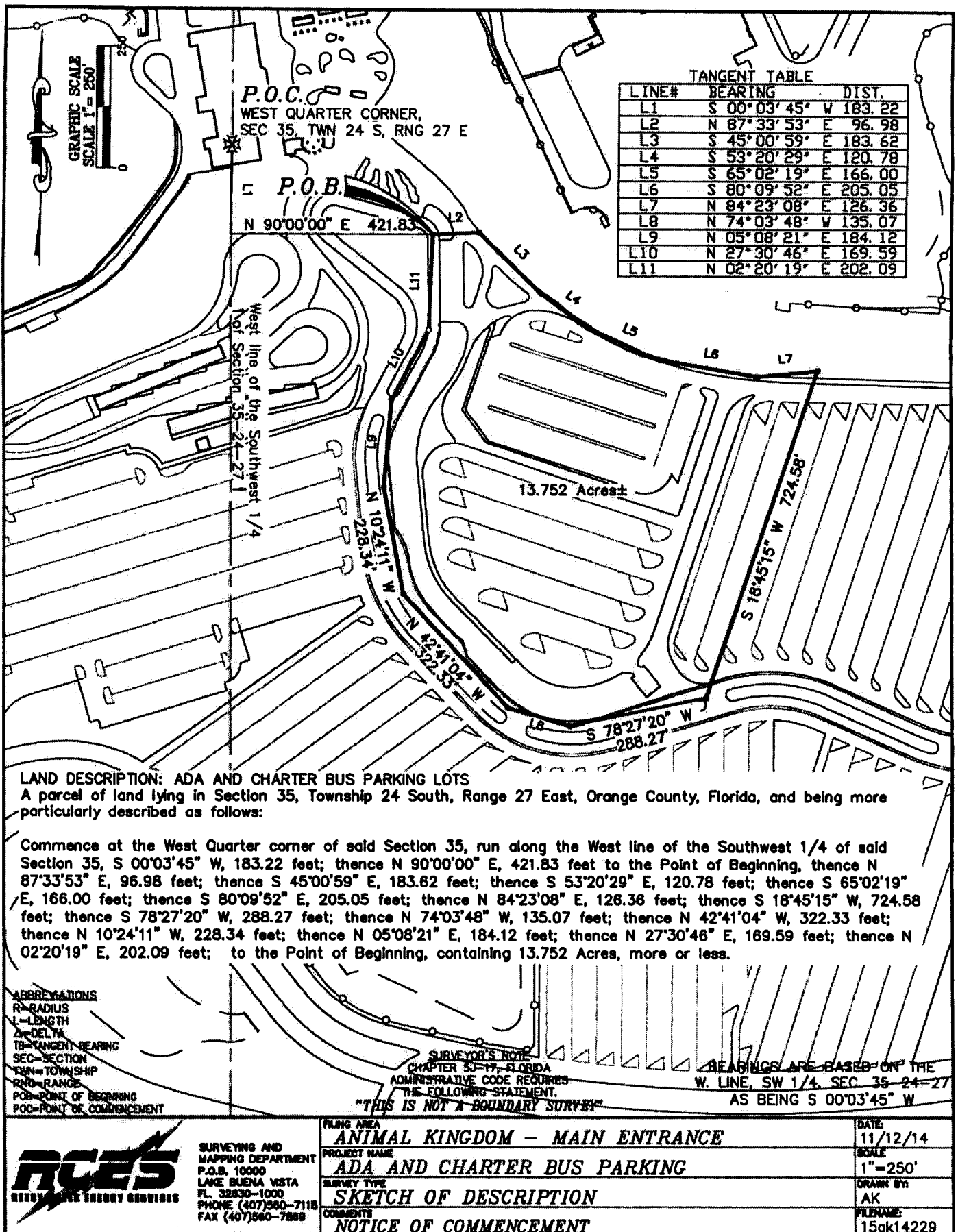
as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

Personally Known X OR Produced ID _____

Type of ID Produced _____





Permit Number:
Folio/Parcel Identification Number:
Prepared by and Return to: **4039380**
Walt Disney World Resort - FAM
Attn: Kent (Robert) Bradley
P.O. Box 10000
Lake Buena Vista, FL 32830-1000

DOCH 20150460048 B: 10976 P: 6502
09/01/2015 02:06:02 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, and street address if available)
SEE ATTACHED
2. **General description of improvement**
POOL PLUMBING MODIFICATIONS
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Falcon of the Nile Water Solutions Telephone Number 407-857-1750
Address 6421 Milner Blvd Ste 2, Orlando, FL 32809
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)
12/04/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

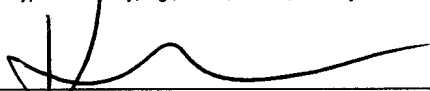
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.


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

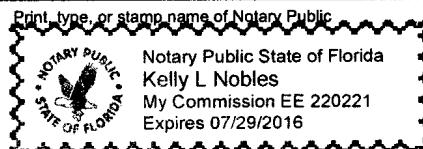
Brian J. Crain
Signatory's Printed Name/Title/Office

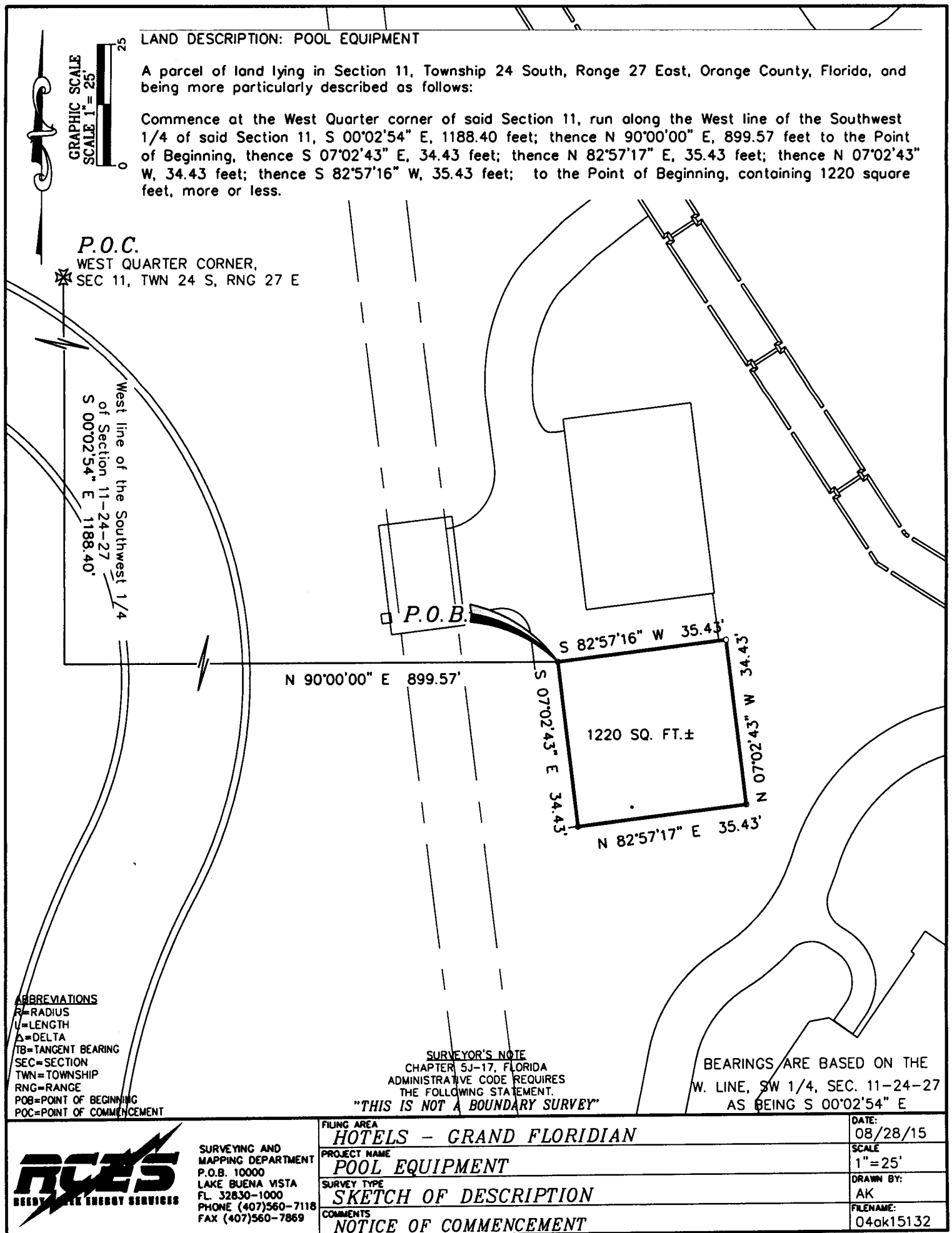
The foregoing instrument was acknowledged before me this 1ST day of Sept 2015, by Brian Crain
month/year

as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed


Signature of Notary Public - State of Florida

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





Prepared by/record and return to:
Walt Disney World Resort
Attn: Andrew Highsmith
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): SimplexGrinnell/6830 Shadowridge Dr. Suite 211 Orlando, FL 32812
(b) Contractor's phone number: 407/235-1138
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 **Andrew Highsmith** of Disney Hollywood to receive a copy of the **Lienor's Notice** as provided in Section 713.13 (1)(b), Florida Statutes. **DavDa**
(b) Phone number of person or entity designated by owner: 407-560-5494
9. Expiration date of **notice** of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):

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)

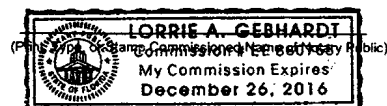
DHS
ANDREW HIGHSMITH, MGR. OF ENGINEERING
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 31st day of August, 2015, by Andrew Highsmith 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



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.

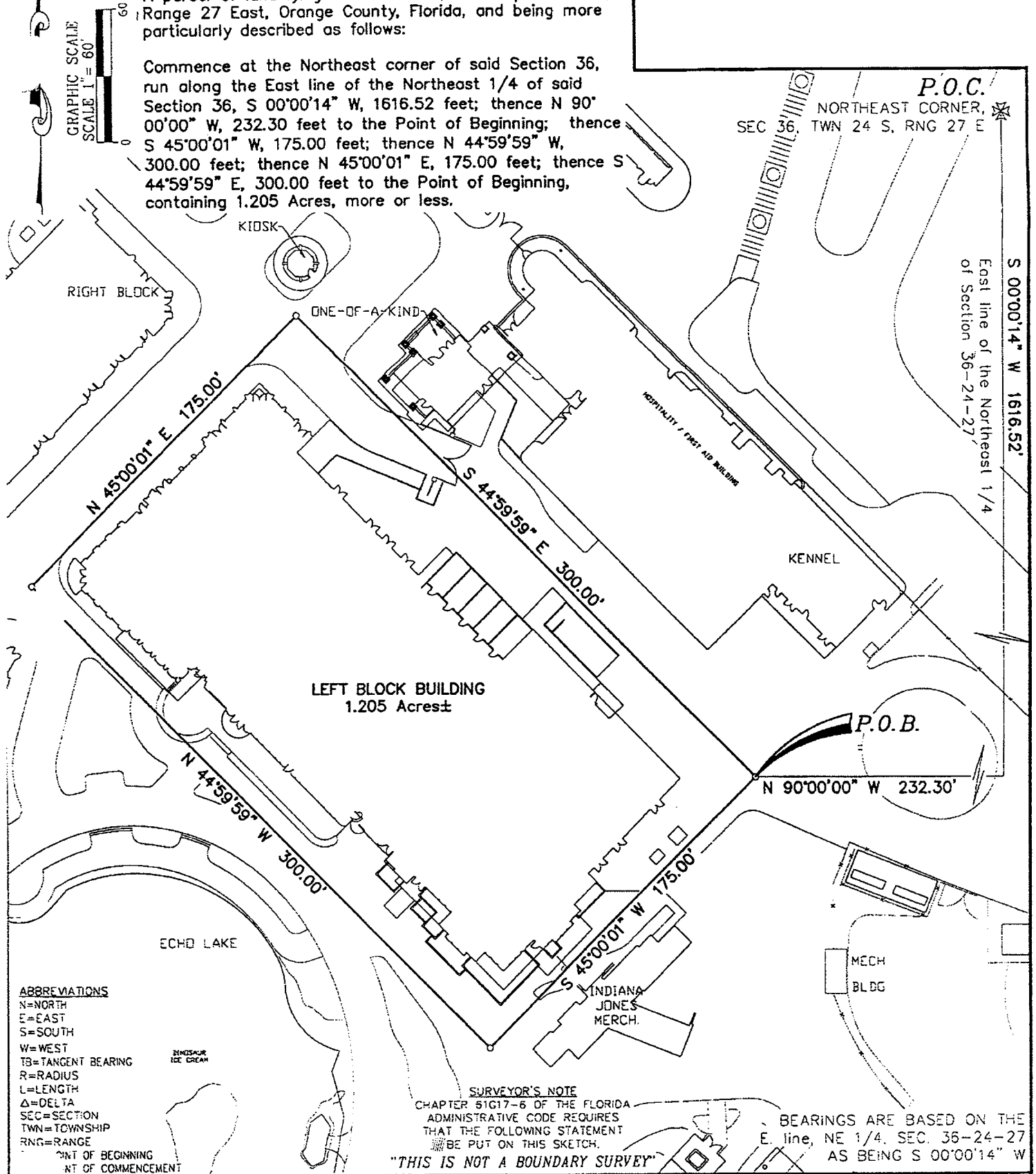


Signature of Natural Person Signing Above

LAND DESCRIPTION: LEFT BLOCK BUILDING

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, 1616.52 feet; thence N 90°00'00" W, 232.30 feet to the Point of Beginning; thence S 45°00'01" W, 175.00 feet; thence N 44°59'59" E, 300.00 feet; thence N 45°00'01" E, 175.00 feet; thence S 44°59'59" E, 300.00 feet to the Point of Beginning, containing 1.205 Acres, 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
P.O.B. POINT OF BEGINNING
P.O.C. POINT OF COMMENCEMENT

DINOSAUR
ICE CREAM

SURVEYOR'S NOTE

CHAPTER 51G17-6 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)828-2506 FAX (407)828-2260

PROJECT AREA
STUDIO TOUR
UNIT NAME
LEFT BLOCK BUILDING
SHEET TITLE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
02/25/00
SCALE
1" = 60'
DRAWN BY:
JKL
FILENAME
12JLC0053

Prepared by/record and return to:

Walt Disney World Resort
Attn: Colby Romano
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 Legal Description
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): Ferran Services & Contracting, 530 Grand St, Orlando, FL 32805
(b) Contractor's phone number: 407-422-3551
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 **Colby Romano** of WDW PO Box 1 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: 407-934-3170
9. Expiration date of **notice** of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): Aug 01, 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)

Colby Romano / Eng Manager

Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 1st day of September, 20 15, by Colby Romano, as

Authorized Signatory

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

Signature of Notary Public - State of Florida

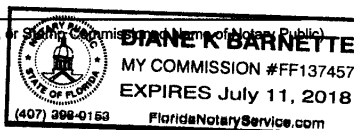
Personally Known ☒ OR Produced ID

Type of ID Produced _____

Walt Disney World Resort

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

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



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

LAND DESCRIPTION: LODGE BUILDING #3800

A parcel of land lying in Section 31, Township 24 South, Range 28 East, Orange County, Florida, and being more particularly described as follows:

Commence at the Northeast corner of said Section 31, run along the East line of the Northeast 1/4 of said Section 31, S 00°40'55" E, 1365.46 feet; thence N 90°00'00" W, 406.05 feet to the Point of Beginning; thence S 45°01'20" W, 21.71 feet; thence S 39°22'52" E, 56.99 feet; thence S 46°45'28" W, 57.79 feet; thence S 39°37'57" E, 55.91 feet; thence S 50°50'14" W, 76.02 feet; thence N 49°25'14" W, 27.39 feet; thence S 53°38'13" W, 23.37 feet; thence N 52°45'18" W, 28.62 feet; thence S 49°57'40" W, 28.47 feet; thence N 43°43'34" W, 77.39 feet; thence N 35°09'59" W, 75.68 feet; thence N 42°28'38" E, 31.54 feet; thence S 60°26'29" E, 21.07 feet; thence N 57°02'21" E, 55.49 feet; thence S 41°47'51" E, 49.79 feet; thence N 50°12'58" E, 88.95 feet; thence N 34°18'27" W, 13.18 feet; thence N 47°41'06" E, 30.14 feet; thence S 43°15'02" E, 33.97 feet to the Point of Beginning, containing 28188 square feet, more or less.

GRAPHIC SCALE
SCALE 1" = 80'

P.O.C.
NORTHEAST CORNER, SEC 31, TWN 24 S, RNG 28 E

S 00°40'55" E 1365.46'
East line of the Northeast 1/4 of Section 31-24-28

P.O.B.

N 90°00'00" W 406.05'

BUILDING #3800
28188 SQ. FT.±

TANGENT TABLE

LINE#	BEARING	DIST.
L1	S 45°01'20" W	21.71
L2	S 39°22'52" E	56.99
L3	S 46°45'28" W	57.79
L4	S 39°37'57" E	55.91
L5	N 49°25'14" W	27.39
L6	S 53°38'13" W	23.37
L7	N 52°45'18" W	28.62
L8	S 49°57'40" W	28.47
L9	N 42°28'38" E	31.54
L10	S 60°26'29" E	21.07
L11	N 57°02'21" E	55.49
L12	S 41°47'51" E	49.79
L13	N 34°18'27" W	13.18
L14	N 47°41'06" E	30.14
L15	S 43°15'02" E	33.97

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 81C17-6 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. 31-24-28
AS BEING S 00°40'55" E



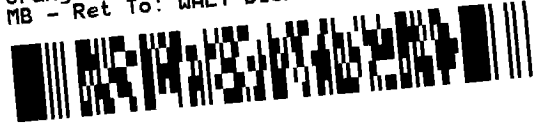
SURVEYING AND
MAPPING DEPARTMENT
P.O.B. 10000
LAKE BUENA VISTA
FL 32830-1000
PHONE (407)660-7118

PROJECT AREA
HOTELS - CARIBBEAN BEACH
UNIT NAME
LODGE BUILDING #3600
SHEET TITLE
SKETCH OF DESCRIPTION

DATE:
09/14/04
SCALE
1" = 80'
DRAWN BY:
MF
BY FINAL

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

DOCH 20150465443 B: 10978 P: 3608
09/03/2015 11:53:52 AM 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, and street address if available)
See attached legal description
2. **General description of improvement**
Mechanical
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Lo Temp Engineering Telephone Number (407) 654-4055
Address 1001 Crown Park Circle, Winter Garden, FL 32787
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
Name _____ Telephone Number _____
Address _____
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 Brad Lunte Telephone Number (407) 560-5324
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)
12/31/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

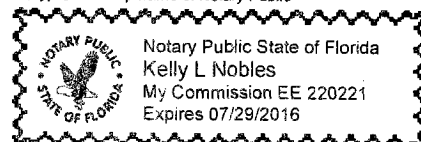
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

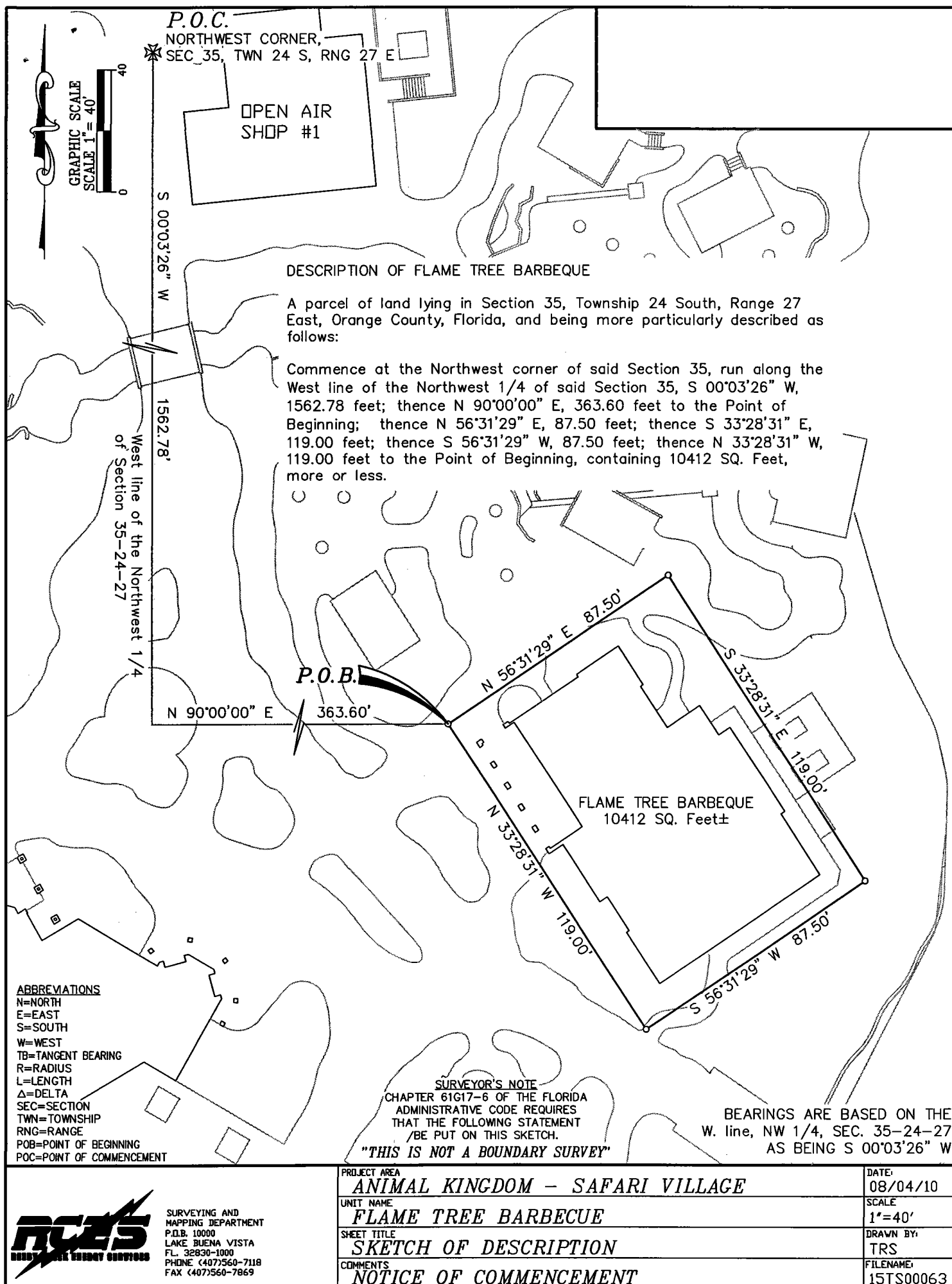
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager: Brad Lunte / PMA / FAM
Signature of Signatory: Brad Lunte
The foregoing instrument was acknowledged before me this 3rd day of Sept 2015, by Brad Lunte
as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact _____ Name of party on behalf of whom instrument was executed _____

Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

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





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

DOCH 20150465444 B: 10978 P: 3610
09/03/2015 11:53:52 AM 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

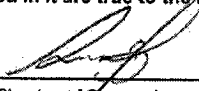
State of Florida, County of Orange

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, and street address if available)
See attached legal description
2. **General description of improvement**
Mechanical
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Lo Temp Engineering Telephone Number (407) 654-4055
Address 1001 Crown Park Circle, Winter Garden, FL 32787
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
Name _____ Telephone Number _____
Address _____
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 Brad Lunte Telephone Number (407) 560-5324
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)
12/31/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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



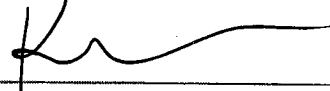
Signature of Owner or Lessee, or Owner's or
Lessee's Authorized Officer/Director/Partner/Manager

BRAD LUNTE / PMA / FAM

Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 3rd day of Sept 2015 by BRAD LUNTE
month/year

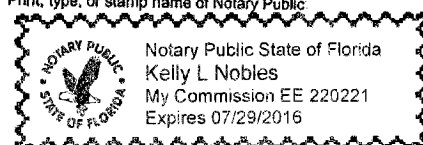
as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

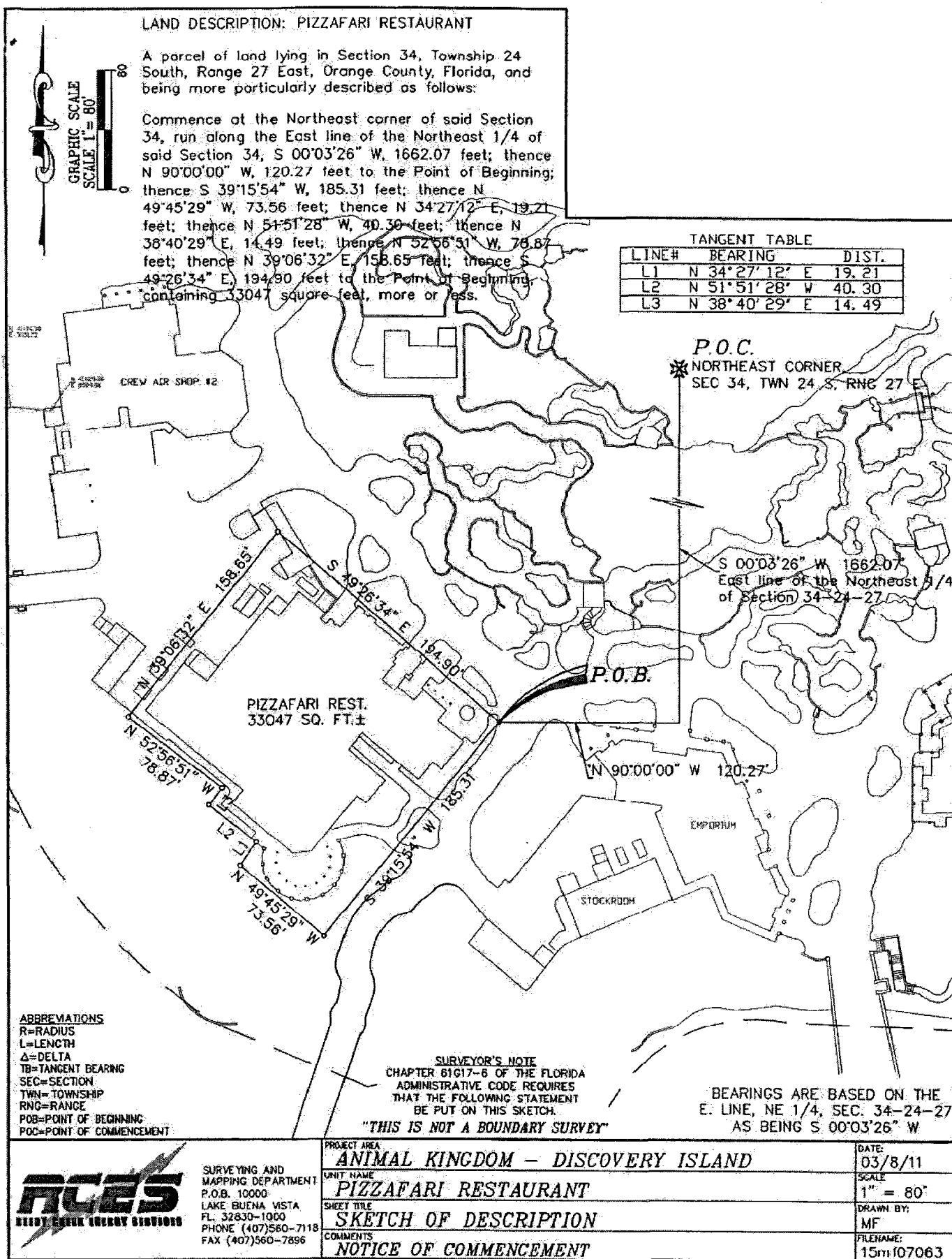


Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

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





Prepared by/record and return to:
Walt Disney World Resort
Attn: Andrew Highsmith
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): Grunau Company/11300 Space Boulevard, Orlando, FL 32837
(b) Contractor's phone number: 407/857-1800
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 **Andrew Highsmith** of Disney Hollywood to receive a copy of the **Lienor's Notice** as provided in Section 713.13 (1)(b), Florida Statutes. DavDa
(b) Phone number of person or entity designated by owner: 407-560-5494
9. Expiration date of **notice** of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):

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

The foregoing instrument was acknowledged before me this 1st day of Sept, 2015, by Andrew Highsmith

Authorized Signatory

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


Signature of Notary Public - State of Florida

Personally Known ☒ OR Produced ID


Type of ID Produced _____

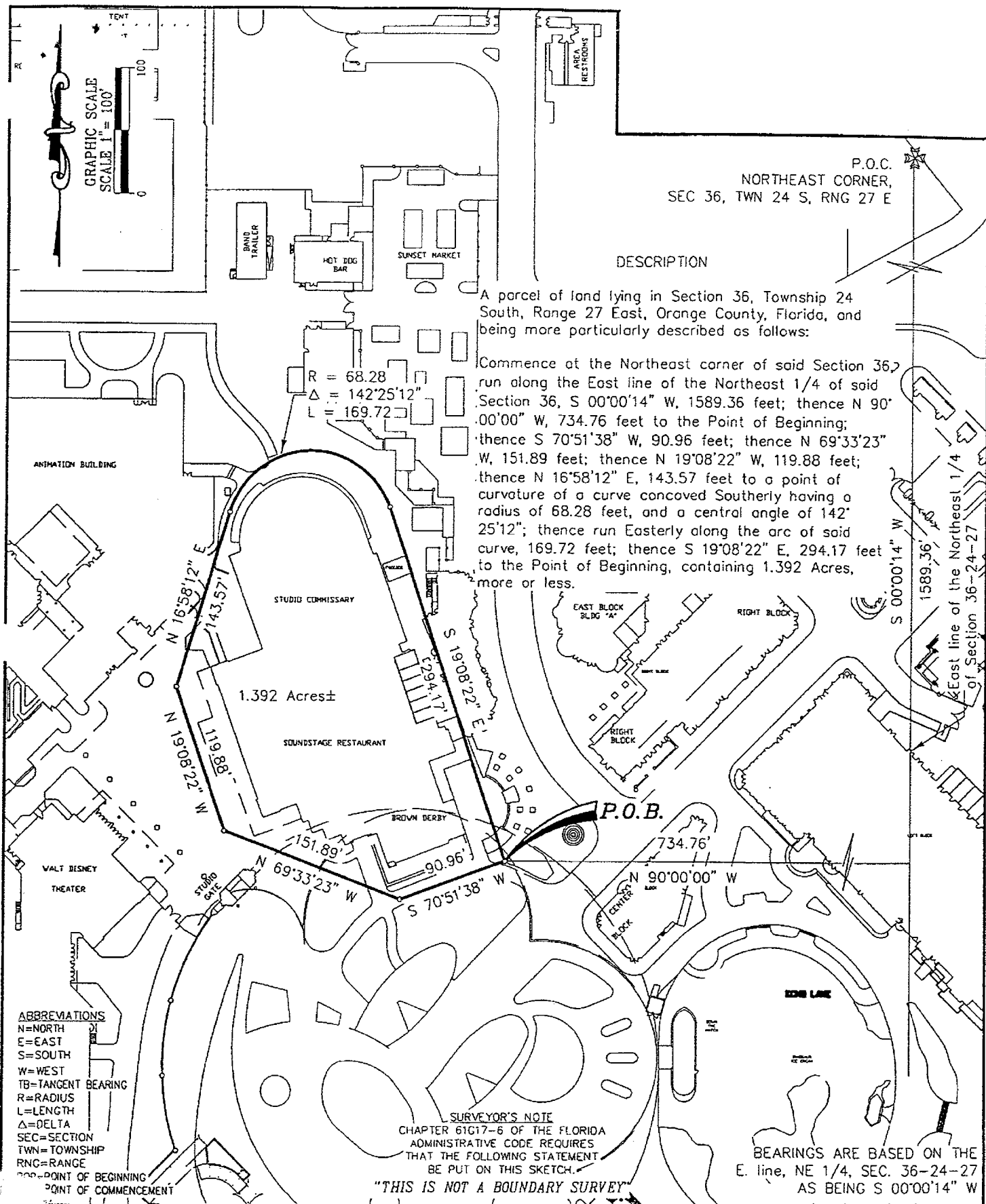
Walt Disney World Resort

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


LORRIE A. GEBHARDT
Commission # EE-866785
December 26, 2016

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


Signature of Natural Person Signing Above



**REEDY CREEK
ENERGY SERVICES, INC.**
SURVEY AND MAPPING DEPARTMENT
P.O.B. 10000, LAKE BUENA VISTA, FL 32830-1000
TELEPHONE (407)828-2506 FAX (407)828-2260

PROJECT AREA	DISNEY'S MCM STUDIOS	DATE:	06/05/98
UNIT NAME	BROWN DERBY, STUDIO COMMISSARY, SOUNDSTAGE RESTAURANT	SCALE	1" = 150'
SHEET TITLE	SKETCH OF DESCRIPTION	DRAWN BY:	JLG
COMMENTS	NOTICE OF COMMENCEMENT	FILENAME:	12JG9802

Prepared by/record and return to:
Walt Disney World Resort
Attn: Andrew Highsmith
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): Grunau Company/11300 Space Boulevard, Orlando, FL 32837
(b) Contractor's phone number: 407/857-1800
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 **Andrew Highsmith** of Disney Hollywood to receive a copy of the **Lienor's Notice** as provided in Section 713.13 (1)(b), Florida Statutes. **DavDa**
(b) Phone number of person or entity designated by owner: 407-560-5494
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):

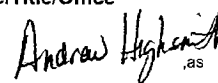
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED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

The foregoing instrument was acknowledged before me this 1st day of Sept, 2015, by


as

Authorized Signatory

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

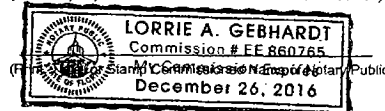

Signature of Notary Public - State of Florida

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 of Natural Person Signing Above

LAND DESCRIPTION: MAMA MELROSE BOILER

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, 2624.80 feet; thence N 90°00'00" W, 308.66 feet to the Point of Beginning; thence S 60°05'15" W, 69.16 feet; thence N 49°25'14" W, 66.97 feet; thence N 46°55'52" E, 77.09 feet; thence S 41°26'44" E, 82.34 feet to the Point of Beginning, containing 5356 square feet, more or less.

GRAPHIC SCALE
SCALE 1" = 30'

MUPPET "B"
COMPLEX

BOILER
5356 SQ. FT.±

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

S 00°00'14" W 2624.80'
East line of the Northeast 1/4
of Section 36-24-27

P.O.B.

N 90°00'00" W 308.66'

ABBREVIATIONS
R=RADIUS
L=LENGTH
Δ=DELTA
TB=TANGENT BEARING
SEC=SECTION
TWN=TOWNSHIP
RNG=RANGE
P.O.B.=POINT OF BEGINNING
P.O.C.=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



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

PROJECT AREA HOLLYWOOD STUDIOS - STREETS OF AMERICA	DATE: 06/29/10
UNIT NAME MAMA MELROSE BOILER	SCALE 1" = 50'
SHEET TITLE SKETCH OF DESCRIPTION	DRAWN BY: AK
COMMENTS NOTICE OF COMMENCEMENT	FILENAME: 12AK10191

Prepared by/record and return to:
Walt Disney World Resort
Attn: Julie Nechchat
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: Legal description 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. Contractor (name and address): Faden Builders, Inc. 736 S Rossiter St. Mt. Dora, FL 32757
 - (b) Contractor's phone number: 352-802-3209
5. Surety:
 - (a) Name and address:
 - (b) Phone number:
 - (c) Amount of Bond:
6. Lender (name and address):
 - (b) Lender's phone number:
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(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. In addition to himself or herself, Owner designates Don Weschler of Magic Kingdom 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: 407-824-4817
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 8/31/2016

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)

DON WESCHLER / DIRECTOR NKES
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 1 day of September, 2015, by Don Weschler, as

Authorized Signatory

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

Nilda Lee Esparra
Signature of Notary Public - State of Florida

Walt Disney World Resort

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

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

Personally Known ☒ OR Produced ID
Type of ID Produced _____

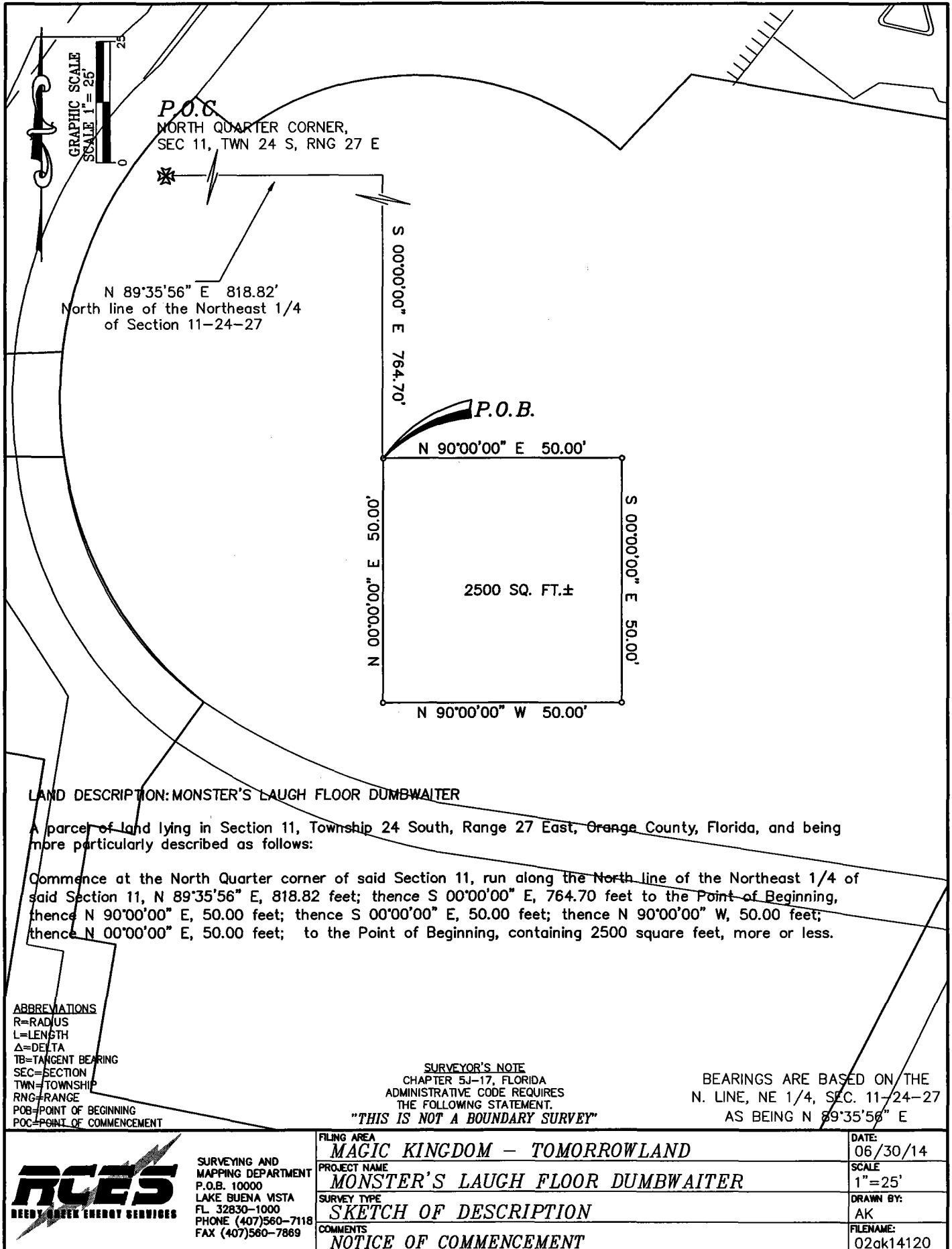
Verification pursuant to Section 92.525, Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

[Signature]

Signature of Natural Person Signing Above



Nilda Lee Esparra
Commission # FF164889
Expires: OCT 01, 2018
BONDED THRU
1ST FLORIDA NOTARY, LLC



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

DOCH 20150465448 B: 10978 P: 3618
09/03/2015 11:53:52 AM 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, and street address if available)
See Attached
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Pooley Enterprises, Inc. Telephone Number _____
Address 7131 Grand National Dr, Orlando, FL 32819
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 Andra Haynes Telephone Number _____
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)
10/30/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

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

Andra Haynes III / Planner / FAM
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 3RD day of April, 2015, by Andra Haynes
month/year

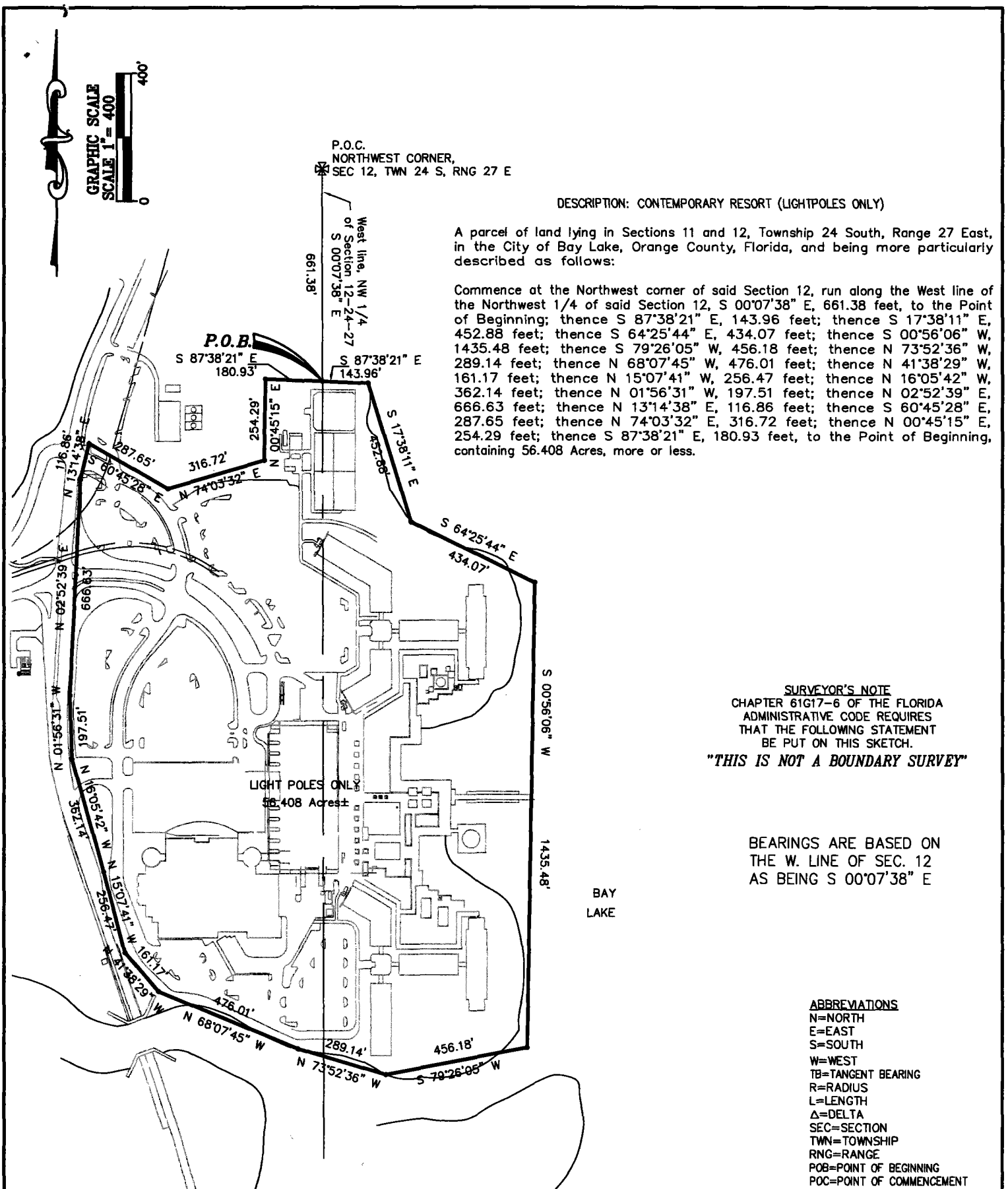
as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

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

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
HOTELS

PROJECT NAME
CONTEMPORARY RESORT (LIGHT POLES ONLY)

SURVEY TYPE
SKETCH OF DESCRIPTION

COMMENTS
NOTICE OF COMMENCEMENT

DATE:
08/31/15

SCALE
1" = 400'

DRAWN BY:
JLG

FILENAME:
04JG9602

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

DOCH 20150465449 B: 10978 P: 3620
09/03/2015 11:53:52 AM 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, and street address if available)
See Attached
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Stanley Convergent Security Solution Telephone Number 407-236-7429
Address 1806 22rd St. Suite 200, Orlando, FL 32839
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
Name _____ Telephone Number _____
Address _____
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes.**
Name Judy Wells, Facility Asset Management (FAM) Telephone Number (407) 939-4631
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes.**
Name Chris Dickman Telephone Number (407) 828-1277
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)
10/10/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

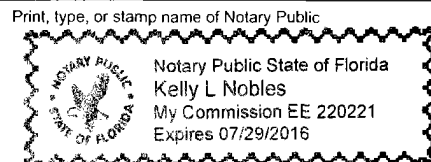
Richard A. Woods Richard A. Woods / Sr. Planner / F.A.M.
Signature of Owner or Lessee, or Owner's or Signatory's Printed Name/Title/Office
Lessee's Authorized Officer/Director/Partner/Manager

The foregoing instrument was acknowledged before me this 3rd day of September by Richard Woods
month/year

as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

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



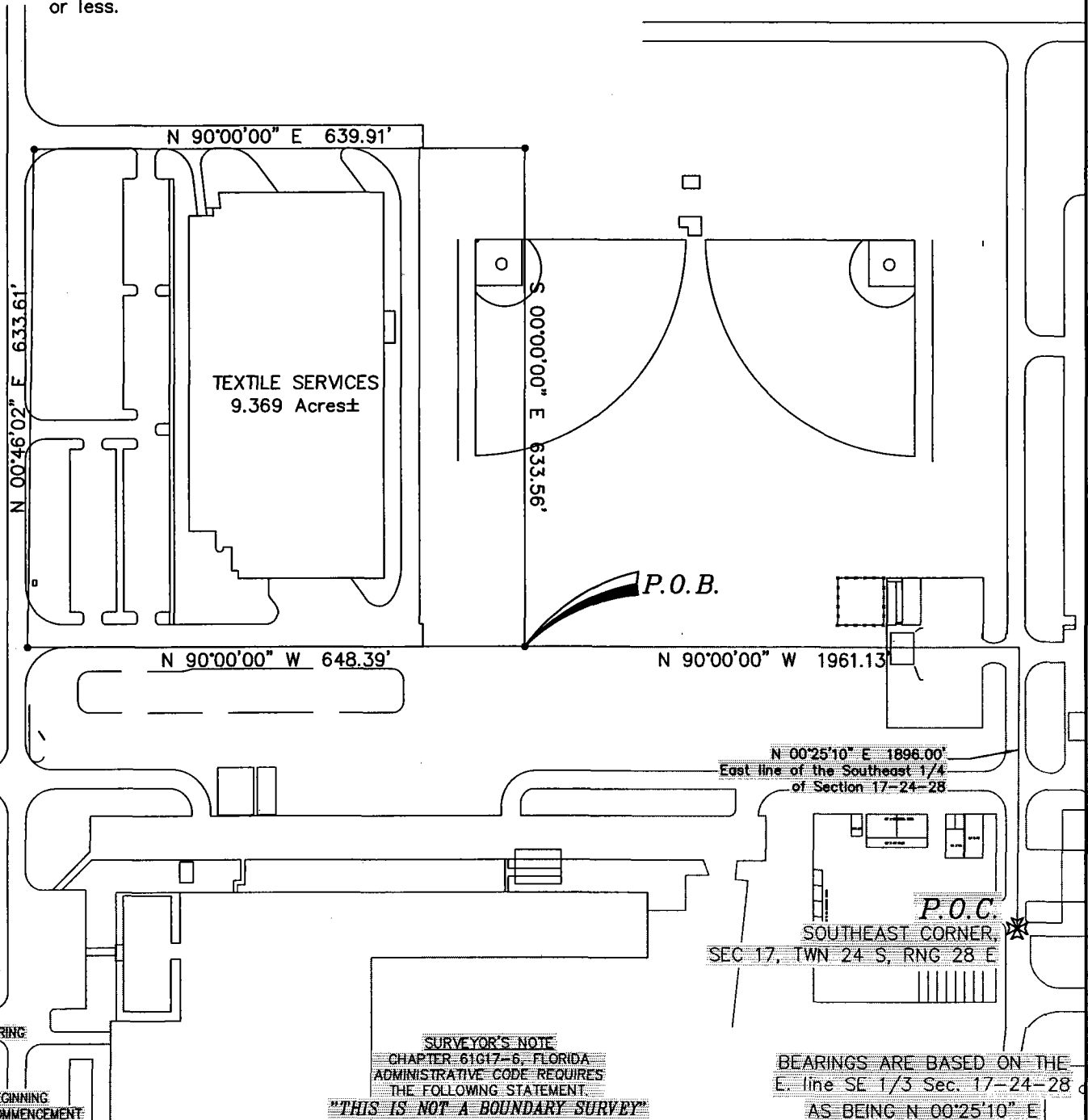
4039676

LAND DESCRIPTION: TEXTILE SERVICES

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 East line of the Southeast 1/4 of said Section 17, N 00°25'10" E, 1896.00 feet; thence N 90°00'00" W, 1961.13 feet to the Point of Beginning thence N 90°00'00" W, 648.39 feet; thence N 00°46'02" E, 633.61 feet; thence N 90°00'00" E, 639.91 feet; thence S 00°00'00" E, 633.56 feet to the Point of Beginning, containing 9.369 Acres, more or less.

GRAPHIC SCALE
SCALE 1" = 200'



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 1/3 Sec. 17-24-28
AS BEING N 00°25'10" E

RCES
BERRY CREEK ENERGY SERVICES

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 - ADMIN AREA
PROJECT NAME
TEXTILE SERVICES
SURVEY TYPE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
10/02/14
SCALE
1" = 200'
DRAWN BY:
MF
FILENAME:
09mf07513

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

DOC# 20150465450 B: 10978 P: 3622
09/03/2015 11:53:52 AM 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, and street address if available)
See Attached
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Pooley Enterprises, Inc. Telephone Number _____
Address 7131 Grand National Dr, Orlando, FL 32819
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 Andra Haynes Telephone Number _____
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)
10/30/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.


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


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


Signatory's Printed Name/Title/Office

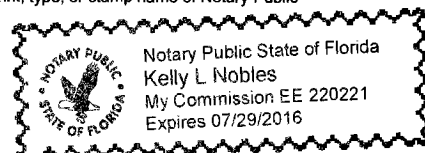
The foregoing instrument was acknowledged before me this 3RD day of Sept 2015, by Andra Haynes
month/year

as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed


Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

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



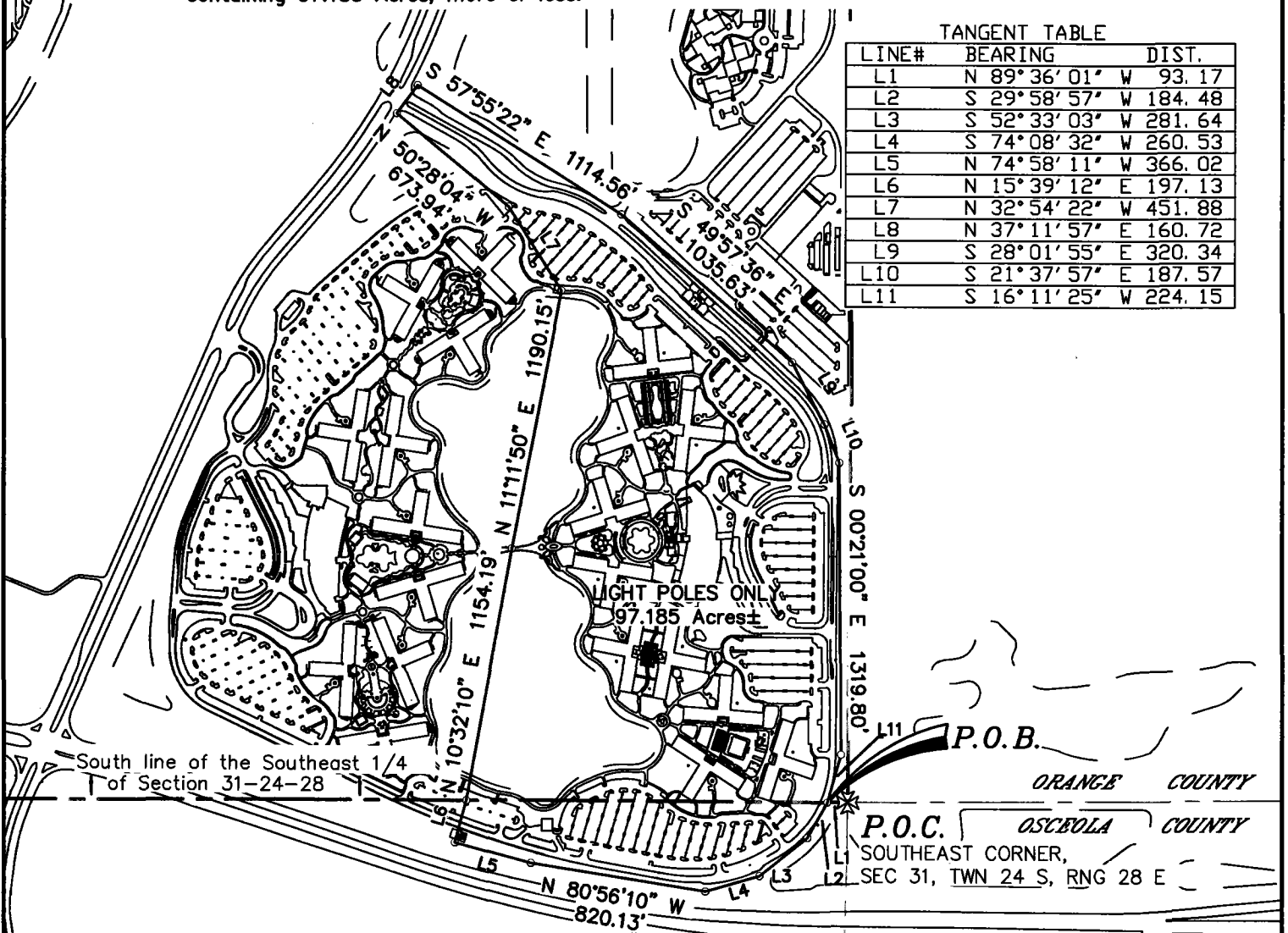
LAND DESCRIPTION: POP CENTURY (LIGHT POLES ONLY)

A parcel of land lying in Section 31, Township 24 South, Range 28 East, Orange County, Florida, and Section 5, Township 25 South, Range 28 East, Osceola County, Florida and being more particularly described as follows:

Commence at the Southeast corner of said Section 31, run along the South line of the Southeast 1/4 of said Section 31, N 89°36'01" W, 93.17 feet, to the Point of Beginning of said strip of land being 0.00 feet each side of the following described centerline: thence S 29°58'57" W, 184.48 feet; thence S 52°33'03" W, 281.64 feet; thence S 74°08'32" W, 260.53 feet; thence N 80°56'10" W, 820.13 feet; thence N 74°58'11" W, 366.02 feet; thence N 15°39'12" E, 197.13 feet; thence N 10°32'10" E, 1154.19 feet; thence N 11°11'50" E, 1190.15 feet; thence N 32°54'22" W, 451.88 feet; thence N 50°28'04" W, 673.94 feet; thence N 37°11'57" E, 160.72 feet; thence S 57°55'22" E, 1114.56 feet; thence S 49°57'36" E, 1035.63 feet; thence S 28°01'55" E, 320.34 feet; thence S 21°37'57" E, 187.57 feet; thence S 00°21'00" E, 1319.80 feet; thence S 16°11'25" W, 224.15 feet; to the Point of Beginning, containing 97.185 Acres, more or less.

TANGENT TABLE

LINE#	BEARING	DIST.
L1	N 89°36'01" W	93.17
L2	S 29°58'57" W	184.48
L3	S 52°33'03" W	281.64
L4	S 74°08'32" W	260.53
L5	N 74°58'11" W	366.02
L6	N 15°39'12" E	197.13
L7	N 32°54'22" W	451.88
L8	N 37°11'57" E	160.72
L9	S 28°01'55" E	320.34
L10	S 21°37'57" E	187.57
L11	S 16°11'25" W	224.15



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
S. LINE, SE 1/4, SEC. 31-24-28
HAS BEING N 89°36'01" 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 - POP CENTURY
PROJECT NAME
LIGHT POLES ONLY
SURVEY TYPE
SKETCH OF DESCRIPTION
COMMENTS
CHANGEME

DATE:
08/31/15
SCALE
1"=750'
DRAWN BY:
AK
FILENAME:
04AK15134

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

DOC# 20150465451 B: 10978 P: 3624
09/03/2015 11:53:52 AM 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

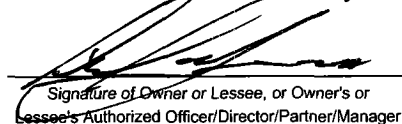
State of Florida, County of Orange

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, and street address if available)
See Attached
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Pooley Enterprises, Inc. Telephone Number _____
Address 7131 Grand National Dr, Orlando, FL 32819
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 Andra Haynes Telephone Number _____
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)
10/30/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

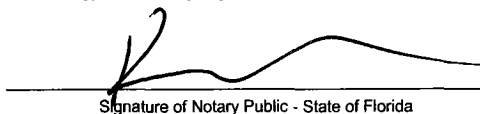
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.


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

Andra Haynes - Planner/FAM
Signatory's Printed Name/Title/Office

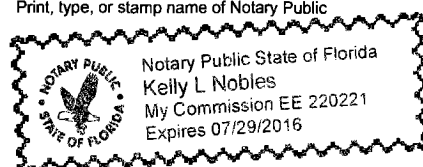
The foregoing instrument was acknowledged before me this 3RD day of Sept 2015 by Andra Haynes
month/year

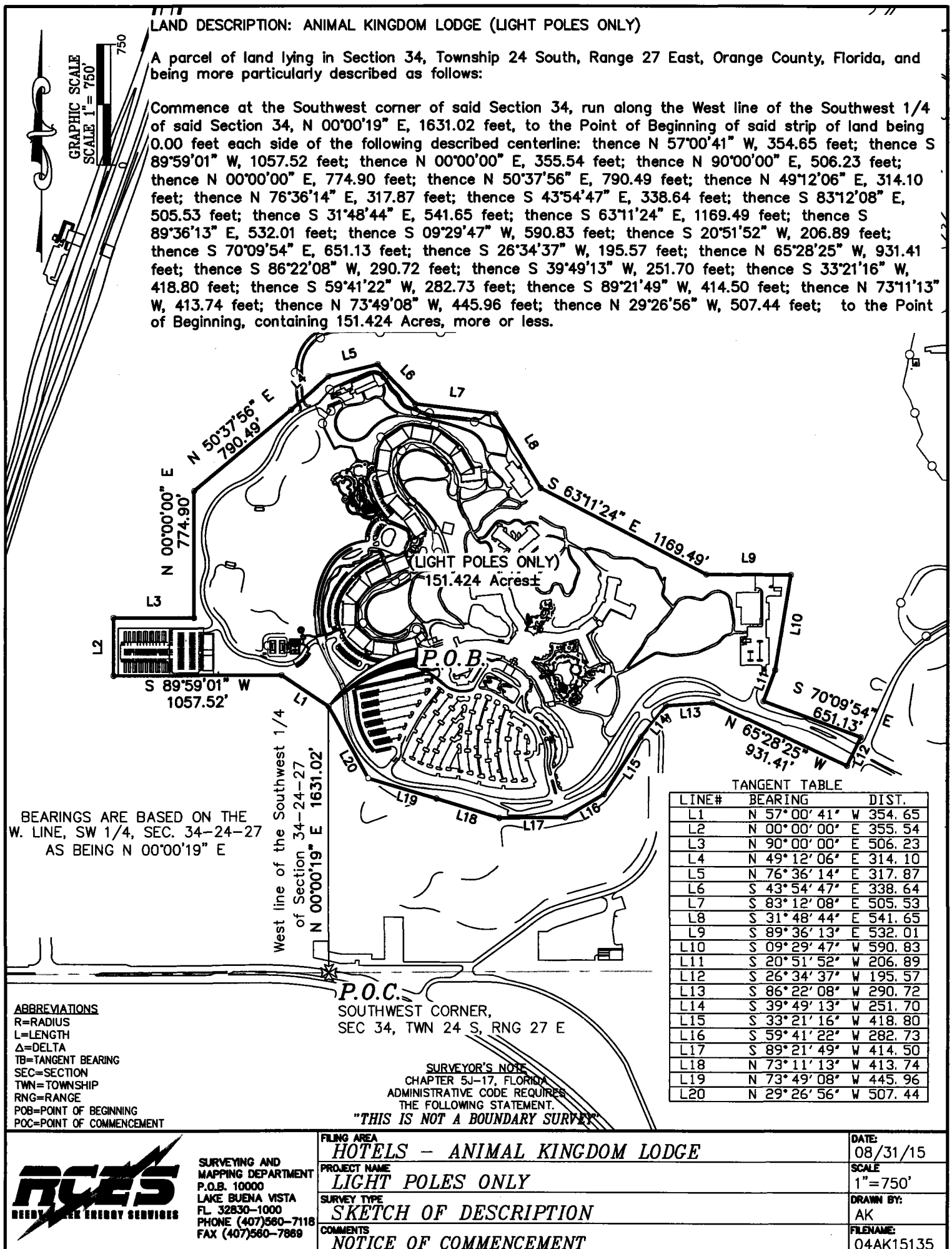
as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed


Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

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

DOC# 20150465452 B: 10978 P: 3626
09/03/2015 11:53:52 AM 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, and street address if available)
See attached Legal Description
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Southeastern Construction & Maint. Telephone Number 407-933-7700
Address 4712 Old Tampa Hwy, Kissimmee, FL 34746
5. **Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
6. **Lender**
Name _____ Telephone Number _____
Address _____
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes.**
Name Judy Wells, Facility Asset Management (FAM) Telephone Number (407) 939-4631
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes.**
Name Debbie Mize Telephone Number (407) 560-4819
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
9. **Expiration date of notice of commencement** (the expiration date 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)
12/31/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

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

Debbie J. Mize, FAM Proj. Mgr. Assoc
Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 3RD day of Sept 2015 by Debbie Mize
month/year

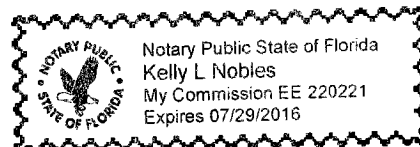
as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

Personally Known X OR Produced ID _____

Type of ID Produced _____



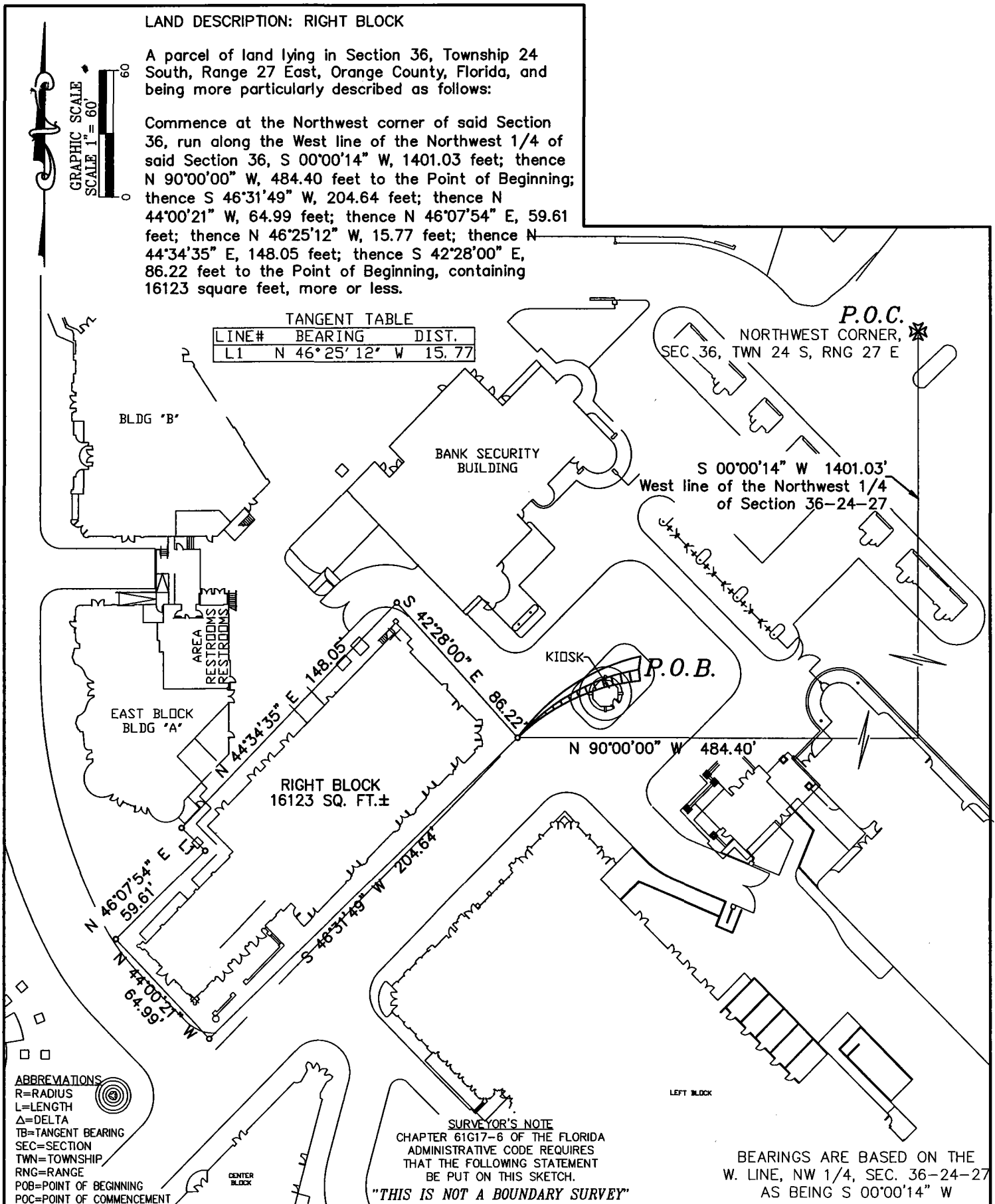
LAND DESCRIPTION: RIGHT BLOCK

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 Northwest corner of said Section 36, run along the West line of the Northwest 1/4 of said Section 36, S 00°00'14" W, 1401.03 feet; thence N 90°00'00" W, 484.40 feet to the Point of Beginning; thence S 46°31'49" W, 204.64 feet; thence N 44°00'21" W, 64.99 feet; thence N 46°07'54" E, 59.61 feet; thence N 46°25'12" W, 15.77 feet; thence N 44°34'35" E, 148.05 feet; thence S 42°28'00" E, 86.22 feet to the Point of Beginning, containing 16123 square feet, more or less.

TANGENT TABLE

LINE#	BEARING	DIST.
L1	N 46°25'12" W	15.77



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

RCS
READY CRACK ENERGY SERVICES

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

PROJECT AREA
STUDIO - ATTRACTIONS
UNIT NAME
RIGHT BLOCK
SHEET TITLE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
11/10/14
SCALE
1" = 60'
DRAWN BY:
MF
FILENAME:
12mf05291

Permit Number:
Folio/Parcel Identification Number:
Prepared by and Return to: - **4037204**
Walt Disney World Resort - FAM
Attn: Kent (Robert) Bradley
P.O. Box 10000
Lake Buena Vista, FL 32830-1000

DOCH 20150465453 B: 10978 P: 3628
09/03/2015 11:53:52 AM 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, and street address if available)
SEE ATTACHED
2. **General description of improvement**
CONTRACTOR GENERAL CONDITIONS
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
Name Walt Disney World Resort
Address P.O. Box 10000, Lake Buena Vista, FL 32830
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Vanson Enterprises Inc Telephone Number (407) 647-2334
Address 1231 Kindel Avenue, Winter Park, FL 32789
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)
02/26/2016

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

Kent Bradley Kent Bradley / PMA / FAM
Signature of Owner or Lessee, or Owner's or Signatory's Printed Name/Title/Office
Lessee's Authorized Officer/Director/Partner/Manager

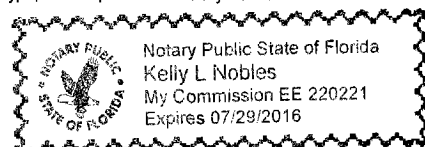
The foregoing instrument was acknowledged before me this 3RD day of Sept 2015 by R. Kent Bradley
month/year

as _____ Authorized Signatory _____ for _____ Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]
Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

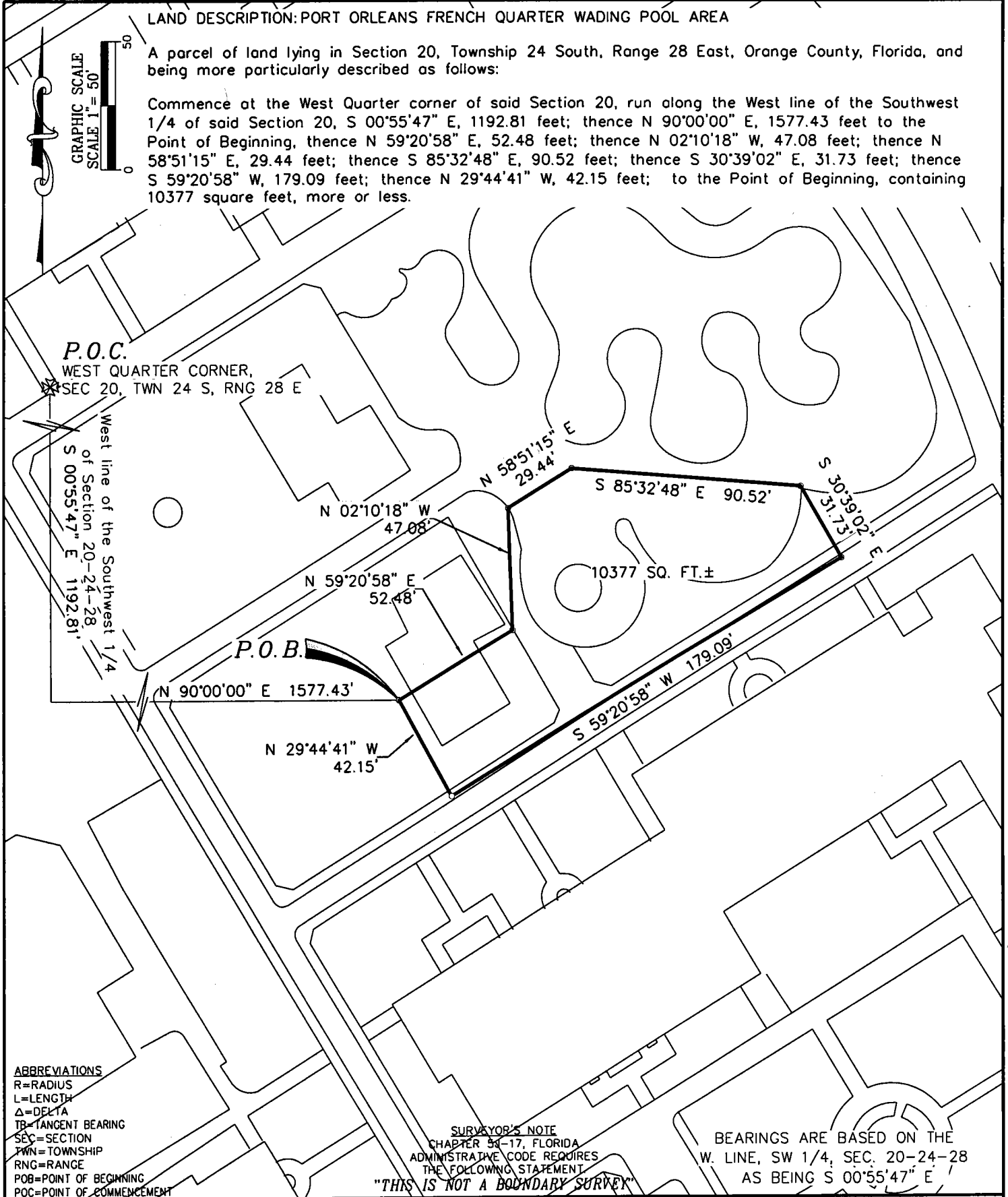
Personally Known X OR Produced ID _____
Type of ID Produced _____



LAND DESCRIPTION: PORT ORLEANS FRENCH QUARTER WADING POOL AREA

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 West Quarter corner of said Section 20, run along the West line of the Southwest 1/4 of said Section 20, S 00°55'47" E, 1192.81 feet; thence N 90°00'00" E, 1577.43 feet to the Point of Beginning, thence N 59°20'58" E, 52.48 feet; thence N 02°10'18" W, 47.08 feet; thence N 58°51'15" E, 29.44 feet; thence S 85°32'48" E, 90.52 feet; thence S 30°39'02" E, 31.73 feet; thence S 59°20'58" W, 179.09 feet; thence N 29°44'41" W, 42.15 feet; to the Point of Beginning, containing 10377 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 94-17, FLORIDA
ADMINISTRATIVE CODE REQUIRES
THE FOLLOWING STATEMENT:

"THIS IS NOT A BOUNDARY SURVEY"

BEARINGS ARE BASED ON THE
W. LINE, SW 1/4, SEC. 20-24-28
AS BEING S 00°55'47" 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 - PORT ORLEANS FRENCH QUARTER
PROJECT NAME
WADING POOL AREA
SURVEY TYPE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
09/01/15
SCALE
1"=50'
DRAWN BY:
AK
FILENAME:
09ak15136

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

DOCH 20150465454 B: 10978 P: 3630
09/03/2015 11:53:52 AM 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

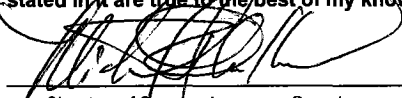
State of Florida, County of Orange

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, and street address if available)
See Attached
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Bruns Inc Telephone Number (407) 827-4338
Address P.O. Box 981, Windermere, FL 34786
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 Mike R. Miller Telephone Number (407) 828-1402
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)
09/25/2015

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

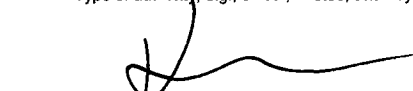
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.


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


Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 3RD day of Sept 2015 by Michael R. Miller
month/year

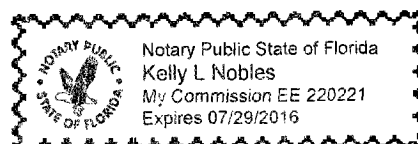
as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

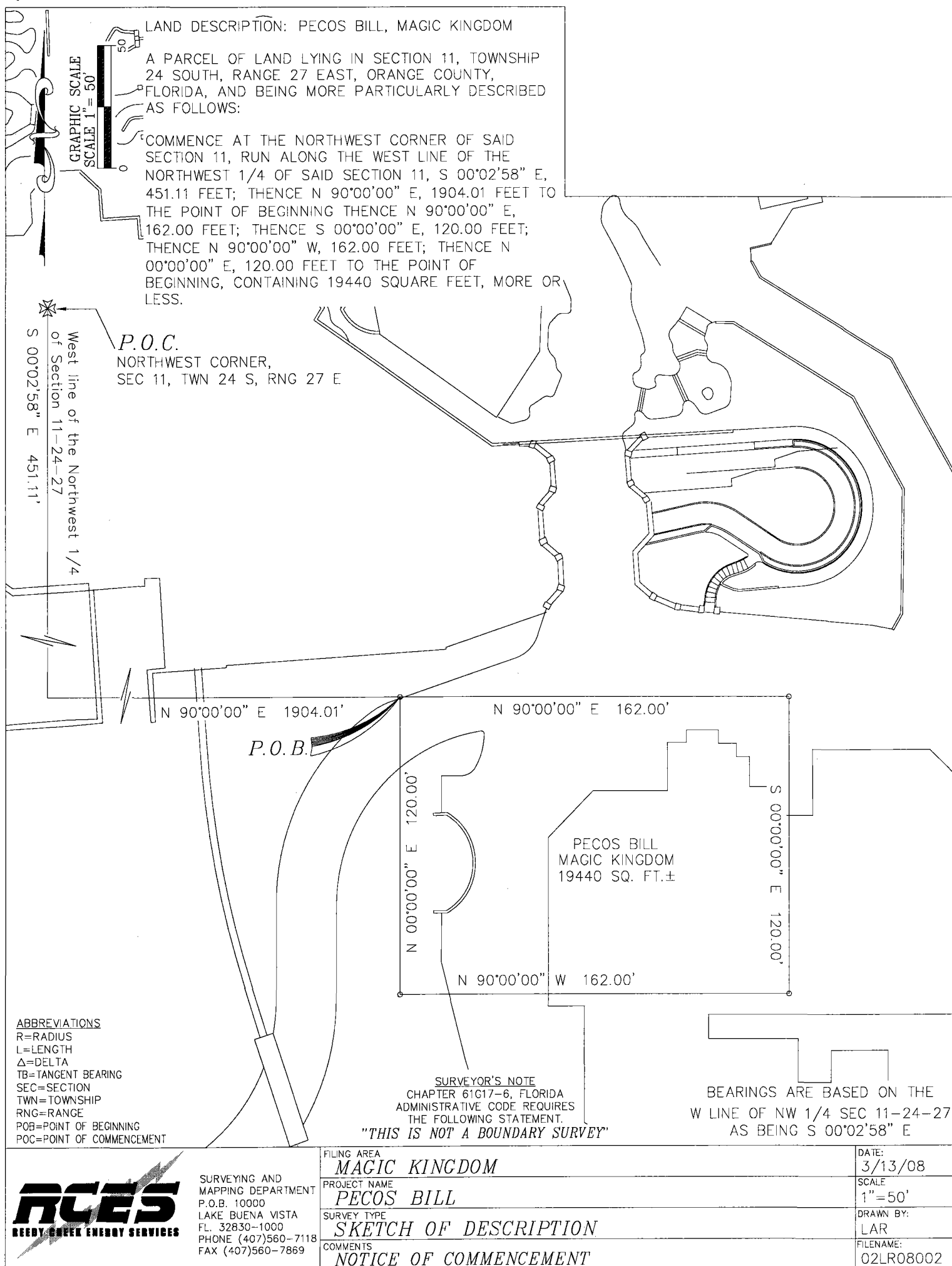

Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

Personally Known X OR Produced ID _____

Type of ID Produced _____





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

DOCH 20150465455 B: 10978 P: 3632
09/03/2015 11:53:52 AM 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, and street address if available)
See attached Legal Description
2. **General description of improvement**
General 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 Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
4. **Contractor**
Name Bruns Inc Telephone Number (407) 827-4338
Address P.O. Box 981, Windermere, FL 34786
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 Debbie Mize Telephone Number (407) 560-4819
Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000
9. **Expiration date of notice of commencement** (the expiration date 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)
01/15/2016

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 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.

Debra J. Mize Debra J. Mize / WDW FAM Proj. Mgr. Assoc.
Signature of Owner or Lessee, or Owner's or Signatory's Printed Name/Title/Office
Lessee's Authorized Officer/Director/Partner/Manager

The foregoing instrument was acknowledged before me this 3RD day of Sept 2015, by Debra Mize
month/year

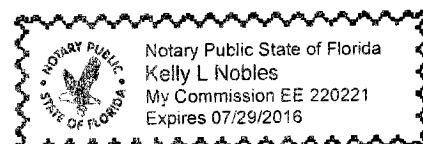
as Authorized Signatory for Walt Disney World Resort
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

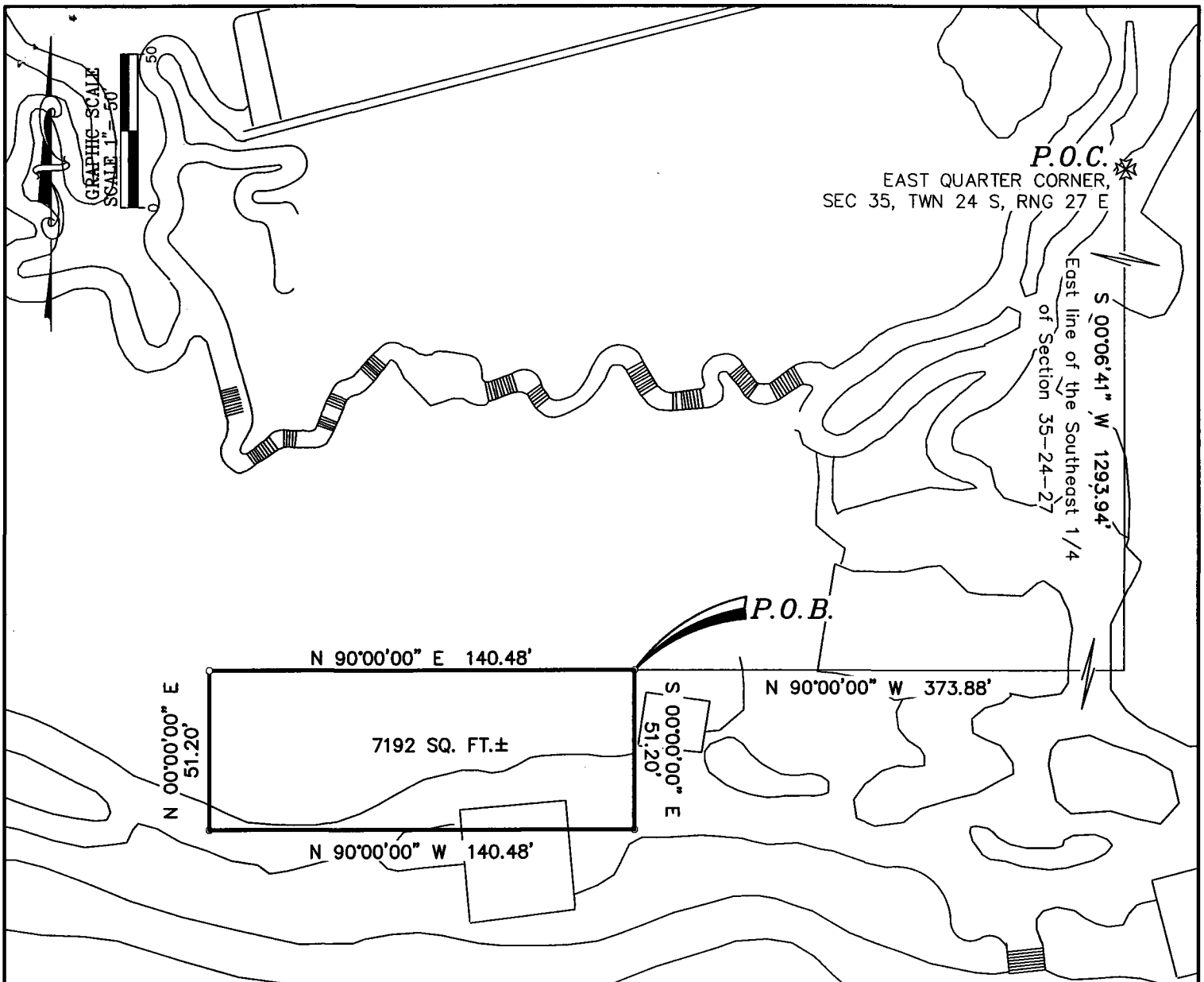
[Signature]
Signature of Notary Public - State of Florida

Print, type, or stamp name of Notary Public

Personally Known X OR Produced ID _____

Type of ID Produced _____





LAND DESCRIPTION: RETAINING WALL

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 East Quarter corner of said Section 35, run along the East line of the Southeast 1/4 of said Section 35, S 00°06'41" W, 1293.94 feet; thence N 90°00'00" W, 373.88 feet to the Point of Beginning, thence S 00°00'00" E, 51.20 feet; thence N 90°00'00" W, 140.48 feet; thence N 00°00'00" E, 140.48 feet; to the Point of Beginning, containing 7192 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 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. 35-24-27
AS BEING S 00°06'41" 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
BLIZZARD BEACH
PROJECT NAME
RETAINING WALL
SURVEY TYPE
SKETCH OF DESCRIPTION
COMMENTS
NOTICE OF COMMENCEMENT

DATE:
09/01/15
SCALE
1"=50'
DRAWN BY:
AK
FILENAME:
16ak15137

Prepared by/record and return to:

Walt Disney World Co.
Facilities Management
Attn:
3403 Vista Blvd., Suite 45
P.O. Box 10000
Lake Buena Vista, FL 32830-1000



THIS SPACE FOR RECORDER'S USE

Permit No. _____

Tax Folio No. _____

NOTICE OF COMMENCEMENT

State of Florida, County of Osceola

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: (legal description of property, and street address, if available).
See Attached.
2. General description of improvements: Mechanical
3. Owner information:
 - (a) Name and address: Walt Disney World Hospitality & Recreation Corporation - PO Box 10000, Lake Buena Vista, FL 32830-1000.
 - (b) Interest in property: Owner.
 - (c) Name and address of fee simple titleholder (if other than Owner): N/A.
4.
 - (a) Contractor (name and address): Daikin Applied Americas, Inc..
 - (b) Contractor's phone number: 407-816-6350.
5. Surety:
 - (a) Name and address: N/A.
 - (b) Phone Number: N/A.
 - (c) Amount of Bond: \$N/A.
6.
 - (a) Lender (name and address): N/A.
 - (b) Lender's Phone Number: N/A.
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 ~~Orliso~~, WDW Procurement Services Design & Construction, 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 Leslie Mckeeby of Disney Coronado Springs Resort to receive a copy of the **Lienor's Notice** as provided in Section 713.13(1)(b), Florida Statutes.
 - (b) Phone number of person or entity designated by owner: 407-939-3010.
9. Expiration date of **notice** of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): 30 days.

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)

LESLIE K. MCKEEBY / Chief Engineer
Signatory's Printed Name/Title/Office

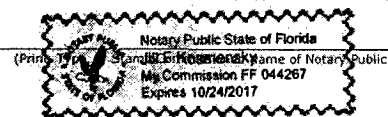
The foregoing instrument was acknowledged before me this 1st day of Sept. 2015, by Leslie Mckeeby, as

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

for

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

(Signature of Notary Public - State of Florida)
Personally Known OR Produced ID
Type of ID Produced: N/A



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

