

Marion County Board of County Commissioners

Growth Services
Planning & Zoning

2710 E. Silver Springs Blvd. Ocala, FL 34470 Phone: 352-438-2675 Fax: 352-438-2676

APPLICATION COMPLETE DATE COMPLETED 482025 INTIALS DM TENTATIVE MEETING DATES 6/30/2025 P&7 PH BCC/P&Z PH 7/1< 47/1/55

APPLICATION FOR REZONING

Application No.: _____

The undersigned hereby requests a zoning change of the Marion County Land Development Code, Article 4,

_____, for the intended use of:

Zoning, on the below described property and area, from R1

to R4

PLACING NEW MOBILE HOMES

Legal description: (please attach a copy of the deed and location map)

Parcel account number(s): 3500-001-046 AND 3500-001-040

Property dimensions: 150X 137 EACH

Directions: Head west on SW Hwy 484/80th Ave Rd toward SW 110th Ave, Turn right onto SW 110th Ave, SW

110th Ave turns left and becomes SW 109th PI, Properties will be on the left at the end of the street.

The property owner must sign this application unless he has attached written authorization naming an agent to act on his/her behalf.

SICUREZZA

Property owner name (please print) PO BOX 2301

Mailing address PALM SPRINGS, CA 92263

City, state, zip code 305-494-8819

Phone number (please include area code)

Randy Barney

Center stove development ELC. DE BROWN agmailer JOE BROWN

Applicant or agent name (please print) 907 SE 17TH STREET, SUITE B

Total acreage: <u>47 EACH</u>

Mailing address OCALA, FL 34480

City, state, zip code 352-274-2908

Phone number (please include area code)

Joe Brown

Signature

Signature

Please note: the zoning change will not become effective until 14 days after a final decision is made by the Marion County Board of County Commissioners. The owner, applicant or agent is encouraged to attend the public hearing where this application will be discussed. If no representative is present and the board requires additional information, the request may be postponed or denied. Notice of said hearing will be mailed to the above-listed address(es). All information given by the applicant or agent must be correct and legible to be processed. The filing fee is \$1,000.00, and is non-refundable. For more information, please contact the Zoning Division at 352-438-2675.

FOR OFFICE USE ONLY DATE: 4/8/2028 AR. 32712 96 ZONING MAP NO .: RECEIVED BY: Rev. 01/11/2021

Empowering Marion for Success

www.marioncountyfl.org



DAVID R. ELLSPERMANN, CLERK OF COURT MARION COUNTY DATE: 03/16/2010 01:07:19 PM FILE #: 2010023569 OR BK 05331 PG 0038

RECORDING FEES 10.00

This Instrument Prepared by:

Joseph J. Lexa, Attorney at Law Post Office Box 403046 Miami Beach, Florida 33140



DEED DOC TAX 0.70



Property Appraiser Parcel Identification (Folio) Number(s): 3500-001-034; 3500-001-040

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed Made and executed the 10th day of March, 2010, by

Sunshine State Land Investment Company, LLC, a Florida limited liability company,

whose address is: c/o P. O. Box 403046, Miami Beach, FL 33140 hereinafter called the grantor, to

Surete, LLC, a Florida limited liability company,

whose address is: 6538 Collins Ave., #389, Miami Beach, FL 33141

hereinafter called the grantee

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00*** and other valuable considerations, receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee, all that certain land situate in Marion County, Florida, viz:

Lots 34, 35, 36, 37, 38 and 39, Block 1, of Rainbow Springs Heights, according to the plat thereof, as recorded in Plat Book F, page 94, in the Public Records of Marion County, Florida. Parcel ID Number: 3500-001-034

Lots 40, 41, 42, 43, 44, and 45, Block 1, of Rainbow Springs Heights, according to the plat thereof, as recorded in Plat Book F, page 94, in the Public Records of Marion County, Florida. Parcel ID Number: 3500-001-040

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes for the current year and all subsequent years; and covenants, conditions, easements, restrictions, reservations and limitations of record, if any.

Signed, sealed and delivered in the presence of:

Signature

Witness Printed Name

Witness #2

In Witness Whereof the grantor duly hereunto set his/her hand and seal the day and year first above written.

Sunshine State Land Investment Company, LLC

J. Lexa, Member-Manager

Witness Printed Name STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I HEREBY CERTIFY that on this 10th day of March, 2010, before me, an officer duly qualified to take acknowledgements, personally appeared, Joseph J. Lexa, Member-Manager of Sunshine State Land Investment Company, LLC, a Florida limited liability company, to be the person(s) described in and who executed the foregoing instrument and who acknowledged before me that they/he/she executed the same.

(SEAL)



Notary Public

Printed Name My commission expires Personally known Produced identification Identification produced

Book5331/Page38 CFN#2010023569

This Instrument Prepared by and return to: (the enclosed self-addressed stamped envelope) Randy Barney P.O. Box 2301 Palm Springs, CA 92263

Attachment A Application Package

GREGORY C HARRELL CLERK & COMPTROLLER MARION CO DATE: 01/19/2023 11:02:50 AM FILE #: 2023006747 OR BK 7964 PGS 967-968 REC FEES: \$18.50 'NDEX FEES: \$0.00 DDS: \$0.70 MDS: \$0 INT: S0

Property Appraiser Parcel Identification (Folio) Number(s): 3500-001-034. 3500-001-040 and 3500-001-046

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Quit Claim Deed Made and executed this <u>17</u> day of <u>December</u>, 2022, by

Surete, LLC, a Florida limited liability company,

who's address is: 130 Vista Monte, Palm Desert, CA 92260 hereinafter called the grantor, to

Sicurezza, LLC, a Florida limited liability company,

whose address is: c/o Randy Barney, Manager, P.O. Box 2301, Palm Springs, CA 92263

hereinafter called the grantee

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth: That the said first party, for and in consideration of the sum of \$10.00 in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece, or parcel of land, situate, lying and being in the County of Marion, State of Florida, viz:

Lots 34.35.36.37.38.39, Block 1, Raindow Springs Heights, as recorded in Plat Book F, page 94, in the Public Records of Marion County, Florida.

Lots 40.41.42.43.44.45, Block 1, Rainbow Springs Heights, as recorded in Plat Book F, page 94, in the Public Records of Marion County, Florida.

Lots 46.47.48.49.50.51, Block 1, Rainbow Springs Heights, as recorded in Plat Book F, page 94, in the Public Records of Marion County, Florida.

To Have and to Hold the same together with all and singular the apputtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity, and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behoove of the said second party forever.

In Witness Whereof, the said first party has signed and sealed these presents the day and year first above written.

red in the presence of: Signed. and deliv aled Witness Signatur Printed Name Witne Monature HOMA Printed Name

)

Randy Barney Manager Surete, LLC

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the comment to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF California

COUNTY OF Riverside)

The foregoing instrument was acknowledged before me this 17 day of December, 2022 by Randy Barney, Manager, Surete LLC, personally appeared, who proved to me on the basis of satisfactory evidence to be the person(s) who name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(its), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESSS my hand and official seal.

(SEAL)

Hached

CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	}	
County of RIVERSIO		
on December 17, 2	2022 before me, ASUL	Here Insert Name and Title of the Officer
Date		
personally appeared	Kandux Darni	uy
	0 Nan	ne(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Signature of Notary Public

Place Notary	/ Seal and/o	r Stamp Above	
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Individual	Attorney in Fact	🗆 Individual	Attorney in Fact
Trustee	Guardian or Conservator	Trustee	Guardian or Conservator
Other:	2	Other:	
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©2019 National Notary Association

M1304-09 (11/20)

FLORIDA DEPARTMENT OF STATE

No. of Concession, Name



Marie	on Col	unty Pr	operty	Apprai	ser	(i		
501 SE 25th	Avenue, Ocala,	FL 34471 Teleph	one: (352) 368-830	00 Fax: (352) 368-8	3336		ASIONO	OUNTY, PLON
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Prime Key: 8	37415		×	MAP IT+		Cur	rent as	of 3/20/202
,			Pro	perty Information				
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C/O RANDY PO BOX 230	BARNEY 1			es / Assessments: Map ID: 96 2 - UNINCORPO	ράτερ			<u>PC: 00</u> Acres: .4
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PALM SPR	INGS CA 92263		<u></u>			11252 SW 109TH	I PL D	UNNELLON
			202	4 Certified Value				
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Total Just Value Total Assessed Value			\$13,338 <u>Ex Code</u> \$13,338					
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