

HERNANDO COUNTY ZONING AMENDMENT PETITION

File No. _____ Official Date Stamp: _____



Application to Change a Zoning Classification

Application request (check one):

- Rezoning Standard PDP
 - Master Plan New Revised
 - PSFOD Communication Tower Other
- PRINT OR TYPE ALL INFORMATION**

Date: _____

APPLICANT NAME: Mavis Tire Supply, LLC

Address: 100 Hillside Avenue
 City: White Plains State: New York Zip: 10603
 Phone: 914-305-0363 Email: rvalverde@mavis.com
Property owner's name: (if not the applicant) Glen Lakes Station II LLC

REPRESENTATIVE/CONTACT NAME: Richard Valverde

Company Name: Mavis Tire Supply, LLC
 Address: 100 Hillside Avenue
 City: White Plains State: New York Zip: 10603
 Phone: 914-305-0363 Email: rvalverde@mavis.com

HOME OWNERS ASSOCIATION: Yes No (if applicable provide name) _____

Contact Name: _____
 Address: _____ City: _____ State: _____ Zip: _____

PROPERTY INFORMATION:

1. PARCEL(S) **KEY** NUMBER(S): 1150266
2. SECTION 13, TOWNSHIP 22, RANGE 17
3. Current zoning classification: Planned Development Project - General Highway Commercial (PDP-GHC); Commeri
4. Desired zoning classification: PDP-GHC; with Specific C-2 Use: Automobile Service Establishments permitted,
5. Size of area covered by application: 1.26 acres
6. Highway and street boundaries: Glen Lakes Blvd and Commercial Way
7. Has a public hearing been held on this property within the past twelve months? Yes No
8. Will expert witness(es) be utilized during the public hearings? Yes No (If yes, identify on an attached list.)
9. Will additional time be required during the public hearing(s) and how much? Yes No (Time needed: _____)

PROPERTY OWNER AFFIDIVAT

I, Glen Lakes Station II LLC, have thoroughly examined the instructions for filing this application and state and affirm that all information submitted within this petition are true and correct to the best of my knowledge and belief and are a matter of public record, and that (check one):

- I am the owner of the property and am making this application **OR**
- I am the owner of the property and am authorizing (applicant): Mavis Tire Supply, LLC
 and (representative, if applicable): Kimley-Horn and Associates, Inc.
 to submit an application for the described property.

See attached page

Signature of Property Owner

STATE OF FLORIDA COUNTY OF HERNANDO

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or produced _____ as identification.

Signature of Notary Public

Effective Date: 11/8/16 Last Revision: 11/8/16

Notary Seal/Stamp

GLEN LAKES STATION II LLC
a Delaware limited liability company

By: Phillips Edison Grocery Center Operating Partnership II, L.P.
a Delaware limited partnership, its sole member

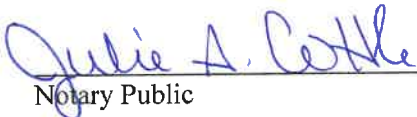
By: Phillips Edison Grocery Center OP GP II LLC,
a Delaware limited liability company, its General Partner

By: 
Name: Joe Schlosser
Title: Executive Vice President

COUNTY OF HAMILTON)
)SS:
STATE OF OHIO)

The foregoing instrument was acknowledged before me on March 17, 2026 by Joe Schlosser, Executive Vice President of Phillips Edison Grocery Center OP GP II LLC, a Delaware limited liability company, the General Partner of Phillips Edison Grocery Center Operating Partnership II, L.P., a Delaware limited partnership, the sole member of GLEN LAKES STATION II LLC, a Delaware limited liability company, on behalf of the companies.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my notarial seal on the date and year above-mentioned.


Notary Public



JULIE A. COTTLE
Notary Public, State of Ohio
My Commission Expires
January 22, 2027
Recorded in Warren County