

ALCOHOL PERMIT

- Public Hearing \$350.00 for new location + \$50.00 Sign Deposit (Refundable after the council hearing and if sign is in the same condition as when posted.)
- Change of ownership/leaseholder \$200.00

1. Name of Applicant(s): Shelijen, LLC	
(Must be identical to applicant name provided on the State of Elicense application made by the applicant pursuant to Florida will automatically void any issued location permit.)	
Address of Applicant(s): 4627 NW Blitchton Roa	ad
City Ocala State FL Zip Code 34482	Phone # 352-867-1347
Fax # Email address legacyin	voices@hdghotels.com
2. Form of Applicant Business: (Check one) • Florida corporation • Foreign corporation • Partnership • LLC Partnership • Sole Proprietorship • Other: • (Specify type and State of organization) 3. Partners: (Names of all partners in partnership and percentage Partner) [Attach additional pages if necessary] Navroz Saju 51%	e financial interest of each
Oak Spring Inc 49%	

4. Corporate Officers: (Names of all cofinancial interest of each shareholder Foreign Corporation or LLC) {Sharel corporations} [Attach additional page	of the outstanding corpolder information not if necessary]	porate stock if a Florida or
5. Name under which business will be c STAY BRIDE SUITES OCKLA		
6. Is there a business there now?	i	
If yes, name of business: Staybr		ala
7. a. Location Address: 4627 NW		
_{City} Ocala		Zip Code 34482
. b. Parcel account number(s) [from tax	D21500 (
c. Section 03 Township 15		Size of Property
d. Legal Description: (Please attach)		
NOTE: It shall be the applicant's responsible to property. The application will no provided.	ot be processed until a	correct legal description is
8. Business mailing address: 125 NI	E First Avenue	Suite#1
City Ocala State FL	Zip Code 344	70 Phone # 352-867-1347
Fax # Er	nail address legacyi	nvoices@hdghotels.com
9. Hours of Operation: 5 PM to 1	: 00am	

Permit No. _____

10. Permit use description: on premises consumption/bar on premises consumption/restaurant on premises consumption/outside enclosed by off premises consumption on and off premises consumption 11. State License Type (specify): '4 COP. SPEC	_
12. Property Owner: Shelijen, LLC	•
Property owner's address: 125 NE First Avenue Suite#1	
City Ocala State FL Zip Code 34470	Phone # 352-867-1347
Fax # Email address navroz.saju@	Phdghotels.com
13. The following items are required to complete this applicate (required for a public hearing in order to issue a location part a. If applicant is not the property owner, attach written con also, if owner's name does not appear on the Marion Co	ermit for profit special events): sent from owner for application;
copy of the deed showing owner's title. b. Business owner's signature notarized; also signature of	
c. The appropriate fee in cash, Visa, MasterCard or check	
d. Must provide to the Planning & Zoning Division a copy Alcoholic beverage license within a period of 90 days of alcohol permit will be automatically voided and of no le	alcohol permit approval or the
 e. A sketch or a drawing will need to be submitted that ref Ingress/Egress to the building The number of parking spaces The building square foot 	lects the:
 f. If on premise consumption: How many stools/seats will be provided in the esta What is the square footage of the building? 99,094 How many employees will you have on maximum How many parking spaces are there? 50 	

Permit No.

ATTENDANCE at the public hearing by the applicant or agent (as designated in writing) IS MANDATORY

hat I understand that my request will not be considered unless all the information required by his application is submitted. I further certify that all statements made in this application are true of the best of my knowledge and that any incorrect information will void the location permit, if ssued. Applicant Business or Agent's Signature (Must be actual applicant if sole proprietorship,
partner if applicant is partnership or corporate Officer if applicant is corporation)
Navroz Saju
Printed Name
125 NE First Avenue Suite#1 Ocala FL 34470
Address City, State, Zip Code
State of Florida County of Marion The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 20, day of August, 2015, by Narrot Sya as Maraging Member for Shelijen, LC Shelijen, LC Gabriela Poincau Print/Type/Stamp Commissioned Name of Notary
Personally Known OR Produced Identification GABRIELA POINEAU MY COMMISSION # HH 564148 Type of Identification Produced EXPIRES: January 13, 2026

Permit	No.	

INFORMATION REGARDING ALCOHOLIC BEVERAGE LOCATION PERMITS

When applying for a permit an applicant may seek more than one type of location permit for the same location, as described in the application form.

A location permit granted by the City may be granted to an individual, group of individuals or any legal entity recognized by the State of Florida, but any such permit granted shall not be transferable to another party or to a location other than that described in the original application.

A public hearing is required to be held by the city council for new location permits. If a location permit was issued after January 1, 2008, the building director may approve the request without the requirement for a public hearing.

The building director may approve or deny a location permit pursuant to Section 6-33(g):

- (1) A bona fide nonprofit civic organization for on-premise consumption for a special event;
- (2) An existing site with a location permit changing ownership;
- (3) An existing site with a location permit changing the type of permit; or
- (4) A former site with a location permit issued after January 1, 2008, seeking a new permit.

Applicants requesting on-premise consumption outside an enclosed building shall submit an application for a public hearing. A site plan must be submitted with the application and shall be reviewed by the building, planning and fire departments. The notice for the public hearing shall conform to the requirements as indicated in Section 3-25, paragraph (c). At the public hearing, the city council shall consider this request as a separate issue and shall be guided by the criteria listed below:

- (1) The size and location of the portion of property to be used for outside consumption;
- (2) Ingress/egress to the outside area;
- (3) The proximity of the outside area to schools, churches, public recreation areas, public buildings and areas of public assembly, taking into consideration noise and light intrusion:
- (4) The proximity of the outside area to established residential areas, taking into consideration noise and light intrusion;
- (5) The proximity of the establishment to other consumption; establishments operating outside
- (6) Hours of operation; and
- (7) Screening and buffering.

Excessive or disturbing noise is a violation of Section 34-171 of the City's Code of Ordinances. The Ocala Police Department may terminate any event which is considered to be in violation of this code. A fine may be imposed for contravention of the noise regulation.

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THE OFFICIAL SITE OF THE FLORIDA DEPARTMENT OF BUSINESS & PROFESSIONAL REGULATION



HOME CONTACT US MY ACCOUNT

ONLINE SERVICES

Apply for a License Verify a Licensee

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File a Complaint

Continuing Education Course Search

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Unlicensed Activity Search

AB&T Delinquent Invoice & Activity List Search

LICENSEE DETAILS

8:33:51 AM 8/21/2025

Licensee Information

Name: SHELITEN LLC (Primary Name)

STAYBRIDGE SUITES OCALA (DBA Name)

Main Address: 125 NE FIRST AVE STE #1

OCALA Florida 34470

County: MARION

License Mailing: 125 NE FIRST AVE STE #1

OCALA FL 34470

County: MARION

License Location: 4627 NW BLITCHTON RD

OCALA FL 34482

County: MARION

License Information

License Type:

Hotel

Rank:

Hotel

License Number:

HOT5202487

Status:

Current.Active

Licensure Date:

08/20/2025

Expires:

06/01/2026

Special Qualifications

Qualification Effective

Marion JUN

08/20/2025

101-200 UNITS

08/20/2025

Alternate Names

View Related License Information

View License Complaint

View Recent Inspections

GEORGE ALBRIGHT

NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS

REAL ESTATE 4003380.0000 TAXABLE VALUE MILL CD. *

MARION COUNTY TAX COLLECTOR ORIGINAL ACCOUNT NUMBER EX-TYPE ESCROW 1,328,580 * * SEE BELOW 1005 NONE 2024

SHELIJEN LLC 125 NE FIRST AVE STE 1 OCALA FL 34470-6675

R21509-001-02

SEC 03 TWP 15 RGE 21 PLAT BOOK 014 PAGE 197 FOXWOOD III LOT 2



R100002632

6.1000 Acres:

				BLITCHTON RD	OCALA	
TAXES BEC	OME DELINQUENT APRIL 1st	AD VALOREM TAX	ŒS			*
	UTHORITY	MILLAGE	ASSESS			: TAXES LEVIED
COUNTY	GENERAL COUNTY	3.3500	584,575	0	584,575	1,958.33
5001122	FINE & FORFEITURE	.8300	584,575		584,575	485.20
	COUNTY HEALTH	.1100	584,575		584,575	64.30
CHOOL	SCHOOL R.L.E.	3.0750	1,328,580		1,328,580	4,085.38
	SCHOOL VOTE	1.0000	1,328,580		1,328,580	1,328.58 993.78
	SCHOOL DISCRETIONARY	.7480	1,328,580		1,328,580	
	SCHOOL CAPITAL IMPR	1.5000	1,328,580		1,328,580	1,992.87 111.60
Water	SWF WATER MANAGEMENT DIST	.1909	584,579	7)	584,575 584,575	3,868.54
MUNIC	OCALA BASIC	6.6177	584,575		304,373	3,000.34
exemption	: NONE	COUNTY	ASSESSED:	584,575	SCHOOL ASSESSED:	: 1,328,580
	TOTAL MILLAGE	17.4216 ION-AD VALOREM ASSI	ESSMENTS	VALOREM TAXES		14,888.58
•	LEVYING AUTHORITY	PURPO	SE	RATE/BAS		AMOUNT
X905	OCALA FIRE	VACANT	N	PER ASMT ON AD VALOREM		55.69 55.69
(See Boyes	Below for Payment DISCOUNT If Paid Bv	COMBINED TAXES AND A	ASSESSMENT	S Due By March		14,944.27
(See Boxes I	Below for Payment DISCOUNT If Paid By 2024 DEC 31 2024	COMBINED TAXES AND A JAN 31 2025 F	ASSESSMENT EB 28 202	S Due By March	1 2025 Past	14,944.27 tDue Apr 1 ,392.60

SEE REVERSE SIDE FOR INSTRUCTIONS PLEASE DETACH AND RETURN BOTTOM PORTION WITH YOUR PAYMENT

GEORGE ALBRIGHT MARION COUNTY TAX COLLECTOR NOTICE OF AD VALOREM TAXES AND NON-AD VALOREM ASSESSMENTS 4003380.0000 REAL ESTATE

				_	- 1		
ORIGINAL	R100002632		TOTAL TAXE	S IF PAID B			
NOV 30 2024 14,346.50	DEC 31 2024 14,495.94	JAN 31 14,645	2025 .38	FEB 28		MAR 31 2025 14,944.27	PastDue Apr 1 15,392.60
	NUMBER	EX TYPE	ESCROW	MILL CD			BRIGHT, TAX COLLECTOR
R21509-001-02	2024			1005	PO BOX	970 OCALA FL 34478 F	PHONE (352) 368-8200
MARKET V	/ALU 1,328,580	TAXES	14	,888.58			

584,575 SP. ASMT 584,575 1,328,580 1,328,580 COUNTY ASMT COUNTY TXBL SCHOOL ASMT SCHOOL TXBL

15 21

SEC 03 TWP 15 RGE 21 PLAT BOOK 014 PAGE 197 FOXWOOD III LOT 2

R21509-001-02 2024 SHELIJEN LLC 125 NE FIRST AVE STE 1 OCALA FL 34470-6675 |||Ալիվորդիվոլիա||թությունակիրիակոլիակություն||

PLEASE READ INSTRUCTIONS AND IMPORTANT INFORMATION

This notice covers taxes for the calendar year January 1 through December 31 of the year indicated on the reverse side.

Please verify the legal description of the property. If any errors in the description are found, immediately notify the Marion County Property Appraiser at (352) 368-8300.

• If this notice is for property which you have sold, please forward this notice to the new owner(s) or return it to the Tax Collector's Office immediately. If you have sold a portion of this property, please call our office at (352) 368-8200 to request a revised notice.

Schedule of Discounts

4% in November

3% in December 2% in January

1% in February

- Discounts for early payment have been computed for you on the front side of this notice. <u>Please pay only one amount</u>. If paying by mail, the amount due is determined by <u>POSTMARK</u> date through March 31 each year. Please retain the top portion of this notice for your records. Your taxes are not paid until your payment clears the bank. Post dated checks are not accepted.
- On or after April 1, the amount due is determined by the date your payment is <u>RECEIVED</u> by the Tax Collector's Office, not the postmark date. On or after May 1, personal or business checks are not accepted. Payment must be in Certified U.S. Funds only.
- Taxes and Assessments are due November 1 and become delinquent the following April 1. Once delinquent, the law imposes 3% interest plus advertising costs on all unpaid Real Estate taxes. Tax Certificates will be sold on all unpaid Real Estate parcel accounts on or before June 1, resulting in additional charges. All unpaid Tangible Personal Property taxes will accrue interest at 1½% per month, plus advertising costs and fees. Tax Warrants will be issued on unpaid Tangible Personal Property parcel accounts, which could result in the seizure and sale of your Tangible Personal Property.
- If you received a notice with "DO NOT PAY" printed across the bottom, this is a duplicate notice. A mortgage company has requested your original notice. If your taxes are not escrowed through a mortgage company you may submit payment with the "DO NOT PAY" notice. If your taxes are escrowed and you received the original notice, contact your mortgage company immediately to request they submit payment timely.

	RESPONSIBILITIES
Tax Collector:	Responsible for the preparation and mailing of tax notices, and the collection and distribution of taxes based on information certified by the Marion County Property Appraiser and non-ad valorem assessments provided by the Levying Authorities. For further information call (352) 368-8200 or visit our website at www.mariontax.com.
Property Appraiser:	Responsible for the preparation and certification of the current ad valorem tax roll to the Tax Collector. They are also responsible for assessed values, all exemptions, taxable values, assessed owner(s) name and address, address changes and the legal property description. For further information call (352) 368-8300 or visit their website at www.pa.marion.fl.us.
Property Owner:	Responsible for knowing that taxes are due and payable annually and are responsible for ascertaining the amount of current and delinquent taxes and paying them before April 1 of the year following the year in which they are assessed. (F.S. 197.122) You should have received a separate tax notice for each property you own. If you have not received one, contact the Tax Collector's Office immediately. You may also obtain parcel account and payment information from our website at www.mariontax.com.
Taxing Authorities:	Responsible for setting ad valorem millage rates.
Levying Authorities:	Responsible for setting non-ad valorem assessments.

For official purpose only, do not write below perforation.