## PETITION FOR THE ANNEXATION OF CERTAIN PRESCRIBED PROPERTY TO COMMUNITY FACILITIES DISTRICT NO. 94-01 (HESPERIA)

## TO THE BOARD OF DIRECTORS OF THE SAN BERNARDINO COUNTY FIRE PROTECTION DISTRICT:

Pursuant to Section 53339.2 of the California Government Code, the undersigned, as the authorized representative of		
5555	55 Amargosa, LLC	the "Owner"), hereby represents and petitions as follows:
1.	The Owner is the sole owner of the real property Number(s) 0405-062-51-0000	(the "Subject Property") identified as Assessor's Parcel
	which real property is situated within the San Berna	ardino County Fire Protection District.
2.	2. The Owner hereby petitions this Board of Directors (this "Board") to (a) initiate and conduct legal proceed	
	pursuant to the provisions of the Mello-Roos Comr	nunity Facilities Act of 1982, (Section 53311 et seq. of the
	California Government Code) (the "Act"), for the ani	nexation of the Subject Property to the existing Community
	Facilities District No. 94-01 (Hesperia) ("CFD No. 94	-01") and (b) conduct a landowner election in accordance
	with the Act to obtain authorization to annex the Su	bject Property to CFD 94-01 and thereby authorize to levy

the previously-established special tax for fire suppression services of CFD 94-01 on the Subject Property.

tikosie - CFO/owner

Respectfully Submitted,

By: // Signature

Printed Name and Title

Date

Standard California Notary Acknowledgment Form Attached

## CALIFORNIA ALL PURPOSE ACKNOWLEDGMENT

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 }			
On 05/03/2023 before me, A Hacgendorcens Notary Public, personally appeared Nadia Paola PletiKogic			
Name(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.  A. HAEGENDOREENS COMM. #2342019 Notary Public - California Los Angeles County My Comm. Expires Jan. 18, 2025  OPTIONAL			
Though this section is optional, completing this information can deter alteration of the document or fraudulent attachment of this form to an unintended document.			
Description of Attached Document  Title or Type of Document:     Document Date: 05/03/2023			
Capacity(ies) Claimed by Signer(s)  Signers Name: \( \lambda \) \( \lamb			