



SEMINOLE COUNTY CODE ENFORCEMENT BOARD
/SPECIAL MAGISTRATE CASE NO. 19-112-CEB
19-113-CEB

REQUEST FOR REDUCTION/WAIVER OF LIEN

BY COMPLETING THIS FORM, YOU ARE MAKING STATEMENTS UNDER OATH
THE PROPERTY MUST BE IN COMPLIANCE FOR CONSIDERATION

INSTRUCTIONS: Please fill out both pages of this form completely. Be specific when writing your statement. If you are claiming medical or financial hardship, attach supporting documentation (i.e., a doctor's statement or proof of income). Please return this form to the Clerk to the Code Enforcement Board, along with a check made payable to the "BCC", for the **non-refundable \$500.00 application fee.** ✓

The *Request for Reduction/Waiver of Lien* will then be sent to the Deputy County Manager for review to verify that all criteria under Section 3.20 (B)(2), Seminole County Administrative Code are met. Once it has been verified that your case meets all the criteria, it will be scheduled for presentation to the Board of County Commissioners at their next regularly-scheduled hearing or as soon thereafter as possible (this process can take 6 – 8 weeks). You will receive a letter advising of the date and time of the meeting; you should plan to attend.

If the *Request for Reduction/Waiver of Lien* **fails** any of the criteria listed under Section 3.20(B)(2) of the Seminole County Administrative Code the Deputy County Manager must deny the request. An applicant may appeal the Deputy County Manager's decision to the Board pursuant to Section 3.20(B)(3) of the Seminole County Administrative Code for a **non-refundable appeal fee of \$200.00.** An applicant may appeal the Deputy County Manager's Decision by filing a written appeal with the Deputy County Manager stating why the Board should make an exception to its established guidelines and reduce or waive the lien. Upon receipt of a proper appeal, the Deputy County Manager shall present the information to the Board of County Commissioners at a regular meeting for their consideration and final determination. Commissioners. The appeal will be scheduled for presentation to the Board of County Commissioners at their next regularly-scheduled hearing or as soon thereafter as possible (this process can take 6 – 8 weeks). You will receive a letter advising of the date and time of the meeting; you should plan to attend.

You will be notified in writing of the Board's decision within 10 days after the hearing. If you have any questions, please call the Clerk at (407) 665-7403.

Applicant Information:

Property Owner's Name: OCALA LLC.

Property Address: 1208 HELEN ST. APOPKA, FL 32703

Daytime Phone Number: 305-219-5024

Case Information:

Is the property now in compliance? YES ☒ NO ☐

(If No, explain in detail): _____

Lien Reduction Request:

Are you requesting a reduction to the lien? YES ☒ NO ☐
If yes, the amount you would like it reduced to: \$2,500 OR COSTS CITY INCURRED

Are you claiming a financial hardship? YES ☐ NO ☒
If yes, please attach supporting documentation.

Are you claiming a medical hardship? YES ☐ NO ☒
If yes, please attach supporting documentation.

Appeal of Deputy County Manager Denial of Lien Request YES ☐ NO ☒
If yes, please provide written appeal.

If the property owner is unable to complete this form, list the name of the person who is legally authorized to act for the property owner and his/her relationship to the property owner:

Name: RAMAKANTH GANGUPANTHULU OR RUBEN LEON

Relationship: FRIEND

RETURN COMPLETED, SIGNED AND NOTARIZED FORM TO:
CLERK, SEMINOLE COUNTY CODE ENFORCEMENT
1101 EAST FIRST STREET, SANFORD, FLORIDA 32771-1468

I, STEFANO MEIJINHOS, do hereby submit this form to request a reduction/waiver to the total amount of the lien imposed, and in support offer the following statement (attach additional pages if necessary):

PLEASE SEE ATTACHED LETTER

Date: 6/25/25

Signed: [Signature]

Print Name: STEFANO MEIJINHOS

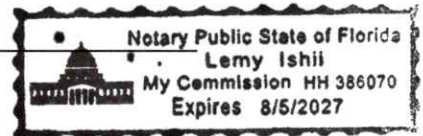
STATE OF FL
COUNTY OF ORANGE

PERSONALLY appeared before me, the undersigned authority duly authorized to administer oaths and take acknowledgments, STEFANO MEIJINHOS, who after first being duly sworn, acknowledged before me that the information contained herein is true and correct. He/she is not personally known to me and has produced M252-782-87-954-0 as identification and did take an oath.

Date: 06/26/25

[Signature]
Notary Public

My commission expires: _____



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CLERK, SEMINOLE COUNTY CODE ENFORCEMENT
1101 EAST FIRST STREET, SANFORD, FLORIDA 32771-1468

Request for Lien Reduction – 1208 Helen St. Apopka, FL 32703

Dear County Commissioners,

I am writing to respectfully request a reduction in the code enforcement lien and violation costs associated with the property located at 1208 Helen St. Apopka, FL.

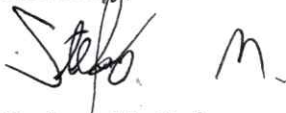
When I acquired this property, it was in extremely poor and hazardous condition. The structure appeared abandoned for an extended period, overrun with overgrown vegetation, infested by rodents, and contained dead animals inside. These conditions posed serious health and safety concerns not only to the structure itself but also to the surrounding neighborhood.

- Despite the severe challenges, I decided to invest in this property with the clear intent to clean, secure, and rehabilitate it—not only to restore its value but also to eliminate its negative impact on the community. Since taking ownership, I have:
 - Cleared all overgrown vegetation
 - Fully remediated the property interior and removed all animal waste
 - Secured and repaired the structure to ensure public safety and prevented further code violations and complaints from neighbors
- I am committed to continuing the rehabilitation process and ensuring this property becomes an asset to the community, rather than a burden.

Given the circumstances and the substantial cleanup and repair costs I have personally undertaken, I kindly request your consideration for a substantial reduction in the lien and accrued penalties. I am not seeking to avoid responsibility, but rather to bring the property into compliance in a fair and sustainable manner.

- Thank you in advance for your time and consideration. I am happy to provide supporting documentation and meet with the appropriate parties to further discuss this request if needed.

Sincerely,



Stefano Meijinhos

Ocala LLC.

Ph: 305-219-5024

**SEMINOLE COUNTY
REQUEST FOR REDUCTION/WAIVER OF LIEN
OWNER AUTHORIZATION FORM**

An authorized applicant is defined as:

- The property owner of record; or
- An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or
- Contract purchaser (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed).

I, STEFANO MEIJINHOS ^{ON BEHALF OF} O'CALA LLC., the owner of record for the following described property [Parcel ID Number(s)] 17-21-29-512-0000-0540

_____ hereby designate RAMAKANTH GANGUPANTHULU AND/OR RUBEN LEON to act as my authorized agent for the filing of the attached application for Request for Reduction/Waiver of Lien and make binding statements and commitments regarding the request(s). I certify that I have examined the attached application(s) and that all statements and documents submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments, and fees become part of the Official Records of Seminole County, Florida and are not returnable.

Date

7/31/25

Property Owner's Signature

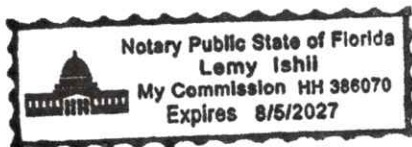
Stefano M.

Property Owner's Printed Name

STEFANO MEIJINHOS

STATE OF FLORIDA
COUNTY OF ORANGE

SWORN TO AND SUBSCRIBED before me, an officer duly authorized in the State of Florida to take acknowledgements, appeared STEFANO MEIJINHOS (property owner), ☒ by means of physical presence or ☐ online notarization; and who is personally known to me or who has produced _____ as identification, and who executed the foregoing instrument and sworn an oath on this 31ST day of JULY, 2025.



Notary Public

[Signature]

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Sincerely,



Stefano Meijinhos

Ocala LLC.

Ph: 305-219-5024



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company
OCALA LLC

Filing Information

Document Number	L17000172736
FEI/EIN Number	37-1906325
Date Filed	08/14/2017
Effective Date	08/14/2017
State	FL
Status	ACTIVE

Principal Address

6158 Juneberry Way
Winter Garden, FL 34787

Changed: 06/10/2021

Mailing Address

6158 Juneberry Way
Winter Garden, FL 34787

Changed: 07/21/2021

Registered Agent Name & Address

MEIJINHOS, STEFANO B
6158 Juneberry Way
Winter Garden, FL 34787

Address Changed: 01/24/2022

Authorized Person(s) Detail

Name & Address

Title MGR

MEIJINHOS, STEFANO B
6158 Juneberry Way
Winter Garden, FL 34787

Annual Reports

Report Year	Filed Date
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2023	01/24/2023
2024	01/30/2024
2025	01/29/2025

Document Images

01/29/2025 -- ANNUAL REPORT	View image in PDF format
01/30/2024 -- ANNUAL REPORT	View image in PDF format
01/24/2023 -- ANNUAL REPORT	View image in PDF format
01/24/2022 -- ANNUAL REPORT	View image in PDF format
01/11/2021 -- ANNUAL REPORT	View image in PDF format
01/14/2020 -- ANNUAL REPORT	View image in PDF format
01/15/2019 -- ANNUAL REPORT	View image in PDF format
05/01/2018 -- ANNUAL REPORT	View image in PDF format
08/14/2017 -- Florida Limited Liability	View image in PDF format