

MORRIS

DEPEW

ENGINEERS · PLANNERS · SURVEYORS
LANDSCAPE ARCHITECTS

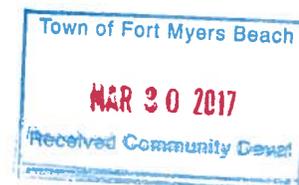
2891 Center Pointe Drive Unit 100 | Fort Myers, Florida 33916

Phone (239) 337-3993 | Toll Free (866) 337-7341

www.morris-depew.com

March 29, 2017

Ms. Kara Stewart
Community Development Director
Town of Fort Myers Beach
2525 Estero Boulevard
Fort Myers Beach, FL



RE: TPI-FMB Commercial Planned Development – Items to Coordinate

Dear Ms. Stewart,

Please accept the attached Commercial Planned Development Application on behalf of TPI-FMB. As discussed during our March 17, 2017 meeting, the proposed redevelopment of the property owned by TPI-FMB at the base of the Matanzas Bridge has been revised to exclude the property owned by Lee County and commonly referenced as "Seafarer's Plaza." In addition, we have provided 3 hard copies of the application as requested and will provide the additional 12 required copies at the time the case is scheduled for public hearing.

During the development of the site plan and accompanying application materials, the project team identified a number of items that we look forward to discussing and coordinating with you during the review process. We believe that our application strikes an appropriate balance between the identified items and the elements of the Town's Land Development Code and we look forward to addressing these items with you in detail.

1. **Property Development Regulations**– the requested zoning district is Commercial Planned Development to enable the applicant to request flexibility related to the design of the proposed hotel, restaurant and outdoor commercial recreation facility. Per Lan Development Code Section 34-953 "Building placement, size, design, and all other property development regulations in a CPD zoning shall be the same as for the CR zoning district for CPDs that are primarily lodging..." The property development regulations for the CR zoning district are outlined in Table 34-3 and promote traditional setbacks. However, the property owned by TPI-FMB is located within an area of the Town designated as the Downtown. Building placement in the Downtown District is designated by Build-to-lines and Building frontage. To consistent with the adjacent properties, some of which have already been redeveloped, the applicant has designed the proposed hotel, restaurant, and outdoor commercial recreation facility to be consistent with the Downtown Zoning District Regulations.

2. **Building Placement** – Consistent with the Downtown Zoning District Regulations, the proposed Commercial Planned Development, has identified the property's frontage on Estero Boulevard as the primary frontage. LDC Section 34-674(a)(1) Build-to-lines is silent as to the build to line that is provided on the North side of Estero Boulevard. However, it clearly contemplates that in vicinity of the subject property and on the South side of Estero, the build-to line is to be 0 to 5 feet. Unfortunately, adjacent to Estero Boulevard on the Bay Side property is an existing sidewalk easement. The proposed development seeks to set the building back in a location that is out of the sidewalk easement and continues to provide the 5 feet for Building Edge Plantings as required by LDC Section 10-415(b)(3) to continue to ensure an appealing view from the street level.
3. **Parking Location** - The proposed development provides parking under the proposed Hotel Building on the Bay Side properties. LDC Section 34-676 (b) requires that off-street parking be placed in rear yards. The proposed development has chosen to provide all of the required parking under the building, due to the fact that the V zone located on the subject property would prohibit usable commercial space on the ground level. It would seem this would be an appropriate place for the parking supporting the proposed development due to prohibit of commercial space at ground level.
4. **Buffering of Parking** – The parking proposed under the Hotel Building and Hotel Amenities which are adjacent to public rights-of-way. LDC Section 34-677(b)(3) requires that buffers be provided between off street parking and any public street in accordance with Chapter 10. LDC Section 10-416(d)(1)d. Establishes the abbreviation PRKG as vehicle use area for the commercial use categories. LDC Section 10-416(d)(2) establishes the PRK (aka vehicle use area) adjacent to a roadway provide a Type D buffer which is 15 feet wide. The proposed development cannot meet the requirements of the Downtown Zoning District Build-to-line, provide parking under the building and accommodate at 15' buffer. To remedy this situation, the applicant has chosen to prioritize the build-to-lines in the Downtown zoning district and screen the ground level parking with lattice and vegetation to continue to provide and appealing view from the street level.
5. **Number of Parking Spaces** – the proposed development co-locates the parking for all of the proposed uses under the Hotel Building and Hotel Amenities. LDC Section 34-2020(d)(2) establishes minimum parking requirements for Hotel and Restaurant uses and LDC Section 34-676(a)(4) provides a parking multiplier for the property's location in the Downtown zoning district. However, the LDC Section related to minimum parking standards is silent as to the number of spaces required for outdoor commercial recreation uses. This use is considered ancillary to the proposed Hotel as guests will utilize it as an amenity and the proposed development does include additional parking spaces to address the additional demand that may occur.

TPI-FMB and its project team believe that a comprehensive application package has been provided and looks forward to discussing these items with you. Should you have additional

Ms. Kara Stewart

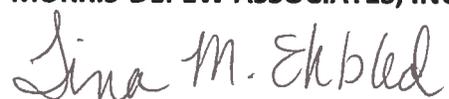
March 29, 2017

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questions about the application package or desire additional information to be submitted, please do not hesitate to contact me at tekabl@m-da.com or 239-337-3993.

Sincerely,

MORRIS-DEPEW ASSOCIATES, INC.

A handwritten signature in cursive script that reads "Tina M. Ekblad".

Tina M. Ekblad, MPA, AICP, LEED AP
Partner – Planning Director

Cc: Mr. Tom Torgerson
Amanda Brock
Russell Schropp



Town of Fort Myers Beach

COMMUNITY DEVELOPMENT DEPARTMENT

APPLICATION for PUBLIC HEARING

This is a two part application. Please be sure to fill out this form, which requires general information, as well as the Supplemental Form application specific to action requested for the subject property. Please submit *one ORIGINAL paper copy, eleven (11) copies and one digital/electronic copy* of all required applications, supplemental information, exhibits and documents. Please do not print and copy the instructions at the end of the application.

PROJECT NUMBER: DCI17-0001 DATE: 3-30-17

Site Address: See Attached

STRAP Number: See Attached

Applicant: Morris Depew Associates, Inc. Phone: 239-337-3993

Contact Name: Tina M. Ekblad Phone: 239-337-3993

Email: TEkblad@m-da.com Fax: 239-337-3994

Current Zoning District: See Attached

Future Land Use Map (FLUM) Category: See Attached

FLUM Density Range: N/A Platted Overlay: YES NO

ACTION REQUESTED

SUPPLEMENTAL FORM REQUIRED

- | | |
|---|--------------------------|
| <input type="checkbox"/> Special Exception | PH-A |
| <input type="checkbox"/> Variance | PH-B |
| <input type="checkbox"/> Conventional Rezoning | PH-C |
| <input checked="" type="checkbox"/> Planned Development <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential | PH-D |
| <input type="checkbox"/> Master Concept Plan Extension | PH-E |
| <input type="checkbox"/> Appeal of Administrative Action | PH-F |
| <input type="checkbox"/> Vacation of Platted Right-of-way and Easement | PH-G |
| <input type="checkbox"/> Other – cite LDC Section: _____ | attach on separate sheet |

PART I - General Information

A. Applicant*: Morris-Depew Associates, Inc. Phone: 239-337-3993

**Applicant must submit a statement under oath that he/she is the authorized representative of the property owner. Please see PART III to complete the appropriate Affidavit form for the type of applicant.*

Applicant Mailing Address: 2891 Center Point Dr., Unit 100, Fort Myers, FL 33916

Email: TEkblad@m-da.com Fax: 239-337-3994

Contact Name: Tina M. Ekblad Phone: 239-337-3994

B. Relationship of Applicant to subject property:

- | | | |
|--|---|--|
| <input type="checkbox"/> Owner* | <input type="checkbox"/> Land Trust* | <input type="checkbox"/> Partnership* |
| <input type="checkbox"/> Corporation* | <input type="checkbox"/> Association* | <input type="checkbox"/> Condominium* |
| <input type="checkbox"/> Subdivision* | <input type="checkbox"/> Timeshare Condo* | <input type="checkbox"/> Contract Purchaser* |
| <input checked="" type="checkbox"/> Authorized Representative* | <input type="checkbox"/> Other* (please indicate) _____ | |

**Applicant must submit a statement under oath that he/she is the authorized representative of the property owner. Please see PART III to complete the appropriate Affidavit form for the type of applicant.*

C. Authorized Agent(s). Please list the name of Agent authorized to receive correspondence Agents

Name: Tina M. Ekblad Phone: 239-337-3993

Address: 2981 Center Point Dr., Unit 100, Fort Myers, FL 33916

Email: TEkblad@m-da.com Fax: 239-337-3994

D. Other Agent(s). Please list the names of all Authorized Agents (attach extra sheets if necessary)

Name: Amanda Brock Phone: 239-334-1269

Address: 1715 Monroe St., Fort Myers, FL 33902

Email: Amanda.Brock@HenLaw.com Fax: _____

Name: John D. Hafner Phone: 320-235-7775

Address: 103 15th Ave. NW, Suite 300, Willmar, MN 56201

Email: JHafner@CitiesEdgeArchitects.com Fax: _____

Name: Steve Leung Phone: 239-332-2617

Address: 2149 McGregor Blvd., Fort Myers, FL 33901

Email: Stephen.Leung@DPlummer.com Fax: _____

PART II - Nature of Request

Requested Action (each request requires a separate application)

- Special Exception
- Variance from LDC Section _____ - _____
- Conventional Rezoning from _____ to _____
- Planned Development
 - Rezoning from CPD & Downtown to Commercial PD Residential PD
 - Amendment. List the project number: _____
 - Extension/reinstatement of Master Concept Plan. List project number: _____
- Appeal of Administrative Action
- Vacation Right-of-Way Easement
- Other. Please Explain: _____

PART III - Waivers

Please indicate any specific submittal items that have been waived by the Director for the request. Attach a copy of the signed approval as Exhibit 3-1. (Use additional sheets if necessary)

- Code Section: N/A Description: _____
- Code Section: _____ Description: _____
- Code Section: _____ Description: _____

PART IV - Property Ownership

- Single Owner (individual or husband and wife)
 - Name: _____ Phone: _____
 - Mailing Address: _____
 - Email: _____ Fax: _____

Multiple Owners (including corporation, partnership, trust, association, condominium, timeshare, or subdivision)

Complete Disclosure of Interest Form (see below)

Attach list of property owners as Exhibit 4-1

Attach map showing property owners interests as Exhibit 4-2 (for multiple parcels)

For condominiums and timeshares see Explanatory Notes Part IV (Page 11)

DISCLOSURE OF OWNERSHIP INTEREST

STRAP: _____

If the property is owned in fee simple by an INDIVIDUAL, tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest.

Name and Address

Percentage Ownership

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is owned by a CORPORATION, list the officers and stockholders and the percentage of stock owned by each.

Name, Address and Office

Percentage of Stock

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a TRUSTEE, list the beneficiaries of the trust with percentage of interest.

| Name and Address | Percentage of Interest |
|------------------|------------------------|
| N/A | |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a GENERAL PARTNERSHIP OR LIMITED PARTNERSHIP, list the names of the general and limited partners.

| Name and Address | Percentage of Ownership |
|------------------|-------------------------|
| N/A | |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If there is a CONTRACT FOR PURCHASE, whether contingent on this application or not, and whether a Corporation, Trustee, or Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners.

| Name, Address and Office | Percentage of Stock |
|--------------------------|---------------------|
| N/A | |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Date of Contract: _____

If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust.

| Name | Address |
|------|---------|
| N/A | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

For any changes of ownership or changes in contracts for purchase subsequent to the date of the application, but prior to the date of final certificate of compliance, a supplemental disclosure of interest must be filed.

The above is a full disclosure of all parties of interest in this application, to the best of my knowledge and belief.

Signature

Printed Name

STATE OF FLORIDA)
COUNTY OF LEE)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on _____ (date) by _____ (name of person providing oath or affirmation), who is personally known to me or who has produced _____ (type of identification) as identification.

(SEAL)

Signature

Printed Name

PART V - Property Information

A. Legal Description:

STRAP: See Attached

Property Address: _____

Is the subject property within a platted subdivision recorded in the official Plat Books of Lee County? No. Attach a legible copy of the legal description as Exhibit 5-1.

Yes. Property identified in subdivision: _____

Book: _____ Page: _____ Unit: _____ Block: _____ Lot(s): _____

B. Boundary Survey:

Attach a Boundary Survey of the property meeting the minimum standards of Chapter 61G17-6 of the Florida Administrative Code. A Boundary Survey must bear the raised seal and original signature of a Professional Surveyor and Mapper licensed to practice Surveying and Mapping by the State of Florida. Attach and label as Exhibit 5-2.

C. Property Dimensions:

Width (please provide an average width if irregular in shape) Bayside 451/Gulfside 473 feet

Depth (please provide an average width if irregular in shape) Bayside 535/Gulfside 306 feet

Frontage on street: Bayside 387/Gulfside 464 feet. Frontage on waterbody: Gulfside 473 feet

Total land area: 6.4 acres square feet

D. General Location of Subject Property (from Sky Bridge or Big Carlos Pass Bridge):

At base of Sky Bridge to the Gulf of Mexico.

Attach Area Location Map as Exhibit 5-3

E. Property Restrictions (check applicable):

There are no deed restrictions and/or covenants on the subject property.

A list of deed restrictions and/or covenants affecting the subject property is attached as Exhibit 5-4.

A narrative statement detailing how the restrictions/covenants may or may not affect the request is attached as Exhibit 5-5.

F. Surrounding Property Owners (these items can be obtained from the Lee County Property Appraiser):

- Attach a list of surrounding property owners within 500 feet as Exhibit 5-6.
- Attach a map showing the surrounding property owners as Exhibit 5-7.
- Provide Staff with two (2) sets of surrounding property owner mailing labels.

G. Future Land Use Category (see Future Land Use Map):

- | | |
|---|--|
| <input type="checkbox"/> Low Density | <input type="checkbox"/> Marina |
| <input type="checkbox"/> Mixed Residential | <input checked="" type="checkbox"/> Recreation |
| <input type="checkbox"/> Boulevard | <input type="checkbox"/> Wetlands |
| <input checked="" type="checkbox"/> Pedestrian Commercial | <input type="checkbox"/> Platted Overlay |

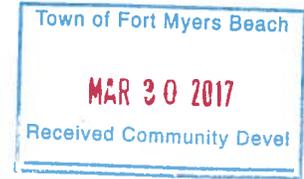
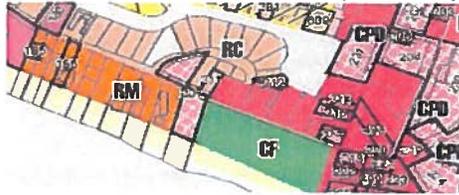
H. Zoning (see official Zoning Map):

- | | |
|--|--|
| <input type="checkbox"/> RS (Residential Single-family) | <input type="checkbox"/> CF (Community Facilities) |
| <input type="checkbox"/> RC (Residential Conservation) | <input type="checkbox"/> IN (Institutional) |
| <input type="checkbox"/> RM (Residential Multifamily) | <input type="checkbox"/> BB (Bay Beach) |
| <input type="checkbox"/> RPD (Residential Planned Development) | <input type="checkbox"/> EC (Environmentally Critical) |
| <input type="checkbox"/> CM (Commercial Marine) | <input checked="" type="checkbox"/> DOWNTOWN |
| <input type="checkbox"/> CO (Commercial Office) | <input type="checkbox"/> SANTOS |
| <input type="checkbox"/> CB (Commercial Boulevard) | <input type="checkbox"/> VILLAGE |
| <input type="checkbox"/> CR (Commercial Resort) | <input type="checkbox"/> SANTINI |
| <input checked="" type="checkbox"/> CPD (Commercial Planned Development) | |
- See Attached for details on each parcel

Case # DCI 17-0001
Planner _____

Date Received 3-30-17
Date of Sufficiency/Completeness _____

**Town of Fort Myers Beach
Department of Community Development**



Zoning Division

Supplement PH-D Additional

**Required Information for a
Planned Development Application**

This is the second part of a two-part application. This part requests specific information for a planned development rezoning or an amendment to an approved planned development. Include this form with the Request for Public Hearing form.

| |
|---|
| Project Name: TPI-FMB |
| Authorized Applicant: Tina M. Ekblad |
| LeePA STRAP Number(s): See Attached |
| |

| |
|--|
| Current Property Status: |
| Current Zoning: CPD, Downtown and Environmentally Critical |
| Future Land Use Map (FLUM) Category: Pedestrian Commercial and Recreation |
| Platted Overlay? ___ Yes <u>X</u> No FLUM Density Range: N/A |

| |
|---|
| Requested Action: |
| <input type="checkbox"/> DRI (with rezoning) |
| <input checked="" type="checkbox"/> Planned Development (also check below) |
| <input checked="" type="checkbox"/> Rezoning from: CPD, Downtown & Environmentally Critical to: CPD |
| <input type="checkbox"/> Amendment to Master Concept Plan/attendant documentation |

Case # _____
Planner _____

Date Received _____
Date of Sufficiency/Completeness _____

C. Comprehensive Plan Compliance.

Explain how the proposed development complies with applicable Goals, Objectives, and Policies of the Fort Myers Beach Comprehensive Plan.

Please See Attached Comprehensive Plan Compliance

D. Design Standards Compliance

For projects required to meet Commercial Design Standards, explain how the proposed development complies with the design standards set forth in LDC Sections 34-991 through 34-997.

Please See Attached Design Standards Compliance Narrative

E. Decision-making Compliance

Explain how the proposed development complies with the guidelines for decision-making embodied in LDC Section 34-85.

Please See Attached Decision-making Compliance Narrative

F. Schedule of deviations and written justification

Please See Attached Schedule of Deviations & Justifications Narrative

G. Administrative amendments to approved Master Concept Plan

N/A

| TOWN OF FORT MYERS BEACH FY15-16 FEE SCHEDULE | | AMENDMENT#2 12/17/15 |
|--|--|----------------------|
| DCI / Planned Development (PD) | | |
| PD Base Fee (up to one acre) | | \$8,000.00 |
| Per Additional acre | | \$1,000.00 |
| PD Administrative Amendment | | \$1,500.00 |
| PD Amendment (Public Hearing) | | \$6,500.00 |
| PD Amendment Minor (<1 acre total property area, Public Hearing) MCP Extension | | \$2,000.00 |
| PD Reinstatement | | \$4,000.00 |
| Deviations (residential) | | \$1000 up to 5 |
| Deviations (non-residential) | | 6+ \$150 each |

| | | |
|------------------|--|----------|
| Option #1 | | |
| 5.5 Ac | | \$12,500 |
| 2 deviations | | \$1,000 |
| TOTAL | | \$13,500 |
| Option #2 | | |
| 5.5 Ac | | \$12,500 |
| 4 deviations | | \$1,000 |
| TOTAL | | \$13,500 |
| Option #3 | | |
| 5.5 Ac | | \$12,500 |
| 5 deviations | | \$1,000 |
| TOTAL | | \$13,500 |

5.89 Acres Total
 \$8,000.00 (1) Acre Base Fee (4.89 Acres Remaining)
 \$4,890.00 Additional Acreage Fee (\$1,000 x 4.89 ac = \$4,890.00)
 \$1,000.00 Deviations (up to 5)
 \$13,890.00 Total Fees Due

Multiple Owners (including corporation, partnership, trust, association, condominium, timeshare, or subdivision)

Complete Disclosure of Interest Form (see below)

Attach list of property owners as Exhibit 4-1

Attach map showing property owners interests as Exhibit 4-2 (for multiple parcels)

For condominiums and timeshares see Explanatory Notes Part IV (Page 11)

DISCLOSURE OF OWNERSHIP INTEREST

24-46-23-W3--00009.0000

STRAP: _____

If the property is owned in fee simple by an INDIVIDUAL, tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest.

Name and Address

Percentage Ownership

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is owned by a CORPORATION, list the officers and stockholders and the percentage of stock owned by each.

Name, Address and Office

Percentage of Stock

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a TRUSTEE, list the beneficiaries of the trust with percentage of interest.

Name and Address

Percentage of Interest

N/A

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a GENERAL PARTNERSHIP OR LIMITED PARTNERSHIP, list the names of the general and limited partners.

Name and Address

Percentage of Ownership

N/A

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If there is a CONTRACT FOR PURCHASE, whether contingent on this application or not, and whether a Corporation, Trustee, or Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners.

Name, Address and Office

Percentage of Stock

N/A

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Date of Contract: _____

If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust.

| Name | Address |
|------|---------|
| N/A | |
| | |
| | |
| | |
| | |
| | |
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| | |

For any changes of ownership or changes in contracts for purchase subsequent to the date of the application, but prior to the date of final certificate of compliance, a supplemental disclosure of interest must be filed.

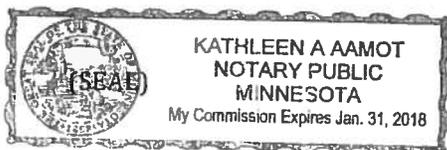
The above is a full disclosure of all parties of interest in this application, to the best of my knowledge and belief.


Signature

Thomas R. Torgerson
Printed Name

STATE OF MINNESOTA)
COUNTY OF KANDIYOHI)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on December 5, 2016 (date) by Thomas R. Torgerson (name of person providing oath or affirmation), who is personally known to me or who has produced _____ (type of identification) as identification.




Signature

Kathleen A. Aamot
Printed Name

PART VII

AFFIDAVIT

APPLICATION IS SIGNED BY A CORPORATION, LIMITED LIABILITY COMPANY (L.L.C.), LIMITED COMPANY (L.C.), PARTNERSHIP, LIMITED PARTNERSHIP, OR TRUSTEE

I, Thomas R. Torgerson (name), as Authorized Agent (title) of TPI-FMB II, LLC (company), swear or affirm under oath, that I am the owner or the authorized representative of the owner(s) of the property and that:

1. I have full authority to secure the approval(s) requested and to impose covenants and restrictions on the referenced property as a result of any action approved by the County in accordance with this application and the Land Development Code;
2. All answers to the questions in this application and any sketches, data or other supplementary matter attached hereto and made a part of this application are honest and true;
3. I have authorized the staff of Lee County Community Development to enter upon the property during normal working hours for the purpose of investigating and evaluating the request made thru this application; and that
4. The property will not be transferred, conveyed, sold or subdivided unencumbered by the conditions and restrictions imposed by the approved action.

TPI-FMB II, LLC
Name of Entity (corporation, partnership, LLP, LLC, etc)

[Signature]
Signature

Thomas R. Torgerson
Typed or Printed Name

Authorized Agent
Title

12-5-16
Date

STATE OF MINNESOTA)
COUNTY OF KANDIYOHI)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on December 5, 2016 (date) by Thomas R. Torgerson (name of person providing oath or affirmation), who is personally known to me or who has produced (type of identification) as identification.



Kathleen A. Aamot
Signature

Kathleen A. Aamot
Printed Name

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



Detail by Entity Name

Florida Limited Liability Company

TPI-FMB II, LLC

Filing Information

| | |
|-----------------------------|----------------|
| Document Number | L15000080626 |
| FEI/EIN Number | 47-4062515 |
| Date Filed | 05/06/2015 |
| Effective Date | 05/06/2015 |
| State | FL |
| Status | ACTIVE |
| Last Event | LC NAME CHANGE |
| Event Date Filed | 09/26/2016 |
| Event Effective Date | NONE |

Principal Address

4805 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

Changed: 03/04/2016

Mailing Address

103 15TH AVE NW
200
WILLMAR, MN 56201

Changed: 03/04/2016

Registered Agent Name & Address

TORGERSON, THOMAS R
4805 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

Name Changed: 06/15/2015

Authorized Person(s) Detail

Name & Address

Title MGR

TORGERSON, THOMAS R
4805 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Grand Resort II-Ft. Myers Beach, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bradley J. Schmidt
Name of Person
Johnson, Moody, Schmidt & Kleinhuizen, P.A.
Firm/Company
P.O. Box 913
Address
Willmar, MN 56201
City/State and Zip Code
kathy@tpihospitality.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bradley J. Schmidt at (320) 235-2000
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Grand Resort II-FI, Myers Beach, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 6, 2015 and assigned Florida document number L15000080626.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TPI-FMB II, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| | | _____ | <input type="checkbox"/> Remove |
| | | _____ | <input type="checkbox"/> Change |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
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| _____ | _____ | _____ | <input type="checkbox"/> Add |
| | | _____ | <input type="checkbox"/> Remove |
| | | _____ | <input type="checkbox"/> Change |

16 SEP 28 AM 9:50
F-1

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

16 SEP 26 AM 10:59
STATE OF MISSISSIPPI
RECORDS SECTION

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated September 22, 2016

Signature of a member or authorized representative of a member

Thomas R. Torgerson

Typed or printed name of signee

Multiple Owners (including corporation, partnership, trust, association, condominium, timeshare, or subdivision)

Complete Disclosure of Interest Form (see below)

Attach list of property owners as Exhibit 4-1

Attach map showing property owners interests as Exhibit 4-2 (for multiple parcels)

For condominiums and timeshares see Explanatory Notes Part IV (Page 11)

DISCLOSURE OF OWNERSHIP INTEREST

19-46-24-W4-0140A.0030, 19-46-24-W4-0140B.0050, 19-46-24-W4-0140B.0040
STRAP: 19-46-24-W4-0140B.0010, 19-46-24-W4-0140B.0020, 19-46-24-W4-0140B.0070
24-46-23-W3-00006.0000, 24-46-23-W3-00206.0060, 24-46-23-W3-00205.0070

If the property is owned in fee simple by an INDIVIDUAL, tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest.

Name and Address

Percentage Ownership

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is owned by a CORPORATION, list the officers and stockholders and the percentage of stock owned by each.

Name, Address and Office

Percentage of Stock

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a TRUSTEE, list the beneficiaries of the trust with percentage of interest.

| Name and Address | Percentage of Interest |
|------------------|------------------------|
| N/A | |
| | |
| | |
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| | |
| | |

If the property is in the name of a GENERAL PARTNERSHIP OR LIMITED PARTNERSHIP, list the names of the general and limited partners.

| Name and Address | Percentage of Ownership |
|------------------|-------------------------|
| N/A | |
| | |
| | |
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| | |

If there is a CONTRACT FOR PURCHASE, whether contingent on this application or not, and whether a Corporation, Trustee, or Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners.

| Name, Address and Office | Percentage of Stock |
|--------------------------|---------------------|
| N/A | |
| | |
| | |
| | |
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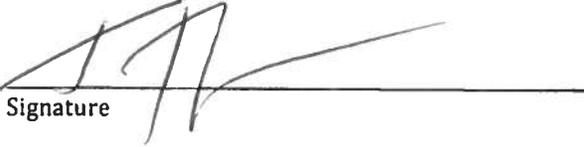
Date of Contract: _____

If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust.

| Name | Address |
|------------|---------|
| <u>N/A</u> | |
| | |
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For any changes of ownership or changes in contracts for purchase subsequent to the date of the application, but prior to the date of final certificate of compliance, a supplemental disclosure of interest must be filed.

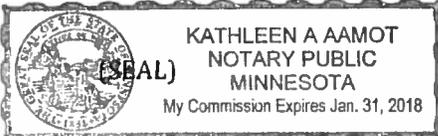
The above is a full disclosure of all parties of interest in this application, to the best of my knowledge and belief.


Signature

Thomas R. Torgerson
Printed Name

STATE OF MINNESOTA)
COUNTY OF KANDIYOHI)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on December 5, 2016 (date) by Thomas R. Torgerson (name of person providing oath or affirmation), who is personally known to me or who has produced (type of identification) as identification.




Signature

Kathleen A. Aamot
Printed Name

PART VII

AFFIDAVIT

APPLICATION IS SIGNED BY A CORPORATION, LIMITED LIABILITY COMPANY (L.L.C.), LIMITED COMPANY (L.C.), PARTNERSHIP, LIMITED PARTNERSHIP, OR TRUSTEE

I, Thomas R. Torgerson (name), as Authorized Agent (title) of TPI-FMB I, LLC (company), swear or affirm under oath, that I am the owner or the authorized representative of the owner(s) of the property and that:

1. I have full authority to secure the approval(s) requested and to impose covenants and restrictions on the referenced property as a result of any action approved by the County in accordance with this application and the Land Development Code;
2. All answers to the questions in this application and any sketches, data or other supplementary matter attached hereto and made a part of this application are honest and true;
3. I have authorized the staff of Lee County Community Development to enter upon the property during normal working hours for the purpose of investigating and evaluating the request made thru this application; and that
4. The property will not be transferred, conveyed, sold or subdivided unencumbered by the conditions and restrictions imposed by the approved action.

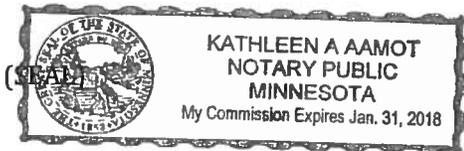
TPI-FMB I, LLC
 Name of Entity (corporation, partnership, LLP, LLC, etc)

[Signature] Authorized Agent
 Signature Title

Thomas R. Torgerson 12-5-16
 Typed or Printed Name Date

STATE OF MINNESOTA)
COUNTY OF KANDIYOHI)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on December 5, 2016 (date) by Thomas R. Torgerson (name of person providing oath or affirmation), who is personally known to me or who has produced (type of identification) as identification.



Kathleen A. Aamot
 Signature

Kathleen A. Aamot
 Printed Name

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



Detail by Entity Name

Florida Limited Liability Company

TPI-FMB I, LLC

Filing Information

| | |
|----------------------|----------------|
| Document Number | L15000041027 |
| FEI/EIN Number | 47-3419422 |
| Date Filed | 02/25/2015 |
| State | FL |
| Status | ACTIVE |
| Last Event | LC NAME CHANGE |
| Event Date Filed | 09/26/2016 |
| Event Effective Date | NONE |

Principal Address

4805 TAMIAMI TRAIL N
NAPLES, FL 34103

Changed: 03/04/2016

Mailing Address

103 15TH AVENUE NW
200
WILLMAR, MN 56201

Changed: 03/04/2016

Registered Agent Name & Address

TORGERSON, THOMAS R
4805 TAMIAMI TRAIL N
NAPLES, FL 34103

Address Changed: 03/04/2016

Authorized Person(s) Detail

Name & Address

Title MGR

TORGERSON, THOMAS R
4805 TAMIAMI TRAIL N
NAPLES, FL 34103

L15000041027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800290356258

09/27/16--01024--003 **90.00

FILED
2016 SEP 26 AM 11:40
2016 SEP 26 P 3:32
RECEIVED
DEPARTMENT OF REVENUE
TOLSON

D. BRUCE
SEP 28 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Grand Resort-Ft. Myers Beach, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bradley J. Schmidt
Name of Person
Johnson, Moody, Schmidt & Kleinhuizen, P.A.
Firm/Company
P.O. Box 913
Address
Willmar, MN 56201
City/State and Zip Code
kathy@tpihospitality.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bradley J. Schmidt at (320) 235-2000
Name of Person Area Code Daytime Telephone Number

FILED
2016 SEP 26 PM 3:32
TALLAHASSEE FL 32301

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Grand Resort-Ft. Myers Beach, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on February 25, 2015 and assigned Florida document number L15000041027.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TPI-FMB I, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

FILED
2016 SEP 26 PM 3:52
TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
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FILED
 2016 SEP 23
 10:32 AM
 CLERK OF COURT
 1000 N. 1ST ST.
 DENVER, CO 80202

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Multiple horizontal lines for amending information.

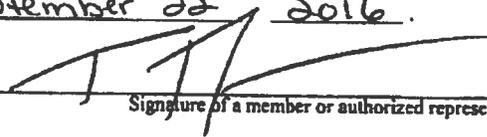
2016 SEP 26 10:32 AM
VAL
STATE OF VERMONT
RECORDS & ADMINISTRATION

FILED

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated September 22 2016.



Signature of a member or authorized representative of a member

Thomas R. Torgerson

Typed or printed name of signer

Multiple Owners (including corporation, partnership, trust, association, condominium, timeshare, or subdivision)

Complete Disclosure of Interest Form (see below)

Attach list of property owners as Exhibit 4-1

Attach map showing property owners interests as Exhibit 4-2 (for multiple parcels)

For condominiums and timeshares see Explanatory Notes Part IV (Page 11)

DISCLOSURE OF OWNERSHIP INTEREST

24-46-23-W3--00206.0050

STRAP: _____

If the property is owned in fee simple by an INDIVIDUAL, tenancy by the entirety, tenancy in common, or joint tenancy, list all parties with an ownership interest as well as the percentage of such interest.

| Name and Address | Percentage Ownership |
|------------------|----------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is owned by a CORPORATION, list the officers and stockholders and the percentage of stock owned by each.

| Name, Address and Office | Percentage of Stock |
|--------------------------|---------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a TRUSTEE, list the beneficiaries of the trust with percentage of interest.

Name and Address

Percentage of Interest

N/A

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If the property is in the name of a GENERAL PARTNERSHIP OR LIMITED PARTNERSHIP, list the names of the general and limited partners.

Name and Address

Percentage of Ownership

N/A

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

If there is a CONTRACT FOR PURCHASE, whether contingent on this application or not, and whether a Corporation, Trustee, or Partnership, list the names of the contract purchasers below, including the officers, stockholders, beneficiaries, or partners.

Name, Address and Office

Percentage of Stock

N/A

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

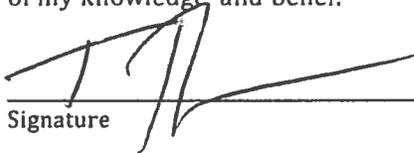
Date of Contract: _____

If any contingency clause or contract terms involve additional parties, list all individuals or officers, if a corporation, partnership, or trust.

| Name | Address |
|------|---------|
| N/A | |
| | |
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| | |
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| | |

For any changes of ownership or changes in contracts for purchase subsequent to the date of the application, but prior to the date of final certificate of compliance, a supplemental disclosure of interest must be filed.

The above is a full disclosure of all parties of interest in this application, to the best of my knowledge and belief.


Signature

Thomas R. Torgerson
Printed Name

STATE OF MINNESOTA)
COUNTY OF KANDIYOHI)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on December 5, 2016 (date) by Thomas R. Torgerson (name of person providing oath or affirmation), who is personally known to me or who has produced _____ (type of identification) as identification.




Signature

Kathleen A. Aamot
Printed Name

PART VII

AFFIDAVIT

APPLICATION IS SIGNED BY A CORPORATION, LIMITED LIABILITY COMPANY (L.L.C.), LIMITED COMPANY (L.C.), PARTNERSHIP, LIMITED PARTNERSHIP, OR TRUSTEE

I, Thomas R. Torgerson (name), as Authorized Agent (title) of TPI-FMB III, LLC (company), swear or affirm under oath, that I am the owner or the authorized representative of the owner(s) of the property and that:

1. I have full authority to secure the approval(s) requested and to impose covenants and restrictions on the referenced property as a result of any action approved by the County in accordance with this application and the Land Development Code;
2. All answers to the questions in this application and any sketches, data or other supplementary matter attached hereto and made a part of this application are honest and true;
3. I have authorized the staff of Lee County Community Development to enter upon the property during normal working hours for the purpose of investigating and evaluating the request made thru this application; and that
4. The property will not be transferred, conveyed, sold or subdivided unencumbered by the conditions and restrictions imposed by the approved action.

TPI-FMB III, LLC
Name of Entity (corporation, partnership, LLP, LLC, etc)

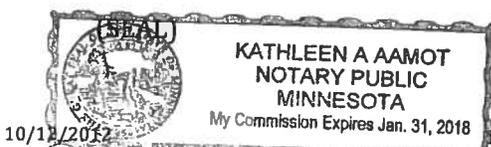
[Signature]
Signature
Thomas R. Torgerson
Typed or Printed Name

Authorized Agent
Title
12-5-16
Date

STATE OF MINNESOTA)
COUNTY OF KANDIYOHI)

The foregoing instrument was sworn to (or affirmed) and subscribed before me on December 5, 2016 (date) by Thomas R. Torgerson (name of person providing oath or affirmation), who is personally known to me or who has produced (type of identification) as identification.

Kathleen A. Aamot
Signature
Kathleen A. Aamot
Printed Name



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



Detail by Entity Name

Florida Limited Liability Company

TPI-FMB III, LLC

Filing Information

| | |
|----------------------|----------------|
| Document Number | L15000213613 |
| FEI/EIN Number | NONE |
| Date Filed | 12/28/2015 |
| State | FL |
| Status | ACTIVE |
| Last Event | LC NAME CHANGE |
| Event Date Filed | 09/26/2016 |
| Event Effective Date | NONE |

Principal Address

4805 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

Mailing Address

103 15TH AVENUE NW
#200
WILLMAR, MN 56201

Changed: 02/02/2016

Registered Agent Name & Address

TORGERSON, THOMAS R
4805 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

Authorized Person(s) Detail

Name & Address

Title MGR

TORGERSON, THOMAS R
4805 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

Annual Reports

| Report Year | Filed Date |
|-------------|------------|
| 2016 | 03/07/2016 |

Document Images

[09/26/2016 -- LC Name Change](#)

View image in PDF format

[03/07/2016 -- ANNUAL REPORT](#)

View image in PDF format

[02/02/2016 -- LC Amended and Restated Art](#)

View image in PDF format

[12/28/2015 -- Florida Limited Liability](#)

View image in PDF format

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State of Florida, Department of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 13, 2016

BRADLEY J SCHMIDT
JOHNSON, MOODY, SCHMIDT & KLEINHUIZEN, PA
PO BOX 913
WILMAR, MN 56201

Re: Document Number L15000213613

The Articles of Amendment to the Articles of Organization for GRAND RESORT VII-FT. MYERS BEACH, LLC which changed its name to TPI-FMB III, LLC, a Florida limited liability company, were filed on September 26, 2016.

The certification you requested is enclosed.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Shelia H Young
Regulatory Specialist II
Division of Corporations

Letter Number: 216A00020826

State of Florida



Department of State

I certify from the records of this office that GRAND RESORT VII-FT. MYERS BEACH, LLC which changed its name to TPI-FMB III, LLC, is a limited liability company organized under the laws of the State of Florida, filed on December 28, 2015.

The document number of this company is L15000213613.

I further certify that said company has paid all fees due this office through December 31, 2016, that its most recent annual report was filed on March 7, 2016, and its status is active.

I further certify that said limited liability company has not filed Articles of Dissolution.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this the
Thirteenth day of October, 2016



CR2EO22 (1-11)

Ken Detzner

Ken Detzner
Secretary of State

This instrument prepared by:
KEVIN F. JURSI NSKI
KEVIN F. JURSI NSKI, P.A.
15701 S. Tamiami Trail
Ft. Myers, Florida 33908

Property Appraisers Parcel ID Number(s): 24-46-23-W3-00206.0050

CORRECTIVE WARRANTY DEED

THIS INDENTURE, Made this 3RD day of FEBRUARY, 2017.

BETWEEN John W. Richard, Individually and as Trustee of the John W. Richard Revocable Trust U/T/A dated May 3, 1995 whose mailing address is:

237 Old San Carlos Blvd
Fort Myers Beach, FL 33931

party of the first part, and

Grand Resort VII-Ft. Myers Beach, LLC, a Florida limited liability company, whose mailing address is:

103 15th Avenue NW
Suite 200
Willmar, MN 56201

party of the second part.

WITNESSETH, That the said parties of the first part, for and in consideration of the sum of **TEN DOLLARS and 00/XX (\$10.00)**, to it in hand paid by the said party of the second part, the receipt whereof is hereby acknowledged, have granted, bargained, and sold to the said party of the second part, her heirs and assigns forever, the following described land, situate, and being in the County of Lee, State of Florida, to-wit:

Lot 5, Block 6, Business Center Subdivision, according to the map or plat thereof recorded in Plat Book 9, Pages 9 & 10, Public Records of Lee County, Florida, Less the following piece deeded to the State of Florida for road purposes as described in Deed recorded in Official Records Book 1154, Page 1510, Public Records of Lee County, Florida:

Commence on the Easterly extension of the South line of Lot 7, Block 8, Business Center Subdivision in Section 24, Township 45 South, Range 23 East, as per plat thereof recorded in Plat Book 9, Pages 9 and 10, Public Records of Lee County, Florida, at a point 145.70 feet South 70° 37' 03", East of the SW corner of said Lot 7; run thence North 22° 23' 59" West 171.02 feet; thence North 67° 35' 01" East 29.71 feet to a Point of Beginning, continue thence North 67° 35' 01" East 41.46 feet to the beginning of a curve concave to the Easterly having a radius of 39.00 feet; thence from a Tangent Bearing of South 67° 36' 01" West, run Southwesterly along said curve 56.81 feet through a central angle of 83° 27' 32" to the end of said curve and the beginning of a curve concave to the Northeasterly having a radius of 219.0 feet; thence Southerly along said curve 5.47 feet through a central angle of 1° 25' 53" to the end of said curve; thence South 57° 36' 01" West 2.15 feet; thence North 22° 23' 59" West 40.00 feet to the Point of Beginning.

Subject to easements, restrictions and reservations
of record and 2016 taxes and subsequent years

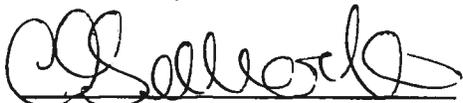
And the said parties of the first part do hereby fully warrant the title to said land, and will
defend the same against the lawful claims of all persons whomsoever.

The property is not the homestead of the grantor; it does not adjoin the homestead of the
grantor; no member of the grantor's family resides therein and grantors presently reside at;
237 Old San Carlos Blvd, Fort Myers Beach, FL 33931.

***THIS DEED IS BEING RE-RECORDED TO CORRECT A TYPO IN THE LEGAL
DESCRIPTION AS RECORDED WARRANTY DEED RECORDED MAY 12, 2016 AT
INSTRUMENT NUMBER 2016000102054, PUBLIC RECORDS OF LEE COUNTY, FLORIDA***

IN WITNESS WHEREOF, The said parties of the first part have hereunto set its hand
and seal the day and year first above written.

Signed, sealed and delivered
in the presence of:



Witness

Christine Gilberti

Printed Name of Witness #1

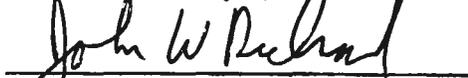


Witness

DEBORAH DRAKE

Printed Name of Witness #2

John W. Richard Revocable Trust
U/T/A dated May 3, 1995



John W. Richard, Individually
and as Trustee

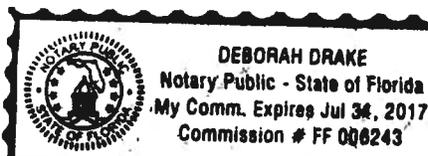
STATE OF FLORIDA

SS:

COUNTY OF LEE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and
County aforesaid, to take acknowledgements, personally appeared **John W. Richard, Individually and
as Trustee of the John W. Richard Revocable Trust U/T/A dated May 3, 1995** who is personally
known to me (or who has produced _____ as identification) and who executed the
foregoing instrument.

WITNESS my hand and official seal in the County and State last aforesaid this 3RD day of
FEBRUARY, 2017.




NOTARY PUBLIC
DEBORAH DRAKE
(Typed/printed name)
Notary Commission No.: FF000243

Prepared by and return to:
Samuel J. Hagan, IV
DeBoest, Stockman, Decker, Hagan,
Cheffer & Webb-Martin, P.A.
1415 Hendry Street
Fort Myers, Florida 33901
239-334-1381

Parcel Identification No. 24-46-23-W3-00206.0050

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 20 day of January, 2017 between TPI-FMB III, LLC, a Florida limited liability company, F/K/A GRAND RESORT-FT. MYERS BEACH VII, LLC, a Florida limited liability company, whose post office address is 103 15th Avenue NW, Suite 200, Willmar, MN 56201, grantor*, and TPI-FMB I, LLC, a Florida limited liability company, whose post office address is 4805 Tamiami Trail North, Naples, Florida 34103, grantee*,

Witnesseth that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Lee County, Florida, to-wit:

See exhibit "A" attached hereto.

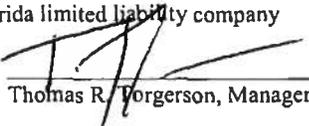
and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

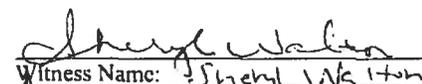
* "Grantor" and "Grantee" are used for singular or plural, as context requires.

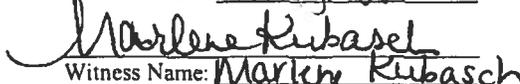
In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

TPI-FMB III, LLC, a Florida limited liability company,
F/K/A GRAND RESORT-FT. MYERS BEACH VII, LLC, a
Florida limited liability company

By: 
Thomas R. Vоргerson, Manager


Witness Name: Cheryl Watson


Witness Name: Marlene Kubasch

State of Minnesota
County of Kandiyohi

The foregoing instrument was acknowledged before me this 19 day of January, 2017 by THOMAS R. TORGERSON, as Manager of TPI-FMB III, LLC, a Florida limited liability company, F/K/A GRAND RESORT-FT. MYERS BEACH VII, LLC, a Florida limited liability company, on behalf of said firm. He is personally known or has produced a driver's license as identification.

[Notary Seal]



Kathleen A. Aamot
Notary Public

Printed Name: Kathleen A. Aamot

My Commission Expires: January 31, 2018

Exhibit "A"

Lot 5, Block 6, Business Center Subdivision, according to the map or plat thereof recorded in Plat Book 9, Pages 9 & 10, Public Records of Lee County, Florida, LESS the following piece deeded to the State of Florida for road purposes as described in Deed recorded in Official Records Book 1154, Page 1510 Public Records of Lee County, Florida.



LETTER OF AUTHORIZATION

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT I (WE) AM (ARE) THE FEE SIMPLE PROPERTY OWNER(S) OF THE PROPERTY DESCRIBED BELOW AND THAT MORRIS-DEPEW ASSOCIATES, INC. HAS BEEN AUTHORIZED TO REPRESENT ME (US) FOR THE BELOW REFERENCED PARCEL(S) IN ALL MATTERS PERTAINING TO REZONING OR DEVELOPMENT PERMITS. THIS AUTHORITY TO REPRESENT MY (OUR) INTEREST INCLUDES ANY AND ALL DOCUMENTS REQUIRED BY THE REZONING, PLANNING OR PERMITTING REQUESTS SUBMITTED ON MY (OUR) BEHALF BY MORRIS-DEPEW ASSOCIATES, INC.

STRAP NUMBER OR LEGAL DESCRIPTION:

19-46-24-W4-0140A.0030, 19-46-24-W4-0140B.0050, 19-46-24-W4-0140B.0040

STRAP# 19-46-24-W4-0140B.0010, 19-46-24-W4-0140B.0020, 19-46-24-W4-0140B.0070
24-46-23-W3-00006.0000, 24-46-23-W3-00206.0060, 24-46-23-W3-00205.0070

TPI-FMB I, LLC

COMPANY NAME

[Handwritten Signature]

SIGNATURE

Thomas R. Torgerson

PRINTED NAME & TITLE

STATE OF MINNESOTA
COUNTY OF KANDIYOHI

The foregoing instrument was acknowledged before me this 5 day of December, 2016 by Thomas R. Torgerson, who is personally known to me or has produced _____ as identification and did not take an oath.

My Commission Expires:

January 31, 2018

[Handwritten Signature]

Notary Public

[Handwritten Signature]

Notary Printed Name





LETTER OF AUTHORIZATION

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT I (WE) AM (ARE) THE FEE SIMPLE PROPERTY OWNER(S) OF THE PROPERTY DESCRIBED BELOW AND THAT MORRIS-DEPEW ASSOCIATES, INC. HAS BEEN AUTHORIZED TO REPRESENT ME (US) FOR THE BELOW REFERENCED PARCEL(S) IN ALL MATTERS PERTAINING TO REZONING OR DEVELOPMENT PERMITS. THIS AUTHORITY TO REPRESENT MY (OUR) INTEREST INCLUDES ANY AND ALL DOCUMENTS REQUIRED BY THE REZONING, PLANNING OR PERMITTING REQUESTS SUBMITTED ON MY (OUR) BEHALF BY MORRIS-DEPEW ASSOCIATES, INC.

STRAP NUMBER OR LEGAL DESCRIPTION:

STRAP# 24-46-23-W3-00009.0000

TPI-FMB II, LLC

COMPANY NAME

SIGNATURE

Thomas R. Torgerson

PRINTED NAME & TITLE

STATE OF MINNESOTA
COUNTY OF KANDIYOHI

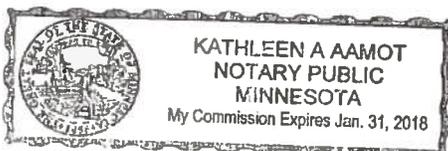
The foregoing instrument was acknowledged before me this 5 day of December 2016, by Thomas R. Torgerson, who is personally known to me or has produced _____ as identification and did not take an oath.

My Commission Expires:

January 31, 2018

Kathleen A. Aamot
Notary Public
Kathleen A. Aamot
Notary Printed Name

(seal)





LETTER OF AUTHORIZATION

TO WHOM IT MAY CONCERN:

PLEASE BE ADVISED THAT I (WE) AM (ARE) THE FEE SIMPLE PROPERTY OWNER(S) OF THE PROPERTY DESCRIBED BELOW AND THAT MORRIS-DEPEW ASSOCIATES, INC. HAS BEEN AUTHORIZED TO REPRESENT ME (US) FOR THE BELOW REFERENCED PARCEL(S) IN ALL MATTERS PERTAINING TO REZONING OR DEVELOPMENT PERMITS. THIS AUTHORITY TO REPRESENT MY (OUR) INTEREST INCLUDES ANY AND ALL DOCUMENTS REQUIRED BY THE REZONING, PLANNING OR PERMITTING REQUESTS SUBMITTED ON MY (OUR) BEHALF BY MORRIS-DEPEW ASSOCIATES, INC.

STRAP NUMBER OR LEGAL DESCRIPTION:

STRAP# 24-46-23-W3-00206.0050

TPI-FMB III, LLC
COMPANY NAME

[Handwritten signature]
SIGNATURE

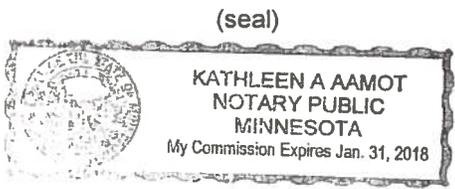
Thomas R. Torgerson
PRINTED NAME & TITLE

STATE OF MN
COUNTY OF KANDIYOHI

The foregoing instrument was acknowledged before me this ___ day of December, 2016 by Thomas R. Torgerson, who is personally known to me or has produced ___ as identification and did not take an oath.

My Commission Expires:
January 31, 2018

[Handwritten signature: Kathleen A. Aamot]
Notary Public
Kathleen A. Aamot
Notary Printed Name



Petition to Vacate
Description: Vacation of 4th Court
Date of Approval: 10/02/88
CCMB:37 Page:16

Petition to Vacate
Description: Vacation of alley
Date of Approval: 02/14/88
CCMB:36 Page:11-12A

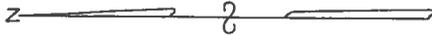
BUSINESS CENTER

A SUBDIVISION IN
U.S. LOT 1 ON ESTERO ISLAND
SECTION 24, T46S, R23E
LEE COUNTY, FLORIDA

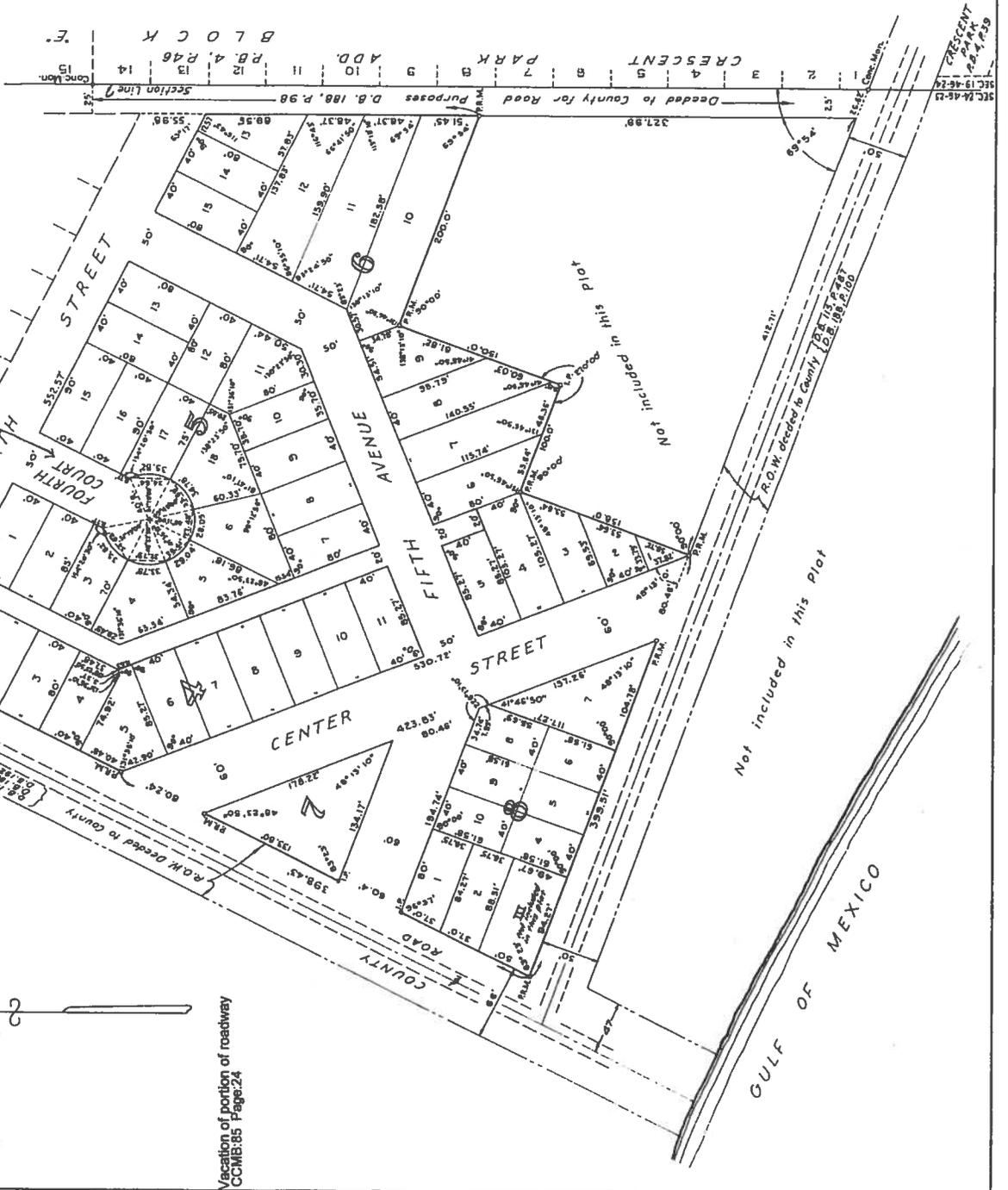
February, 1949

Scale: 1" = 60'

Sheet 2 of 2



Vacation of portion of roadway
CCMB:85 Page:24



SEC 24-46-24
SEC 19-46-24
P. 24, P. 25

BUSINESS CENTER

A SUBDIVISION IN
U.S. LOT 1 ON ESTERO ISLAND
SECTION 24, T46S, R23E
LEE COUNTY, FLORIDA

February, 1949

Scale: 1" = 60'

Sheet 1 of 2

DESCRIPTION

A tract or parcel of land lying in U.S. Lot 1, on Estero Island, Section 24, T46S, R23E, Lee County, Florida, which tract is described as follows:

From the southwest corner of Block E, Crescent Park Addition, according to a plat thereof recorded in Plat Book 4 of Page 45, public records of Lee County, Florida, on the east line of said Section 24, 50' westerly along the north line of said Section 24, a line for 26.62' to the point of beginning. From said point of beginning continue on the same course for 82.22' to the easterly right-of-way line of County Road running from the Malenas Pass Bridge to the Gulf of Mexico, thence deflected right 59.57' and run northerly, along the line for 115.51' to the intersection with a perpendicular to said line for 285.01' to an intersection with a line 25' west of the east line of Section 24; thence south along said line parallel to and 25' measured on a perpendicular; from the east line of Section 24, for 187.16' more or less to the point of beginning; accepting herefrom those parcels marked 'N' included in this plat.

DEDICATION

KNOW ALL MEN BY THESE PRESENTS that T.H. Phillips, the owner of the above described land, has dedicated to the public use of the COUNTY OF LEE, Florida, and does hereby dedicate to the perpetual use of the public all streets, alleys, avenues and/or roads shown hereon, IN WITNESS WHEREOF the owner has hereunto set his hand and seal this 14th day of February, A.D. 1949.

WITNESS: _____ SEAL

WITNESS: *T.H. Phillips*
T.H. Phillips

ACKNOWLEDGMENT

STATE OF FLORIDA
COUNTY OF LEE
I HEREBY CERTIFY that on this day, before me, an officer duly authorized to take acknowledgments, personally appeared T.H. Phillips, to me known to be the person described in and who executed the foregoing dedication and he acknowledged before me that he executed the same for the uses and purposes therein mentioned. IN WITNESS my hand and seal of the County of Lee, Florida, this 14th day of February, A.D. 1949.

T.H. Phillips
Notary Public, State of Florida at large
My Commission expires Jan 15 1952

APPROVALS

This plat accepted this 23rd day of February A.D. 1949, in open meeting of the Board of County Commissioners of Lee County, Florida.

APPROVED: _____
Chairman
Clerk

I HEREBY CERTIFY that this plat of "BUSINESS CENTER" has been approved by the Board of County Commissioners of Lee County, Florida, in compliance with the requirements of Chapter 10275, Laws of Florida, Acts of 1925.
I FURTHER CERTIFY that said plat was filed for record at 4:30 P.M. on this 23rd day of February, A.D. 1949, and duly recorded in Plat Book No. 5 of Pages 3 and 10 of the public records of Lee County, Florida.

Clerk of the Circuit Court and for Lee County

I hereby certify that this plat of "BUSINESS CENTER" is true and correct according to a recent survey made and plotted under my direct supervision and in accordance with the provisions of Chapter 10275, Laws of Florida, Acts of 1925.

Reg. Land Surveyor, Fla. Cert. No. 331
Johnston S. Colburn, Tallahassee, Florida

122739

