

GENERAL SERVICES ADMINISTRATION PUBLIC BUILDINGS SERVICE LEASE AMENDMENT	LEASE AMENDMENT No. 7 TO LEASE NO. GS-04P-LNC60532
	ADDRESS OF PREMISES 500 US HWY 70 West Havelock, NC 28532-9510

THIS AMENDMENT is made and entered into between JACKSON FAMILY LLC

whose address is: P.O. Box 249
Havelock, NC 28532-0249

hereinafter called the Lessor, and the UNITED STATES OF AMERICA, hereinafter called the Government:

WHEREAS, the parties hereto desire to amend the above Lease.

NOW THEREFORE, these parties for the considerations hereinafter mentioned covenant and agree that the said Lease is amended upon the Government's execution of this Lease Amendment as follow: This Lease Amendment (LA) 7 provides beneficial occupancy for the leased space..

1. Paragraph 1.03 RENT AND OTHER CONSIDERATION (SEP 2015) of the lease contract is deleted and replaced with the following:

The Government shall pay the Lessor annual rent, payable in monthly installments in arrears, at the following rates:

TERM	ANNUAL RENT	ANNUAL SHELL	ANNUAL OPERATING	ANNUAL TI	ANNUAL BSAC	Monthly
	\$1,139,677.42	\$543,853.44	\$ 207,721.80	\$ 369,542.69	\$ 18,559.49	\$94,973.12

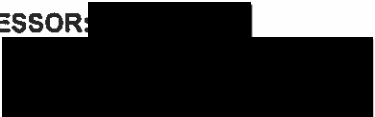
1Shell rent calculation:
 (Firm Term) \$17.28 per RSF multiplied by 31,473 RSF
 2Tenant Improvements of \$1,592,900.22 are amortized at a rate of 6 percent per annum over 5 years.
 3Operating Costs rent calculation: \$6.60 per RSF multiplied by 31,473 RSF
 4Building Specific Amortized Capital (BSAC) of \$80,000 are amortized at a rate of 6 percent per annum over 5 years

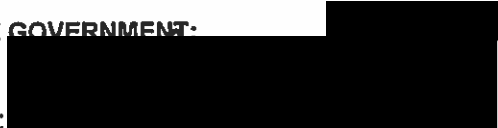
This Lease Amendment contains 2 pages.

All other terms and conditions of the lease shall remain in force and effect.
 IN WITNESS WHEREOF, the parties subscribed their names as of the below date.

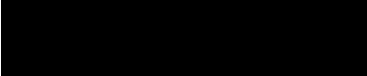
FOR THE LESSOR:

FOR THE GOVERNMENT:

Signature: 
 Name: Jeremiah C. Jackson
 Title: Manager
 Entity Name: Jackson Family, LLC
 Date: 9/5/17

Signature: 
 Name: Alvin P. Jackson
 Title: Lease Contracting Officer
GSA, Public Buildings Service
 Date: 9/6/2017

WITNESSED FOR THE LESSOR BY:

Signature: 
 Name: Susan Garcia
 Title: Office Assistant
 Date: 9/5/17

2. Invoice instructions:

The preferred way to submit an invoice to GSA for payment is electronically via the Internet. Please register as a vendor initially and receive a password at <https://finance3.gsa.gov> and follow the directions for invoice submittal.

Accept the PII notice.
Click on "Click here to Login".
Accept the PII notice.

Enter your User Name and Password and click "login." NOTE: DO NOT USE THE ENTER KEY. USE THE MOUSE TO CLICK ON "LOGIN". Please note that using "cut and paste" may not work. You may need to type your password. It is not case sensitive.

- ✓ Select "submit invoice".
- ✓ Select "All POs".
- ✓ Find the ACT# or PDN# you are invoicing against and select it.
- ✓ A form will appear that you fill in with your invoice information.
- ✓ Note: if you are resubmitting a rejected invoice, add an "R" or an "A" to the number. The system will not let you use an invoice number you have used previously.
- ✓ Fill in the information requested. All fields marked with an asterisk (*) are required fields. PLEASE NOTE: ORDERS BEGINNING WITH "1B" ARE REQUIRED TO ENTER "BEGIN DATE" AND "END DATE".
- ✓ When complete, click "continue." If you have made any errors, you will receive an error message. (Worth noting: invoice numbers
 - o should contain no dashes or spaces, dates are in mm/dd/yyyy format, money amounts have no \$ signs or commas, only a decimal point.) Correct the error and click "continue" again.
 - o You will have an opportunity to upload any backup material as one attachment after clicking "submit" on the next screen. Note: File name should be 8 characters + extension only, please do not use special characters such as ~|@#%&*()+{}][|; '<> .? or spaces. Attachments cannot be over 4 to 5 megabytes in size.
- ✓ If you have questions please e-mail FW-PaymentSearch.finance@gsa.gov



If you have any difficulty, please contact the Contracting Officer.

A proper invoice must include:

- An invoice number provided by the Contracting Officer. Please include this number: **PS0038239**
- Name of your Business Concern and Invoice Date
- Lease Contract No., Lease Amendment No. 1, and Building Location
- Description and Price of items in conformance with this Lease Amendment.

If the invoice is not submitted on company letterhead, it must be signed by the person(s) with whom the lease contract is made.

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INITIALS:  & 
 LESSOR & GOVT