

GENERAL SERVICES ADMINISTRATION
PUBLIC BUILDINGS SERVICE
SUPPLEMENTAL LEASE AGREEMENT

SUPPLEMENTAL AGREEMENT
NO. **11**

DATE **9/20/10**

TO LEASE NO.
GS-07B-16484

ADDRESS OF PREMISES 1200 Hackberry Street
McAllen, TX 78504

THIS AGREEMENT, made and entered into this date by and between **WSSA McAllen, LLC**

whose address is **140 East Second Street**
Suite 220
Flint Michigan, 48502

hereinafter called the Lessor, and the UNITED STATES OF AMERICA, hereafter 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 effective Upon execution by the Government, as follows:

The purpose of Supplemental Lease Agreement (SLA) No. 11 is to accept the Government initiated change orders and further described as Change Order No. 4AB [REDACTED] and attached scope of work.

1. Upon acceptance of the space by the Government and submittal of an acceptable invoice by the Lessor, the overage in Tenant Improvement costs in the amount of \$849.13 will be paid in a lump sum to the Lessor by the Government. The invoice shall be submitted to:

GSA Greater Southwest Center (7BCP)
P.O. Box 17114
Fort Worth, Texas 76102-0114

Electronic invoicing is also available and is the preferred method through the GSA website, www.finance.gsa.gov. To be paid an invoice must be on letterhead from the Lessor with the same address as the lease payments, a description of the work provided, and reference PDN No. PS0018120 on invoicing documents.

2. .
3. This SLA serves as notice to proceed for build-out of tenant improvements.

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 above date.

LESSOR

BY _____

Member - WSSA Member LLC
(Title)

IN PRES _____

[REDACTED]
(Address)

BY _____

CONTRACTING OFFICER
GENERAL SERVICES ADMINISTRATION
819 TAYLOR STREET
FORT WORTH, TX 76102

(Official Title)