Lease Amendment No. __3__

TO LEASE NO. GS-05P-WI18660

PDN Number PS0027233

ADDRESS OF PREMISES

740 Regent Street
1st Floor
Madison, WI 53713-2708

THIS AMENDMENT is made and entered into between

whose address is: 740 REGENT STREET ASSOCIATES
A LIMITED WISCONSIN PARTNERSHIP
145 East Badger Road, Suite 200
Madison, WI 53713-2708

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

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

This Lease Amendment (LA) will serve to document, approve, and reimburse the Lessor a lump sum payment for the approved cost of ___ to remove the ___ excess furniture from the storage premises. These costs were found to be fair and reasonable. The costs will be paid via a lump sum payment from a Reimburseable Work Authorization (RWA) provided by the tenant, ___.

NOW THEREFORE, these parties for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, covenant and agree that the said Lease is amended, effective November 1, 2014 as follows:

This Lease Amendment (LA) No. 3 is issued to reimburse the lessor for the cost to remove excess furniture and belongings from the said premises and dispose of them accordingly. Lessor will be paid via lump sum from a Reimburseable Work Authorization (RWA) provided by the tenant, ___). These costs will be paid to the lessor as a lump sum payment upon completion of the project, inspection of storage/parking site to assure removal has occurred, the buildout, and a certified invoice provided by the lessor to GSA Finance.

his Lease Amendment contains ___ 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:

Signature: 
Name: 
Title: 
Entity Name: 740 Regent Street Associates LP
Date: 11/11/2014

FOR THE GOVERNMENT:

Signature: 
Name: 
Title: Lease Contracting Officer
Entity Name: GSA, Public Buildings Service
Date: 11/12/14

WITNESSED FOR THE LESSOR BY:

Signature: 
Name: 
Title: 
Date: 11/11/2014

Lease Amendment Form 12/12
The cost to remove the excess property amounted to [redacted] inclusive of any recycling fees for electronic equipment. This cost was found to be fair and reasonable.

The Government shall pay the tenant improvement cost of [redacted] for the resolution of the removal cost of the furniture based on the recent reduction of space and the altering of the new suite. After inspection by the Government and approval from the Contracting Officer, the Lessor must submit its invoice directly to: GSA, Greater Southwest Finance Center (7BCP), P. O. Box 17181, Fort Worth, Texas 76102 or to the GSA Finance website at: WWW.FINANCE.GSA.GOV. The invoice must include the following PON number PS # 0027233 at the top of your invoice. The Lessor will provide a certified invoice to GSA Finance for his one-time lump sum payment and provide a copy to the Lease Contracting Officer. The lessor will be paid via electronic payment into their account based on lessor’s financial information in the SAM database.

All other terms and conditions remain the same.

Initials: GOVERNMENT _LEditor_ LESSOR _LEditor_