SUPPLEMENTAL LEASE AGREEMENT

SUPPLEMENTAL LEASE AGREEMENT NO. 11	TO LEASE NO. GS-10B-07129	DATE	SEP	21	2011	PAGE 1 of 2
ADDRESS OF PREMISES						BUILDING NUMBER
First & Main 100 SW Main Street Portland, OR 97201-1000						OR6728

THIS AGREEMENT, made and entered into this date by and between AAT Oregon Office I, LLC

whose address is 100 SW Main Street, Portland, OR 97204-1000

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 effective September 1, 2011, as follows:

This Supplemental Lease Agreement (SLA) #11 establishes the Lessor will provide 32 hours of overtime heating, ventilation, and air conditioning (HVAC) service to the Leased Premises at the Government's request at the established overtime lease rate of \$55.00 per hour for the period of September 1, 2011, through September 30, 2011. The order shall not exceed \$1,760.00.

Invoices for the above services will be submitted quarterly. Upon approval of the ordered hours by the GSA Contracting Officer, the Government will reimburse the Lessor. Reimbursement will occur within 30 days of the Government's receipt of the Lessor's itemized invoice(s). At the end of the stated performance period the Lessor will indicate final billing.

Failure to submit a proper invoice within 120 days following established quarterly billing frequency shall constitute a waiver of the Lessor's right to receive any payment for such overtime utilities pursuant to this lease.

The Lessor must submit invoices electronically to <u>www.finance.gsa.gov</u> and to the Lease Administration Manager at <u>eric.shreves@gsa.gov</u>

The invoice(s) must include:

- Lease number: GS-10B-07129
- Invoice Date
- Payment reference number: PS0020596
- Lessor name and address as shown on the lease
- Itemization of the products or services provided

If the invoice is not submitted on company letterhead, the person(s) with whom the Lease contract is made must sign it.

Continued on Page 2

	LESSOR
SIGNAT	NAME OF SIGNER Fatrick Kinney
	1 Sile 200 SanDiaco AA 92130
	IN PRESENCE OF
SIGNATU	NAME OF SIGNER
	Jin Dur fen
ADDRESS	al, Suite 200, Son Diego, CA 92130
	UNITED STATES OF AMERICA
	NAME OF SIGNER ANDREW J. MOHL
	OFFICIAL TITLE OF CONTRACTING OFFICER
	GSA FORM 276 (REV. 8/2008)

IN WITNESS WHEREOF, the parties hereto have hereunto subscribed their names as of the date first above written.

SLA # 11 to GS-10B-07129

If the Lessor cannot submit documents electronically, hard copies must be sent to:

Original Documents GSA Greater Southwest Finance Center Attn: PBS Payments Branch (BCFA) P.O. Box 17181 Fort Worth, TX 76102 **Copies** GSA Southern Service Cntr Field Office Attn: Virginia Matthews 620 SW Main St. Suite 108 Portland, OR 97205

The Lessor shall be responsible for maintenance and repair of the installed alterations outlined above.

The Lessor hereby waives restoration as a result of all improvements.

All other terms and conditions remain in full force and effect.

INITIALS: ESSOR

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