

# STATE OF FLORIDA Certification of Compliance

Department of Management Services Form 4113

		Lease Number:	7 1 0	: 0 2	2 6 6					
		Date: _	08/0	08/20	22					
		Lease Action: _	Modi	ficatio	n 🔽					
Pui	rpose									
Thi	s form	certifies that the associated lease action complies with all applicable statutes and rules.								
1.	Leas	ing Agency Florida Department of Law Enforcement								
2.		e Action Explanation lification to extend lease for 1 year.								
3.	Com	Compliance Criteria								
		undersigned hereby certifies that this lease, lease number $\frac{7\ 1\ 0\ :\ 0\ 2\ 6\ 6}$ , is in the and in compliance with all applicable leasing criteria, in that:	Best Int	erests	of the					
			Yes	No	N/A					
	A.	Approval of Space Need was obtained.								
	В.	Modifications to the standard lease document were submitted, with a comprehensive analysis, as required in subsection 60H-1.003, Florida Administrative Code.		and the second						
	C.	The lease complies with subsection 255.25(8), Florida Statutes.	Z							
		Two or more leases were not acquired in the same facility or complex, without a competitive solicitation within the previous twelve months based on the commencement date of the leases.								
	D.	Space was measured or otherwise verified, and the Net Usable Square Footage shown is in accordance with subsection 60H-2.003, Florida Administrative Code.	Z							
	E.	Procurement was conducted pursuant to subsection 60H-1.015, Florida Administrative Code (leases 5,000 square feet or more) or subsection 60H-1.016, Florida Administrative Code (leases less than 5,000 square feet).								
	F.	A Sustainable Building Rating and Energy Performance Analysis (EPA) or a Florida Energy Modeling Program (FEMP) was performed.								
	G.	The subject premises are zoned to allow proposed usage.	Z							
	Ĥ.	An Energy Star rated building, where viable or cost-effective, was selected.								
	$\nearrow$	Furdasing Mgr Title	X	Date	<u>st</u> 10,200					

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Rev. Date: 09/13



### **STATE OF FLORIDA** Agreement for Modification Bureau of Leasing, Department of Management Services Form 4040

							Le	ase Numi	ber:	710:0266
									Modific	ation Number:#3
	W	HEREAS, the Florida D	epartment of Law	Enforcement						previously entered
	in	to Lease Number	710:0266	, on	August		┰	30tl▼	,2018	which became
	ef	fective December		1st	ॼ,	2018	_and consi	sts of	3,900	square feet; the
	cu	irrent Lessor being H	ernando Board o	of County Co	mmission	ers				
	-									;
	T-	d WHEREAS, the curre Hangar #46 and #4 4604					merican Fi	lyer Drive	e, Brooks	ville, FL
	Le	nd the covenants and case Agreement, as an	ended by the be							
1.	Ц	Agreement for Lease							L 4-L	
		Lessor and Lessee ag hereby exercises the	option to renev	v Lease for a	period of					e, the Lessee
2.	X	Agreement for Leas	e Extension:							
		Lessor and Lessee himonth(s), beginning								
3.		Restructuring the Re	ental Rate:							
		Commencing				, th	e Lease refe	erenced a	bove is an	nended to increase
		or decrease the in Article 8 of this ag		square foot	рег уеаг р	aid to th	e Lessor by	the Lesse	e to the a	mounts as specified
4.		Increase or Decrease	Square Footage	<b>e:</b>						
		Commencing				, t	ne Lease ref	erenced a	sbove is a	mended to
		increase  or decre	ase 🗆 the squar	e footage le	ased unde	r this Lea	se by			square feet from
		description of added	or deleted squa	re footage i	s:					uare feet. The
5.		Change the Renewal	Option Terms:							
		Commencingoption periods from		yea	periods to	, the	Lease is he	reby ame r periods.	nded to c	hange the renewal
5.	×	Cooperation with th								
		Pursuant to section 2	•		ontractor a	and anv s	ubcontracto	ors under	stand and	will comply with
		their duty to coopera								

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#### **STATE OF FLORIDA Agreement for Modification**

Bureau of Leasing, Department of Management Services Form 4040

				Lease	Number:	710:0266
					Modif	ication Number: #3
7.	☐ Other:					
	(Use this section to spe modifications are inclu-	•	uded in the sections	s above. If this box is r	not selected, n	o addition <b>al</b>
<b>3</b> .	Effective Rental Rates – Se	guare Footage	3,900			
	TER	N. T.				
	Start (MM/DD/YYYY)	End (MM/DD/YYYY)	RATE PER SQUARE FOOT	MONTHLY RATE	ANNUAL	RATE
	12/01/2022 -	11/30/2023	\$4.62	\$1,501.50	\$18,018	3.00
	•	-		\$0.00	\$0.00	)
	•	•		\$0.00	\$0.00	)
	•			\$0.00	\$0.00	)
				\$0.00	\$0.00	)
	-			\$0.00	\$0.00	)
	-	•		\$0.00	\$0.00	)
	•	,		\$0.00	\$0.00	)
	•	•		\$0.00	\$0.00	)
	-			\$0.00	\$0.00	)
Agi	reement to Incorporate Ado	iendum				
	WHEREAS, both the Le	ssor and the Lessee	wish to amend and	d modify said lease so	as to incorpor	ate
	Addendum	effective		·		
	NOW, THEREFORE, in a	onsideration of the	e mutual promises a	ınd covenants herein ı	contained: the	parties hereto hereby
	agree as follows:		•		•	,
	Commencing		, said lease	is hereby amended ar	nd modified to	Incorporate
	Addendum		-	•		•

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710:0266



#### **STATE OF FLORIDA Agreement for Modification**

Bureau of Leasing, Department of Management Services Form 4040

	Lease Number:	710:0266
	Mo	dification Number: _#3
N WITNESS WHEREOF, the parties hereto have 29th day of September,	e hereunto executed this instrument for the purpose $2022$ .	e herein expressed,
NY MODIFICATION OF A LEASE AGREEMENT HE DEPARTMENT OF MANAGEMENT SERVIC	SHALL NOT BECOME LEGALLY EFFECTIVE UNTIL APIES.	PROVED/ACCEPTED BY
ORIGINA	AL SIGNATURES REQUESTED ON ALLCOPIES	
to Lessor – Lessor, or authorized representa	ative and two witnesses must sign, print name and e	nter date.
Lessor or Authorized Representative	Steve Changion Printed Name/Title	9-13-2622 Date
Miness #1	Colleen Conko	9-13-2022 Date
Heidi hurpe	HEIDI KURPPE  Printed Name	9   13   2022 Date
to Lessee Agency – Agency head, or authorin, print name and enter date.	zed delegate, and representative of Agency Office o	f General Counsel must
Agrebry Head or Authorized Delegate	Hautening Ben Suc.	Sy Spt 24;
Agency Office of General Counsel	Chrs Bufanio	9/2/0/22
	es – Chief Real Property Administrator (or authorized and enter date. When applicable, DMS Office of Ge	
Ryan Meikenhous	Ryan Meikenhous, Chief of Property Services	09/29/2022
Chief Real Property Administrator	Printed Name/Title	Date
N/A as delegated 3/3/2022		
Secretary or Authorized	Printed Name	Debe
N/A		
DMS Office of General Counsel	Printed Name	Date

APPROVED AS TO FORM County Attorney's Office Form: 4040

Rev. Date: 7/15



#### STATE OF FLORIDA

## DEPARTMENT OF MANAGEMENT SERVICES UPDATED DISCLOSURE STATEMENT

Lease Number:	710:0266		
Location:	T-Hangar #46 and #48 (Southwest Drive, Brooksville, FL 34604	Γ-Hangars) located at 2185 <i>β</i>	American Flyer
			07/24/2018
The Disclosure o remains valid an	f Ownership Statement, form FM 41 d correct.	.14, currently on file dated _	07/24/2018
Lessor: Hernar	ndo Board of County Commissioners		
A Rev	Authorized Signature  Champion Chainman  Name/Title	(5	SEAL)
_5.	ptember 13, 2002		

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

BY

County Attorney's Office