

FIRST AMENDMENT TO THE LEASE AGREEMENT

This is a First Amendment to the LEASE AGREEMENT dated February 7, 2017, (herein "Lease,") made and entered into this _____ day of _____ 2021, by and between:

CITY OF FORT LAUDERDALE, a municipal corporation of the State of Florida, 100 North Andrews Avenue, Fort Lauderdale, FL 33301 (hereinafter "LESSEE or "CITY").

and

ADVANCED DENTAL WELLNESS CENTER, P.A., a professional association organized under the laws of Florida, whose principal address and mailing address is 104 SE 1st Street, Fort Lauderdale, Florida 33301 (hereinafter "LESSEE"),

WITNESSETH:

WHEREAS, the LESSOR and the LESSEE entered into a Lease Agreement on February 7, 2017, for Shop 104 at the Riverwalk Center Garage formerly known as City Shoppes (hereinafter "Riverwalk Center" or "Leased Premises"); and

WHEREAS, in accordance with Section 2(b), LESSEE shall have the option to renew the term of Lease for two (2) additional five (5) year terms; and

WHEREAS, both LESSOR and LESSEE are in mutual agreement to renew the Lease; and

WHEREAS, in accordance with Section 2(b), LESSEE provided written notification to LESSOR of its intention to exercise such renewal option; and

WHEREAS, the parties desire to renew the Lease for an additional term of five (5) years with an effective date of February 22, 2022; and

NOW, THEREFORE, in consideration of the mutual terms and conditions hereinafter set forth, LESSOR and LESSEE agree as follows:

1. The above recitals and representations are true and correct and are incorporated herein.
2. The term of the Lease shall be extended for an additional five (5) year term with a commencement date of February 22, 2022, and shall end at midnight on February 21, 2027.
3. The First Amendment to the Lease shall be effective upon full execution by the parties.
4. The First Amendment to the Lease may be fully executed in multiples copies by the parties each of which, bearing original signatures, shall have the force and effect of an original document.

5. In the event of any conflict or ambiguity by and between the terms and provisions of the Lease and the First Amendment to the Lease, the terms and provisions of this First Amendment to the Lease shall control to the extent of any such conflict or ambiguity.
6. The terms and conditions of the Lease is hereby ratified and shall remain in full force and effect, except as specifically amended by the First Amendment to the Lease.

REMAINDER OF THE PAGE LEFT INTENTIONALLY BLANK.

AS TO LESSOR:

**CITY OF FORT LAUDERDALE, A
MUNICIPAL CORPORATION OF THE
STATE OF FLORIDA**

WITNESSES:

[Witness type or print name]

[Witness type or print name]

ATTEST:

Jeffery A. Modarelli,
City Clerk

By: _____
Dean J. Trantalis, Mayor

By: _____
Christopher J. Lagerbloom, ICMA-CM
City Manager

Approved as to form:
Alain E. Boileau, City Attorney

By: _____
Lynn Solomon, Esq.
Assistant City Attorney

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online, this ____ day of _____, 2021, by DEAN J. TRANTALIS, Mayor of the City of Fort Lauderdale, a municipal corporation of Florida on behalf of the City of Fort Lauderdale.

Notary Public, State of Florida

Name of Notary Typed, Printed or Stamped

Personally Known _____ OR Produced Identification _____
Type of Identification Produced _____

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this by means of ☐ physical presence or
☐ online, this _____ day of _____, 2021, by CHRISTOPHER J.
LAGERBLOOM, ICMA-CM, City Manager of the City of Fort Lauderdale, a municipal corporation
of Florida on behalf of the City of Fort Lauderdale.

Notary Public, State of Florida

Name of Notary Typed, Printed or Stamped

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____

AS TO LESSEE:

IN WITNESS OF THE FOREGOING, the parties have set their hands and seals the day and year first written above.

WITNESSES:

**ADVANCED DENTAL WELLNESS CENTER, P.A.,
a professional association organized under the
laws of Florida**

Type or print name

By _____

Dr. Boris Lipovetskiy, Director

Type or print name

STATE OF FLORIDA:
COUNTY OF BROWARD:

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this ____ day of _____, 2021, by Dr. Boris Lipovetskiy, as Director of the ADVANCED DENTAL WELLNESS CENTER, P.A., a professional association organized under the laws of Florida.

Notary Public signature

Name Typed, Printed or Stamped

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____