

GENERAL SERVICES ADMINISTRATION PUBLIC BUILDINGS SERVICE	LEASE AMENDMENT No. 6
LEASE AMENDMENT	TO LEASE NO. GS-03P-LPA12104
ADDRESS OF PREMISES Yorktowne Medical Center 2350 Freedom Way York, PA 17402-8265	PDN Number: PS0030620

THIS AMENDMENT is made and entered into between Pwrball, LP, Chad Finkenbiner

whose address is: 2350 Freedom Way, Suite 251, York, PA 17402-8265

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

WHEREAS, the parties hereto desire to amend the above Lease to provide Notice to Proceed for Change Orders described below

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 December 4, 2014 as follows:

1. The Lessor shall furnish all labor, materials, tools, equipment, services, and associated work to provide, install, complete and maintain said work, identified in the Change Orders below:

- Change Order 7 – Finish selection changes; See Attached. - [REDACTED]

2. Upon completion and the Government's inspection and acceptance of all completed tenant improvements, the Government shall pay the Lessor a one-time lump sum payment of [REDACTED].

3. After inspection and acceptance of work by the Government, a properly executed original invoice shall be forwarded to:

General Services Administration (GSA)  
Greater Southwest Region (7BC)  
P.O. Box 17181  
Fort Worth, TX 76102-0181

A copy of the invoice must also be mailed to:  
GSA, Public Buildings Service  
Real Estate Acquisition Division (3PRND)

This Lease Amendment contains seven (7) 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: [REDACTED]  
Name: [REDACTED]  
Title: Manager  
Entity Name: PwrBall, LP  
Date: 12/12/14

FOR THE GOVERNMENT:

Signature: [REDACTED]  
Name: J  
Title: L  
GSA, Public B  
Date: 12/15/14

WITNESSED FOR THE LESSOR BY:

Signature: [REDACTED]  
Name: [REDACTED]  
Title: MANAGER  
Date: 12-12-14

Attn: JoAnn Stewart, Lease Contracting Officer  
20 North 8<sup>th</sup> Street, 9<sup>th</sup> Floor  
Philadelphia, PA 19107-3191

For an invoice to be considered proper, it must:

1. Be received after the execution of this LA
2. Reference the Pegasys Document Number (PDN) specified on this form (**PS0030620**)
3. Include a unique, vendor-supplied, invoice number
4. Indicate the exact payment amount requested, and
5. Specify the payee's name and address.

Payment will be due within thirty (30) calendar days after GSA's designated billing office receives a properly executed invoice or acceptance of the work by the Government, whichever is later.

[Redacted Signature]

[Redacted Signature]

[Redacted Signature]

INITIALS: CMF & [Signature]  
LESSOR GOVT