

GENERAL SERVICES ADMINISTRATION PUBLIC BUILDINGS SERVICE LEASE AMENDMENT	LEASE AMENDMENT No. (2)
	TO LEASE NO. GS-02P-LPR19236
ADDRESS OF PREMISES MERCEDITAS PONCE AIRPORT PONCE, PUERTO RICO 00715	PDN Number:

THIS AMENDMENT is made and entered into between Ports Authority Commonwealth of Puerto Rico whose address is: Luis Munoz Marín International Airport, Carolina , PR 00936-2829 hereinafter called the Lessor, and the **UNITED STATES OF AMERICA**, hereinafter called the Government:

WHEREAS, the parties hereto desire to amend the above Lease (1) to correct the rates per square foot and the annual rental totals (2) to correct the square footage (3) to delete paragraph (A) on page (10) of the Lease.

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 as follows:

- All parties agree to amend the lease to correct the annual rates per rentable square foot and the annual rental amount included on Paragraph 1.03 of the Lease page (1) to reads as follows:

	YEARS 1-5	
	ANNUAL RENTAL RATE	ANNUAL RATE PER RSF
SHELL RENTAL RATE	\$28,241.40	\$19.40589
OPERATING COST	\$6,173.20	\$4.241874
FULL SERVICE RATE	\$34,414.60	\$23.64777

- All parties agree to amend the Lease above to correct the square footage to as identified on paragraph 1.01 page (1) of the Lease to read 1,455.3 as indicated on Exhibit (1) and made part of the Lease.
- All parties agree to amend the Lease above to delete paragraph (A) on page (10) of this Lease and replace with paragraph (1) of this Lease Amendment number (2).

This Lease Amendment contains (2) 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: _____
Date: _____

FOR THE GOVERNMENT:

Signature: _____
Name: _____
GSA, Public Buildings Service.
Date: 3-31-2016

WITNESSED FOR THE LESSOR BY:

Signature: _____
Name: _____
Title: Special Assistant Assistant Secretary
Date: 3/21/16