

2012 MAPLE HEIGHTS AUTO TITLE/JUVENILE COURT PROBATION
LEASE AMENDMENT

This LEASE AMENDMENT dated the ____ day of _____, 2012, by and between **CUYAHOGA COUNTY**, a political sub-division in the State of Ohio, its successors and assigns, hereinafter called the "County" and/or Tenant or Lessee and **MAPLE HEIGHTS COMMERCE TWO, LLC** an Ohio Limited Liability Company, 3401 Enterprise Blvd., Suite 105, Cleveland, Ohio 44122, and its successors, for Lease of certain space located at 21100 Southgate Park Blvd., Maple Heights, Ohio, 44137 (PPN #783-22-004), hereinafter called the Landlord or Lessor.

WITNESSETH:

- A. Landlord and Tenant are parties to a certain Lease, Cuyahoga Contract No. CE0600807-01 for RQ4305, authorized pursuant to Cuyahoga Resolution Number 064156, dated September 28, 2006, as amended by Resolution No. 72551, passed June 5, 2007. The Landlord leases to Tenant approximately Seven thousand Five Hundred Fifty-Two (7,552) square feet of office space which is situated on the first floor of a multi-story building located in the City of Maple Heights, County of Cuyahoga and State of Ohio at 21100 Southgate Park Blvd. The Auto Title Division utilizes approximately 2,572 ("Auto Title Space") square feet of space and the Juvenile Court Probation Office utilizes approximately 4,980 square feet of space ("Juvenile Court Space"). Said building and improvements thereon shall collectively be referred to as the "Building" or "Premises".
- B. Landlord and Tenant desire to evidence Amendment of the Lease and to exercise said five year Option offered in the Lease, all upon and subject to the terms and conditions hereinafter set forth.

NOW THEREFORE, in consideration of the foregoing and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereby agree as follows:

1. AMENDMENT OF TERM

- A) Landlord and Tenant hereby extend the Term of the Lease, pursuant to the option in Section 5. of said Lease, for a period of (60) Sixty months commencing on February 1, 2012 and expiring January 31, 2017 ("Renewal Term").
- B) The Expansion Space (Juvenile Court Space) effective date shall be the actual occupancy date of July 1, 2008 (amended Commencement Date).

2. RATE

- A) The lease Base Rent shall be \$9.99 per square foot for the first twelve (12) months of the Renewal Term (2/1/2012 through 1/31/2013) approximately \$75,444.48 annually or \$6,287.04 (\$4,145.85 Juvenile & \$2,141.19 Auto) per month.
- B) The Lease Base Rent shall be \$10.47 per square foot for the second twelve (12) months of the Renewal Term (2/1/2013 through 1/31/2014) approximately 79,069.44 annually or \$6,589.12 (\$4,345.05 Juvenile & \$2,244.07 Auto) per month.
- C) The Lease Base Rent shall be \$10.98 per square foot for the third twelve (12) months of the Renewal Term (2/1/2014 through 2/1/2015) approximately \$82,920.96 annually or \$6,910.08 (\$4,556.70 Juvenile & \$2,353.38 Auto) per month.
- D) The Lease Base Rent shall be \$10.98 per square foot for The Fourth twelve (12) months of the Renewal Term (2/1/2015 through 1/31/2016) approximately \$82,920.96 annually or \$6,910.08 (\$4,556.70 Juvenile & \$2,353.38 Auto) per month.
- E) The Lease Base Rent shall be at \$11.25 per square foot for the Fifth twelve (12) months of the Renewal Term (2/1/2016 through 1/31/2017) \$84,960.00 annually or \$7,080.00 (\$4,668.75 Juvenile or \$2,411.25 Auto) per month.
- F) Additional Base Rent in the total amount of \$81,905.30 shall be due and owing for the first ten (10) months of the Amended Term for the Juvenile Court Space only; or \$8,190.53 for each of said first ten months in addition to the Base Rent. This reflects an outstanding sum not paid under the 2007 Lease Expansion Amendment called for in section 2 B due to the amended commencement date.

3. TERMINATION

The County shall have a right to terminate this Lease (either Auto Title Space or Juvenile Court Space, or both) at any time, with six (6) months written notice to the Landlord after the thirtyth month of the Amended Renewal Term.

4. LANDLORD'S OBLIGATIONS

Landlord shall only be required to do touch-up painting in Premises. Landlord will make available to the County the use of 25 additional parking spaces in the Parking lot at the far rear of the Building for use by the County adjacent to the rear entrance to the SouthGate Neighborhood Family Service Center for use by County employees and/or its agents.

5. DISCRIMINATION

The County and Lessor agree that in the performance of this contract, there shall be no discrimination against any person because of sexual orientation, race, color, sex, religion, or national origin as provided in Title VII of the Civil Rights Act, the Laws of the State of Ohio, County of Cuyahoga, City of Cleveland and any such violations thereof shall be deemed a breach of this Agreement. IAC further acknowledges that all County contracts are subject to all applicable County ordinances, including, but not limited to, The Cuyahoga County Ethics Ordinance, Cuyahoga County Inspector General Ordinance, and Cuyahoga County Board of Control, Contracting and Purchasing

Ordinance, and Lessor agrees to comply with all such ordinances as an integral part of this Agreement. Copies of all County ordinances are available on the County Council's web site at <http://council.cuyahogacounty.us/>.

6. ELECTRONIC SIGNATURE

By entering into this Agreement, the undersigned agrees on behalf of the contracting or submitting business entity, its officers, employees, subcontractors, sub grantees, agents or assigns, to conduct this transaction by electronic means by agreeing that all documents requiring county signatures may be executed by electronic means, and that the electronic signatures affixed by the county to said documents shall have the same legal effect as if that signature was manually affixed to a paper version of the document. I also agree on behalf of the aforementioned entities and persons, to be bound by the provisions of Chapters 304 and 1306 of the Ohio Revised Code as they pertain to electronic transactions, and to comply with the electronic signature policy of Cuyahoga County.

7. ENTIRE AGREEMENT

The Lease, as amended herein, contains the entire agreement between the parties hereto relating to the subject matter hereof, and shall not be amended, modified, or supplemented unless by agreement in writing signed by both Landlord and Tenant. Neither Party has made any representations or promises to the other except as expressly contained herein.

All remaining terms and conditions of the Lease Agreements, not otherwise amended, are hereby restated and affirmed by Landlord and Tenant.

IN WITNESS WHEREOF, the parties hereto have set their hands to duplicates hereof on the day and year first above written.

LESSOR:

MAPLE HEIGHTS COMMERCE TWO, LLC

BY: 

Its: 

LESSEE:

CUYAHOGA COUNTY

By: 

Edward FitzGerald
County Executive

STATE OF OHIO)
) SS;
COUNTY OF CUYAHOGA)

On this 27th day of August, 2012, before me appeared the above
CUYAHOGA COUNTY, OHIO, by Matt Carroll,
Its: Chief of Staff who acknowledged that said instrument was
signed by him/her as his/her free act and deed and as the free act and deed of Cuyahoga
County.



ANDRIA RICHARDSON
NOTARY PUBLIC
STATE OF OHIO
Recorded in
Cuyahoga County
My Comm. Exp. 7/27/15

Andria Richardson
Notary Public

#####

STATE OF OHIO)
) SS:
COUNTY OF CUYAHOGA)

On this 12th day of May, 2012, before me appeared the above named
MAPLE HEIGHTS COMMERCE TWO, LLC by William S. Soderer,
its Authorized Person who acknowledged that said entrustment was signed by him
as his free act and deed and as the free act and deed of said entity and that he is so
empowered to bind said entity.

Barbara K. Sofer

Notary Public

BARBARA K. SOFER
Notary Public, State of Ohio
Lake County
My Commission Expires March 18, 2014

ACKNOWLEDGMENT FOR LESSOR

Corporate

STATE OF OHIO)

) SS:

COUNTY OF CUYAHOGA)

BEFORE ME, a Notary Public in and for said County and State, personally appeared the above

named William J. [Signature]

A _____, By: _____

Its: [Signature] who acknowledged that s/he did sign the

foregoing instrument and that the same is the free authorized act and deed of the aforementioned

Person and

his/her free act and deed personally and as said officer of such Prose Home Commerce LLC

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at, Ohio, this 12 day

of Nov, 2012.

Barbara K. Sofer

Notary Public

BARBARA K. SOFER
Notary Public, State of Ohio
Lake County

My Commission Expires March 18, 2014

(Notarial Seal)

My Commission Expires

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) Maple Heights Commerce II, LLC	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ <input type="checkbox"/> Other (see instructions) ▶	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.) 3623 Brecksville Rd. Suite A City, state, and ZIP code Richfield, Ohio 44286 List account number(s) here (optional)	
Requester's name and address (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

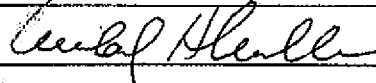
Social security number									
				-				-	
Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶ 	Date ▶ 7/3/12
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

Certified Search for Unresolved Findings for Recovery



Dave Yost
Ohio Auditor of State

Office of Auditor of State
88 East Broad Street
Post Office Box 1140
Columbus, OH 43216-
1140
(614) 466-4514
(800) 282-0370

Auditor of State - Unresolved Findings for Recovery Certified Search

I have searched The Auditor of State's unresolved findings for recovery database using the following criteria:

Contractor's Information:

Organization: Maple Heights Commerece Two LLC
Date:06/26/2012

This search produced the following list of possible matches:

1 Possible matches were found

Name/Organization	Address
Maple, Michele	2785 Barnhill Road, Suite A New Philadelphia, OH 44663

The above list represents possible matches for the search criteria you entered. Please note that pursuant to ORC 9.24, only the person (which includes an organization) actually named in the finding for recovery is prohibited from being awarded a contract.

If the person you are searching for appears on this list, it means that the person has one or more findings for recovery and is prohibited from being awarded a contract described in ORC 9.24, unless one of the exceptions in that section apply.

If the person you are searching for does not appear on this list, an initialed copy of this page can serve as documentation of your compliance with ORC 9.24(E).

Please note that pursuant to ORC 9.24, it is the responsibility of the public office to verify that a person to whom it plans to award a contract does not appear in the Auditor of State's database. The Auditor of State's office is not responsible for inaccurate search results caused by user error or other circumstances beyond the Auditor of State's control.

GOVERNMENT BUSINESS AND FUNDING CONTRACTS

In accordance with section 2909.33 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NO ASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division Web site for reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

COMPLETE THIS SECTION ONLY IF YOU ARE AN INDEPENDENT CONTRACTOR

LAST NAME		FIRST NAME		MI
HOME ADDRESS				
CITY	STATE	ZIP	COUNTY	
HOME PHONE		WORK PHONE		

COMPLETE THIS SECTION ONLY IF YOU ARE A COMPANY, BUSINESS OR ORGANIZATION

LAST NAME		FIRST NAME		MI
BUSINESS/ORGANIZATION NAME			PHONE	
23240 CHAGIN BLVD SUITE 250			216-831-3110	
BUSINESS ADDRESS				
CITY	STATE	ZIP	COUNTY	
BRACHWOOD	OH	44122	Cuyahoga	

DECLARATION

In accordance with section 2909.32 (A)(2)(b) of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

- Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
- Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
- Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
- Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
- Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List? ☐ Yes ☒ No
- Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism? ☐ Yes ☒ No

In the event of a denial of a government contract or government funding due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division Web site.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization. If I am signing this on behalf of a company, business or organization, I hereby acknowledge that I have the authority to make this certification on behalf of the company, business or organization referenced on page 1 of this declaration.

X 
APPLICANT SIGNATURE



5/12/2012
DATE

Jon Husted
Ohio Secretary

[Jon Husted & the Office](#) | [Elections & Voting](#) | [Campaign Finance](#) | [Legislation & Ballot Issues](#) | [Businesses](#) | [Records](#) | [Media Center](#) | [Publications](#)

Business Services

[General Information](#) [Business Search](#) [UCC Search](#) [Trade Mark / Service Mark Search](#) [Prepayment Accounts](#) [Help](#)

Corporate Search

Business Name
Business Name - Exact
Number Search
Agent/Contact Name
Prior Business Name
Church Name

Business Search by Name

Entity Number	Business Name	Type	Original Filing Date ▼	Expiry Date	Status	Business Location	County	State
1394183	MAPLE HEIGHTS COMMERCE TWO LLC	DOMESTIC LIMITED LIABILITY COMPANY	06/13/2003	-	Active	-	-	-

1 - 1

[Download Business Search Results](#) | [Print](#)

Total Number of filings found : 1

[New Search](#)



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/01/2003	200318201880	AMEND/ARTICLES- ORGANIZATION/DOM. LLC (LAM)	50.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

MONICA LANGLEY
600 SUPERIOR AVE., 2100
CLEVELAND, OH 44114

STATE OF OHIO**Ohio Secretary of State, J. Kenneth Blackwell**

1394183

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

MAPLE HEIGHTS COMMERCE TWO LLC

and, that said business records show the filing and recording of:

Document(s)

AMEND/ARTICLES-ORGANIZATION/DOM. LLC

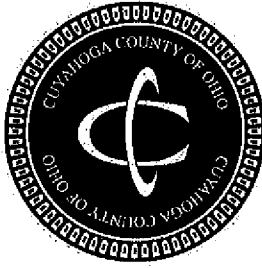
Document No(s):

200318201880

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 27th day of June, A.D.
2003.

J. Kenneth Blackwell
Ohio Secretary of State



**CUYAHOGA COUNTY
DEPARTMENT of PUBLIC WORKS**

Required Document for Award Recommendations to Cuyahoga County Executive

Please complete the following information and fax back to the Office of Procurement & Diversity.

Company Name:	MAPLE HTS Commerce Two LLC
LLC SHAREHOLDERS	
Primary Ownership:	STUART LICHTER, CHRIS SERAFIANI, BILL SERAFIANI
Title:	
Address:	23240 CHAGIN BLVD, CLEVELAND OH 44122
Phone Number:	216 - 831 - 3110
Name of Person Completing Form:	William Serafiani
Signature:	
Title:	Authorized Person

If there is more than one (1) primary owner, please complete information for that / those person(s) as well



CERTIFICATE OF LIABILITY INSURANCE

INDUREA-03 LCROTHERS

DATE (MM/DD/YYYY)

8/21/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
The DeHayes Group
6160 W. Jefferson Blvd.
Fort Wayne, IN 46804

CONTACT NAME:
PHONE (A/C, No, Ext): (260) 424-5600 **FAX (A/C, No):** (260) 422-5801
E-MAIL ADDRESS:

INSURED

Maple Heights Commerce Two, LLC
c/o Ohio Realty Advisors, LLC
3623 Brecksville Road
Richfield, OH 44286

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Ins. Co. of the State of PA	
INSURER B:	National Union Fire Ins. Co of Pittsburgh, PA	
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSTR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR VVO	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	X		GL4573188	4/15/2012	4/15/2013	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
	GENERAL AGGREGATE \$ 10,000,000						
	PRODUCTS - COMPI/OP AGG \$ 2,000,000						\$
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC						
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	ANY AUTO						BODILY INJURY (Per person) \$
	ALL OWNED AUTOS						BODILY INJURY (Per accident) \$
	HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	SCHEDULED AUTOS						\$
	NON-OWNED AUTOS						
B	<input checked="" type="checkbox"/> UMBRELLA LIAB	X		BE020111882	4/15/2012	4/15/2013	EACH OCCURRENCE \$ 25,000,000
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$ 25,000,000
	<input type="checkbox"/> CLAIMS-MADE						\$
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Re leasing space at 21100 Southgate Park Blvd Bldg 1,2; Maple Heights, OH 44137. Cuyahoga County and its employees are included as additional insured.

CERTIFICATE HOLDER

Cuyahoga County
1219 Ontario Street
Cleveland, OH 44113

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2010 ACORD CORPORATION. All rights reserved.

MAPLE HEIGHTS COMMERCE II, LLC

June 7, 2012

Mr. John Myers, Esq.
Real Estate Manager
Department of Public Works
Cuyahoga County
2100 Superior Viaduct
Cleveland, Ohio 44113

Re: Maple Heights Commerce II, LLC.

Mr. Myers:

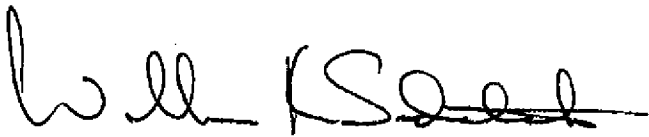
Pursuant to our discussions and negotiations, this letter is to certify that as owner and general partner for Maple Heights Commerce II, LLC; landlord to Cuyahoga County Auto Title and Juvenile Probation, I confirm that the above captioned entity does not currently have or in the past had any employees.

As such, Maple Commerce II does not hold a policy with the Ohio Bureau of Worker Compensation.

Please verify that this letter serves as ample evidence to Cuyahoga County and will not hinder in the tenant execution of Amendment to Lease.

Regards,

MAPLE HEIGHTS COMMERCE II, LLC

A handwritten signature in black ink, appearing to read 'William Sadataki', with a long horizontal line extending from the end of the signature.

William Sadataki
Owner

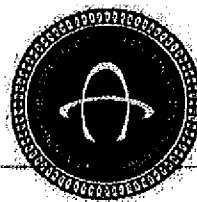
Property Search Results

Click on the PARCEL ID to select the record.

Records per page: 10 ▼

PARCEL ID	OWNERS NAME	HOUSE NUMBER	DIR STREET NAME	CITY
783-22-004	MAPLE HEIGHTS COMMERCE TWO LLC	21100	SOUTHGATE PARK	MAPLE HEIGHTS

CUYAHOGA COUNTY ASSUMES NO LIABILITY FOR DAMAGES AS A RESULT OF ERRORS, OMISSIONS OR DISCREPANCIES
CONTAINED IN THESE PAGES. PROSPECTIVE PURCHASERS SHOULD CONSULT A REAL ESTATE ATTORNEY AND PURCHASE A
TITLE INSURANCE POLICY PRIOR TO THE SALE.



**Cuyahoga County
Construction Vendor Ethics Training**

Certificate of Completion

is hereby granted to

Maple Heights Commerce Two, LLC

December 20, 2011

Cuv

RESOLUTION

Approving an amendment to Contract No. CE0600807-02 on RQ4305 by and between the Board of County Commissioners of Cuyahoga County, Ohio and Maple Heights Commerce Two, LLC, for lease of space located at 21100 Southgate Park Boulevard, Maple Heights, for use by Clerk of Courts Auto Title Bureau Satellite Office No. 3 for the Department of Central Services for the period February 1, 2007 through January 31, 2012 to change the terms, effective September 1, 2007 and for additional funds in the amount of \$781,087.34; authorizing the County Administrator to sign said amendment on behalf of the Board of County Commissioners.

BE IT RESOLVED by the Board of County Commissioners of Cuyahoga County, Ohio, that an amendment to Contract No. CE0600807-02 on RQ4305 by and between said Board and Maple Heights Commerce Two, LLC, for lease of space located at 21100 Southgate Park Boulevard, Maple Heights, for use by Clerk of Courts Auto Title Bureau Satellite Office No. 3 for the Department of Central Services for the period February 1, 2007 through January 31, 2012 to change the terms, effective September 1, 2007 and for additional funds in the amount of \$781,087.34 be, and the same is, hereby approved.

BE IT FURTHER RESOLVED that the County Administrator be, and he is, hereby authorized to sign said amendment on behalf of the Board of County Commissioners.

BE IT FURTHER RESOLVED that the Clerk of the Board be, and she is, hereby instructed to transmit a copy of this resolution together with a copy of said amendment to the Deputy County Auditor; one copy of each to Cheryl Kinzig, Senior Contract Coordinator, Office of the Clerk of the Board; three copies of each to Jay Ross, Director, Department of Central Services, with instructions to forward one complete set to Maple Heights Commerce Two, LLC; one copy of this resolution to John Myers, Real Estate Manager, Department of Central Services and Michael Kochan, Purchasing Manager, Office of Procurement & Diversity.

On Motion of Commissioner Dimora, seconded by Commissioner Jones, the foregoing resolution was duly adopted.

Ayes: Dimora, Jones, Hagan.

Nays: None.

Resolution Adopted.

Jeanne M. Schmotzer,
Clerk of the Board