



STATE OF FLORIDA
DEPARTMENT OF MANAGEMENT SERVICES
Agreement for Assignment of Lease

From: Lease No.: _____ **To: Lease No.:** _____

The Department of _____ hereby assigns all right, title and interest in and to that certain lease agreement number _____ dated _____ between the _____, and _____, Lessor, to the Department of _____, effective _____, **20**_____.

This assignment is hereby agreed to by the undersigned Lessor, all terms and conditions of the original lease to remain the same.

Cooperation with the Inspector General

Pursuant to section 20.055(5), Florida Statutes, contractor and any subcontractors understand and will comply with their duty to cooperate with the inspector general in any investigation, audit, inspection, review, or hearing.

Please take notice that the above referenced Lease Number _____ has been changed to Lease Number _____.

From Lease No: _____

To Lease No: _____

IN WITNESS WHEREOF, the parties have executed this instrument this _____ day of _____ 20 _____

ANY MODIFICATION OF A LEASE AGREEMENT SHALL NOT BECOME LEGALLY EFFECTIVE UNTIL APPROVED/ACCEPTED BY THE DEPARTMENT OF MANAGEMENT SERVICES.

ORIGINAL SIGNATURES REQUESTED ON ALL COPIES

<p>Name of Corporation, Partnership, Trust, etc.:</p> <p>(x) _____ (SEAL) President, General Partnership, Trustee</p> <p>_____ Print or Type Name</p> <p>ATTEST: _____ (SEAL) Secretary</p>	<p>(x) _____ (SEAL) Lessor, if individual(s):</p> <p>_____ Print or Type Name</p> <p>(x) _____ (SEAL) _____ Print or Type Name</p>	
<p>LESSEE: (Assignor) STATE OF FLORIDA DEPARTMENT OF _____</p> <p>(x): _____</p> <p>_____ Print or Type Name</p> <p>_____ Print or Type Title</p>	<p>LESSEE: (Assignee) STATE OF FLORIDA DEPARTMENT OF _____</p> <p>(x): _____</p> <p>_____ Print or Type Name</p> <p>_____ Print or Type Title</p>	
<p><i>APPROVED AS TO CONDITIONS AND NEED THEREFORE DEPARTMENT OF MANAGEMENT SERVICES</i></p> <p>(x) _____ Chief, Real Property Administrator Division of Real Estate Development and Management</p> <p>(x) _____ Director Division of Real Estate Development and Management</p> <p>Approval Date: _____</p>	<p><i>APPROVED AS TO FORM AND LEGALITY, SUBJECT ONLY TO FULL AND PROPER EXECUTION BY THE PARTIES</i></p> <p>General Counsel Department of Management Services</p> <p>By: (x) _____</p> <p>_____ Print or Type Name</p> <p>Approval Date: _____</p>	<p><i>APPROVED AS TO FORM AND LEGALITY, SUBJECT ONLY TO FULL AND PROPER EXECUTION BY THE PARTIES</i></p> <p>General Counsel Dept. of _____</p> <p>By: (x) _____</p> <p>_____ Print or Type Name</p> <p>Approval Date: _____</p>

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