Name:										
Company: Address:										
City:	7									
State: Phone:	Zip:									
Fax:										
				Above th	us Line fo	or Offici	al Use Only	·		
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	<b>MEMOR</b>	ANDU	IM AND NO	TICE OF L	EASE	AGI	REEME	ENT		
THIS no	otice is ente	ered into	o and provide	d by						
			o ana proviac	a oʻj						
"Lessor(s) and _				,	"Lesse	ee(s)",	on the d	ate stated	l below.	
FOR V acknowledged,	ALUABLE Lessor(s) le	CON case to	SIDERATION Lessee(s) cei	I, the receip tain real prop	t and perty o	suffic wned	ciency o by Les	of which or(s) and	ı is he l locate	re d
FOR V acknowledged,	ALUABLE Lessor(s) le	CON case to	SIDERATION Lessee(s) cei	I, the receip	t and perty o	suffic wned	ciency o by Les	of which or(s) and	ı is he l locate	re d
FOR V acknowledged,	ALUABLE Lessor(s) le	CON case to	SIDERATION Lessee(s) cei	I, the receip tain real prop	t and perty o	suffic wned	ciency o by Les	of which or(s) and	ı is he l locate	rel 1
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FOR V acknowledged, follows: SEE AT The le	ALUABLE Lessor(s) le County TACHED I ase is f	C CONS ease to 7, EXHIBI	SIDERATION Lessee(s) cer T period of	I, the receip tain real prop , such re	t and perty o eal proj (	suffic wned perty	ciency o by Les being mo years	of which or(s) and ore fully comm	i is he l locateo describe	rei d d
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FOR V acknowledged, follows: SEE AT The leas and Lessee(s) da IN WITH Lessor	ALUABLE Lessor(s) le County TACHED I ase is f e is subject ted the	E CONS ease to 7, EXHIBI For a to the t day	SIDERATION Lessee(s) cer T period of and endin erms and cond of	I, the receipt tain real prop , such re g on litions of that day of Lessee	t and perty o eal proj ( certain	suffic wrned perty ) lease 	ciency of by Les being mo years agreeme	of which or(s) and ore fully comm 	i is he l locate describe encing	re d
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STATE OF NEW YORK COUNTY OF \_\_\_\_\_ On the \_\_\_\_\_\_ day of \_\_\_\_\_\_ in the year \_\_\_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

> Notary Public Printed Name: \_\_\_\_\_

My Commission Expires:

STATE OF NEW YORK COUNTY OF \_\_\_\_\_

On the \_\_\_\_\_\_ day of \_\_\_\_\_\_ in the year \_\_\_\_\_\_ before me, the undersigned, personally appeared \_\_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

> Notary Public Printed Name: \_\_\_\_\_

My Commission Expires:

Lessor Name and Address		Lessee Name and Address		
Name:		Name:		
Address:		Address:		
City:		City:		
State:	Zip:	State:	Zip:	
Phone:		Phone:		

Lessor Name and Address	Lessee Name and Address	
Name:	Name:	
Address:	Address:	
City:	City:	

State:	Zip:	State:	Zip:
Phone:		Phone:	