

TARRANT COUNTY
STATE OF TEXAS

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**RESOURCE CONNECTION
LEASE AGREEMENT AMENDMENT NO. 10
AUTISTIC TREATMENT CENTER, INC. D/B/A
AUTISM TREATMENT CENTER**

BY THIS AMENDMENT NO. 10, Court Order 112984 dated the 12th day of June, 2012, by and between Tarrant County, hereinafter referred to as LESSOR, and Autistic Treatment Center, Inc. d/b/a Autism Treatment Center, hereinafter referred to as LESSEE, is hereby amended and supplemented in the following respects:

1. Page 14, Exhibit "C" LEASE TERM
The Commencement Date of the Amended Lease shall be October 1, 2024. The term of the lease shall begin on the Commencement Date. At the end of the original Term this Lease shall automatically renew for a renewal term of one (1) year on the anniversary date of the original term for each of the next succeeding two (2) years following the expiration of the original Term, provided, however, that either party may terminate this Lease, during the original Term or any Renewal Term, upon the delivery of written notice delivered to the Tenant or the County setting forth the date of any such termination ("Termination Date") not later than ninety (90) days prior to any such Termination Date.
2. Page 15, Exhibit "D" RENTAL RATES
Effective October 1, 2024, the Annual Rental Rate of the Lease shall be Fifteen Dollars and Twenty-Seven Cents (\$15.27) per square foot.

Autism Treatment Center, a non-profit organization, acknowledges and agrees that it has fully, accurately, and completely disclosed all interested parties in the attached Form 1295, and has acknowledged the completeness of this disclosure by filing the Form 1295, attached as Exhibit F, with the Texas Ethics Commission as required by law.

Autism Treatment Center verifies that it does not boycott Israel and will not boycott Israel during the term of this contract. The term "boycott Israel" is as defined by Texas Government Code Section 808.001, effective September 1, 2017.

Compliance with Laws. In providing the services required by this Agreement, Tenant must observe and comply with all applicable federal, state, and local statutes, ordinances, rules, and regulations, including, without limitation, workers' compensation laws, minimum and maximum salary and wage statutes and regulations, and non-discrimination laws and regulations. Tenant shall be responsible for ensuring its compliance with any laws and regulations applicable to its business, including maintaining any necessary licenses and permits.

FISCAL FUNDING ACKNOWLEDGMENT

Notwithstanding any language to the contrary, Tenant acknowledges TARRANT COUNTY is a governmental entity and agrees TARRANT COUNTY may terminate this Agreement for future fiscal years if sufficient funding is not appropriated or allocated.

Both parties are in agreement as to the above. All other provisions of the above mentioned Lease Agreement remain in full force and effect. This Amendment is effective upon execution of this addendum.

SIGNED AND EXECUTED this 26th day of July, 2024.

COUNTY OF TARRANT
STATE OF TEXAS

By: _____
Tim O'Hare
County Judge

APPROVED AS TO FORM:



Criminal District Attorney's Office*

*By law, the Criminal District Attorney's Office may only approve contracts for its clients. We reviewed this document as to form from our client's legal perspective. Other parties may not rely on this approval. Instead, those parties should seek contract review from independent counsel.

AUTISTIC TREATMENT CENTER, INC.

By: _____
Authorized Agent

NEIL MASSEY
CHIEF OPERATING OFFICER
AUTISM TREATMENT CENTER

EXHIBIT "C"
LEASE TERM

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EXHIBIT "D"
RENTAL RATE

Effective October 1, 2024, the Annual Rental Rate of the Lease shall be Fifteen Dollars and Twenty-Seven Cents (\$15.27) per square foot.

SqFt	Autism Treatment Center
2,943	1100 Circle Drive/Suite 100

FY25 Resource Connection Occupancy Cost				
	Per SF		Annual	Monthly
Rent	\$ 8.08		\$ 23,779.44	\$ 1,981.62
Utilities	\$ 3.85		\$ 11,330.55	\$ 944.21
Common Area	\$ 1.57		\$ 4,620.51	\$ 385.04
Janitorial	\$ 1.67		\$ 4,914.81	\$ 409.57
Trash	\$ 0.10		\$ 294.30	\$ 24.53
Total	\$ 15.27		\$ 44,939.61	\$ 3,744.97

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Autistic Treatment Center, Inc.
Dallas, TX United States

Certificate Number:
2024-1192939

Date Filed:
07/26/2024

Date Acknowledged:

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Autistic Treatment Center

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

Lease Agreement Amendment #10
Rental Agreement for Nonprofit Outpatient Therapy Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



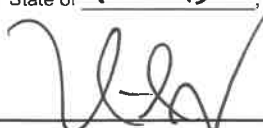
6 UNSWORN DECLARATION

My name is NEIL MASSEY, and my date of birth is 3/8/1973.

My address is 11651 PLANO RD STE. 100, DALLAS, TX 75243 USA.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in DALLAS County, State of TEXAS, on the 26 day of July, 20 24.
(month) (year)



Signature of authorized agent of contracting business entity
(Declarant)