

CONSENT OF CITY OF POMPANO BEACH
TO REVOCABLE LICENSE AGREEMENT

WHEREAS, the CITY OF POMPANO BEACH, a municipal corporation of the State of Florida, hereinafter referred to as "CITY," entered into an Amended and Restated Lease Agreement with BROWARD COUNTY, a political subdivision of the State of Florida, dated May 31, 2013, for certain property at the Annie L. Weaver Health Center and Family Success Center; and

WHEREAS, BROWARD COUNTY desires to assign part of its interest in the said Lease to HISPANIC UNITY OF FLORIDA, INC., a Florida Not For Profit Corporation, by written Revocable License Agreement; and

WHEREAS, CITY is agreeable to the License granted upon these terms; now, therefore,

1. CITY, by this agreement, consents to the Revocable License Agreement granting a License to utilize the premises only for the purposes provided in said Agreement between BROWARD COUNTY and HISPANIC UNITY OF FLORIDA, INC., a copy of which Revocable License is attached and made a part of this agreement as Exhibit "A," subject to the following terms and conditions:

A. This consent by CITY shall not act to bind CITY to perform any of the obligations of BROWARD COUNTY as may be provided in the License.

B. HISPANIC UNITY OF FLORIDA, INC. agrees to comply with all terms and conditions in the CITY's Lease Agreement with BROWARD COUNTY.

C. This consent shall not be changed orally but only by an agreement in writing signed by CITY.

DATED this _____ day of _____, 2018.

Witnesses:

CITY OF POMPANO BEACH

By: _____
LAMAR FISHER, MAYOR

By: _____
GREGORY P. HARRISON, CITY MANAGER

Attest:

ASCELETA HAMMOND, CITY CLERK

(SEAL)

Approved by:

MARK E. BERMAN, CITY ATTORNEY

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of _____, 2018, by **LAMAR FISHER** as Mayor, **GREGORY P. HARRISON** as City Manager, and **ASCELETA HAMMOND** as City Clerk of the City of Pompano Beach, Florida, a municipal corporation, on behalf of the municipal corporation, who is personally known to me.

NOTARY'S SEAL:

NOTARY PUBLIC, STATE OF FLORIDA

(Name of Acknowledger Typed, Printed or Stamped)

Commission Number

MEB/jrm
1/29/18
l:agr/manager/2018-412