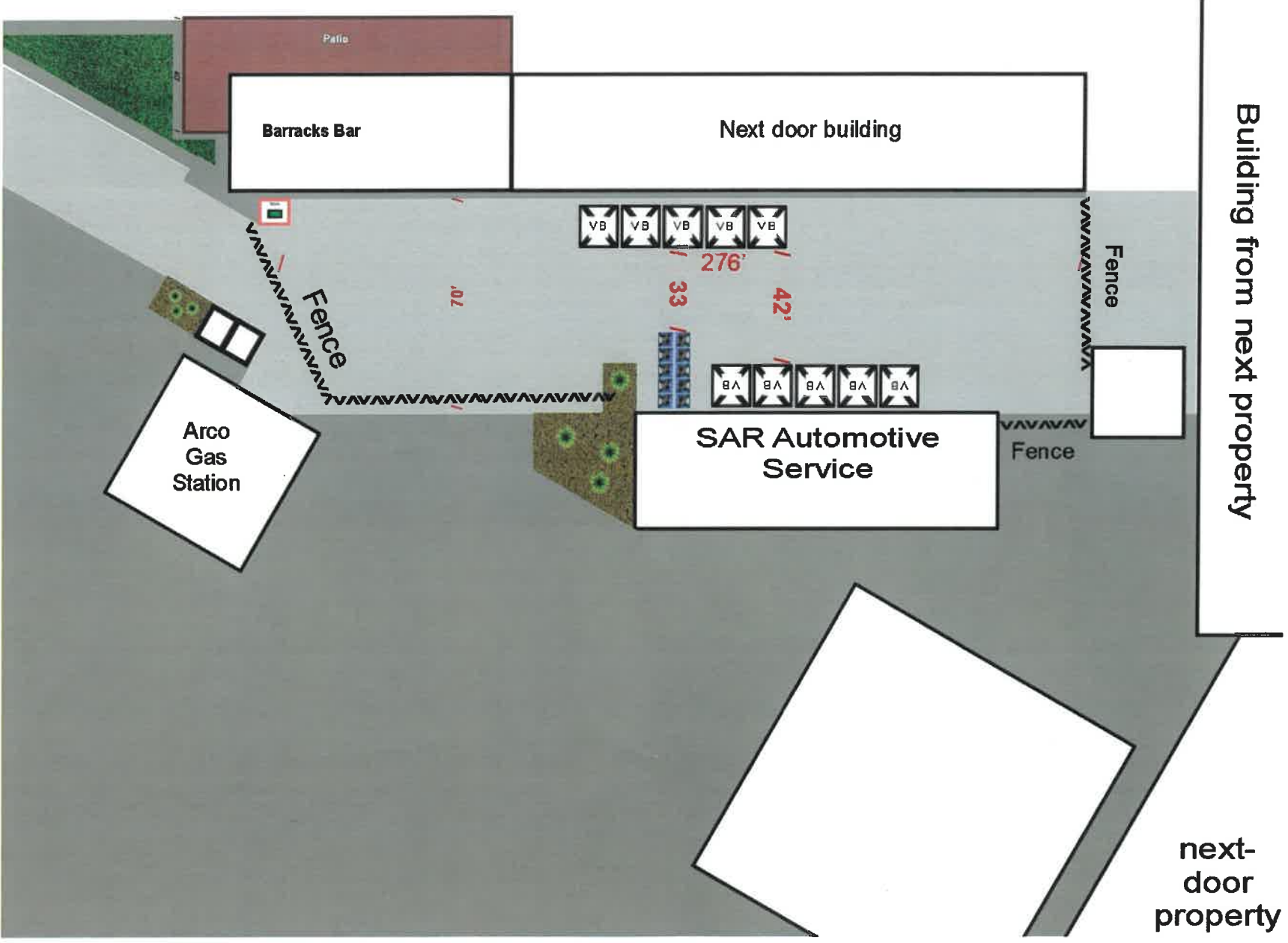






THIRD AMENDMENT TO LEASE

NAME OF PROJECT:

Canyon Plaza Business Park

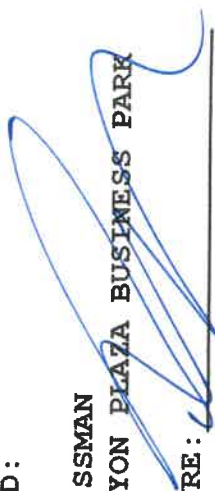
This Third Amendment to Lease Agreement ("Amendment") dated as of this 14th day of September 2017, is made by and between **JOHN WESSMAN dba: CANYON PLAZA BUSINESS PARK** (herein called "Landlord") and **KEVIN WINTERS (HEREIN CALLED TENANT)**, sets forth additional terms and conditions of that certain Lease Agreement dated for reference only 16TH day of SEPTEMBER, 2011, is made by and between **JOHN WESSMAN dba: CANYON PLAZA BUSINESS PARK** (herein called "Landlord") and **JOHN RENTSCH AND CARL LEVINE as GLMR PROPERTIES, LLC dba "THE BARRACKS BAR"**, and assigned to **KEVIN WINTER on the 15th of January 2013 then subsequently assigned to THE BARRACKS BAR, INC.**, (herein "Tenant"), covering those certain premises described in the Lease Agreement ("Premises"), which Premises are located at 67-625 East Palm Canyon Dr Suite C7 & C8 (Plus Patio), Cathedral City, Ca 922234 in the commercial property known as Canyon Plaza Business Park ("Shopping Center"), where indicated on Exhibit "A" attached to the original lease. As used in this amendment, the term "Lease" shall mean and refer to the Lease Agreement and all attached Exhibits and Addenda, as modified and amended by this amendment.

The Lease Agreement shall be modified to include the following provisions:

1. **LANDLORD CONSENT:** Landlord consents to the special use permit (see attached Exhibit 09.17.A) for October 27, 2017.
2. **EVENT SECURITY DEPOSIT:** For above consent tenant places with landlord a security deposit of \$5,000.00 (Five Thousand and no/100 Dollars). Security deposit to be refunded within 15 days following closure of event, less any damages.
3. **INSURANCE:** Additional insurance with Liquor Liability coverage naming the landlord and property management shall be obtained and in force during the event.
4. **OTHER TERMS:** Notwithstanding anything contained herein to the contrary, all other terms and conditions of the Lease shall remain in full force and effect.

LANDLORD:

JOHN WESSMAN
dba CANYON PLAZA BUSINESS PARK

SIGNATURE: 

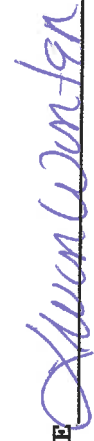
PRINT NAME: _____

ITS: _____

DATE: 9/14/17

TENANT:

THE BARRACKS BAR, INC

SIGNATURE: 

PRINT NAME: THE BARRACKS INC

ITS: OWNER

DATE: 9.14.17

To: Neighbors of the Barracks Bar
From : The Barracks Bar
RE: October 27th Parking Lot Event 5pm-1:30 am

PSLOD, The Barracks Bar and the City of Cathedral City
Would like to host the first Leather Pride Parking lot Party
And are requesting your permission to do so.

The event location would take place in the parking lot between the Barracks Bar and AM/PM.
The event time would be 5pm-1:30am with set up commencing the morning of October 27th.

Please Sign and Date below so we know you are on board and have your permission to bring
this already successful event to our city

Business name:

FLOORING INNOVATIONS

Authorized Signature



To: Neighbors of the Barracks Bar
From : The Barracks Bar
RE: October 27th Parking Lot Event 5pm-1:30 am

PSLOD, The Barracks Bar and the City of Cathedral City
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Please Sign and Date below so we know you are on board and have your permission to bring
this already successful event to our city

Business name:

ARCO AM/PM 42631

Authorized Signature



To: Neighbors of the Barracks Bar
From : The Barracks Bar
RE: October 27th Parking Lot Event 5pm-1:30 am

PSLOD, The Barracks Bar and the City of Cathedral City
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Please Sign and Date below so we know you are on board and have your permission to bring
this already successful event to our city

Business name:

Nardi Global

Authorized Signature

Hotami Global

09.12.2017

Stephen,

the issue is we are now a separate entity and they **do not** need our permission. Our property is no longer part of that section that encompasses, AM/PM, The Barracks, The car rental place, etc.. It's nice that they are asking for our permission and want to be good neighbors but they don't need it and we do not want to sign a document stating it's okay because we don't really have a say in what they do. If they want to be good neighbors and have an attendant keeping their patrons from parking in our place that would be awesome.

If the City is insisting that we sign something, they need to be informed that our property no longer belongs to Weisman (spelling may not be correct). I believe the section near McDonald's all the way to the car dealership was all one suite of buildings, that's why we all have the same address with different suite numbers. So when we got our property we now have the middle section, but it no longer is part of the original mass, so no permission is needed.

[Quoted text hidden]

ANGELVIEW

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and Adults with Disabilities

ALL OF THE ITEMS RECEIVED AS DONATIONS
ARE SOLD IN ONE OF OUR RESALE STORES.
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NEEDED FUNDS THAT ENABLE US TO
CONTINUE AND EXPAND OUR HIGH QUALITY
PROGRAMS AND SERVICES FOR CHILDREN
AND ADULTS WITH DISABILITIES.

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BOOKS
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MISCELLANEOUS ITEMS
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reporting of sales tax.

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www.angelview.org

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ACCOUNTING - PROGRAMS
760-329-6471

STATION



EMPLOYERS PREFERRED INS. CO.
Stock Company

Insurance Policy

Policy Number	From	Policy Period To
EIG 1707244 04	06/26/2017	06/26/2018
12:01A.M. Standard Time at the address of the Insured as stated herein		

Transaction

RENEWAL DECLARATIONS

NCCI Carrier # 31283	WCIRB CARRIER# 00920	PRIOR POLICY NUMBER EIG170724403
1. Named Insured and Address		
THE BARRACKS BAR INC DBA BARRACKS BAR 21 VISTA MIRAGE WAY RANCHO MIRAGE CA 92270		
Agent		
CENNAIRUS, LLC PO BOX 25897 SARASOTA, FL 34277		
6556000		
Customer #	Carrier # 31283	FEIN # 464273278
Telephone: 9419279500		Risk ID #
		Entity of Insured CORPORATION

Additional Locations:

The Policy Period is from 06/26/2017 to 06/26/2018 12:01 a.m. Standard Time at the Insured's mailing address.

A. Workers Compensation Insurance: Part ONE of the policy applies to the Workers Compensation Law of the states listed here: CA

B. Employers Liability Insurance: Part TWO of the policy applies to work in each state listed in Item 3A.
The limits of our liability under Part TWO are:

Bodily Injury by Accident	\$ 1,000,000	each accident
Bodily Injury by Disease	\$ 1,000,000	policy limit
Bodily Injury by Disease	\$ 1,000,000	each employee

C. Other States Insurance: Part THREE of the policy applies to the states, if any, listed here:
All states except ND, OH, WA, WY, AK, DE, HI, LA, ME, NH, RI, SD, VT, WV and states listed in item 3.A.

D. This policy includes these endorsements and schedules: See attached schedule.

The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates, and Rating Plans.
All information required below is subject to verification and change by audit.

SEE EXTENSION OF INFORMATION PAGE

Minimum Premium	\$ 750	Expense Constant	\$ 220
Assessments and Taxes	\$	Premium Discount	\$
☐ This is a Three Year Fixed Rate Policy		Total Estimated Annual Premium	\$ 7,908

Premium Adjustment Period: ☒ Annual; ☐ Semiannual; ☐ Quarterly; ☐ Monthly

Countersigned this Day of

Issued Date: 05/26/2017

Issuing Office **EMPLOYERS PREFERRED INS. CO.**
412 PARKCENTER BLVD., SUITE 320
BOISE, ID 83706-7565

Issued Date 05/26/2017
IC990630 (5/98 Ed.)

INSURED COPY

Page 1 of 2

Authorized Representative



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/01/2017

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 have ADDITIONAL INSURED provisions or 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	CONTACT NAME: Brittany Johnson	
Kaliff Insurance	PHONE (A/C No. Ext): (210)829-7634	FAX (A/C No.): (210)829-7636
2009 NW Military Hwy	E-MAIL ADDRESS: brittany@kaliff.com	
San Antonio	TX 78213	NAIC #
INSURED	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Certain Underwriters at Lloyds/Kaliff	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES	CERTIFICATE NUMBER: CL179119083	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.		

INSR LTR	TYPE OF INSURANCE	ADDL SUBR	INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY			MKI00138	09/08/2017	09/08/2018	EACH OCCURRENCE \$ 1,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	☐ AD&D \$10,000/\$50,000						MED EXP (Any one person) \$ EXCLUDED
A	GEN'L AGGREGATE LIMIT APPLIES PER:			MKI00138	09/08/2017	09/08/2018	PERSONAL & ADV INJURY \$ 1,000,000
	☒ POLICY ☐ PRO-JECT ☐ LOC						GENERAL AGGREGATE \$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY			MKI00138	09/08/2017	09/08/2018	LIQUOR LIABILITY \$ 1,000,000
	ANY AUTO OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	☒ SCHEDULED AUTOS Hired AUTOS ONLY						BODILY INJURY (Per person) \$
	UMBRELLA LIAB						BODILY INJURY (Per accident) \$
	EXCESS LIAB						PROPERTY DAMAGE (Per accident) \$
	DED RETENTION \$						EACH OCCURRENCE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						AGGREGATE \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						PER STATUTE 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 (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
ADDITIONAL INSURED AS RESPECTS TO INSURED'S OPERATIONS: The Barracks

CERTIFICATE HOLDER

CANCELLATION

The Barracks 67625 E. Palm Canyon Drive Cathedral City	CA 92234	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 <i>Matthew N. Kelly</i>		

ACORD 25 (2016/03)

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