

AMENDMENT TO AGREEMENT

THIS AMENDMENT TO AGREEMENT, made and entered into on this _____ day of, 2015, by and between **LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT**, an urban county government pursuant to KRS Chapter 67A, and located at 200 East Main Street, Lexington, Fayette County, Kentucky 40507 (hereinafter referred to as "Government"), and **THE HOPE CENTER**, a Kentucky non-profit corporation pursuant to KRS Chapter 273, and whose post office address is 360 West Loudon Avenue, Lexington, Kentucky 40508 (hereinafter referred to as "SUBRECIPIENT".)

WHEREAS, Government and Grantee entered into an Agreement dated April 25, 2013 ("Agreement"), in which the SUBRECIPIENT was allocated \$200,000 in federal Community Development Block Grant Program funds (CFDA # 14.218) as provided by the 2013 Consolidated Plan for the rehabilitation of the Hope Center Shelter located at 360 West Loudon Avenue for homeless persons;

WHEREAS, SUBRECIPIENT has requested additional time to complete rehabilitation;

WHEREAS, the Loan Agreement provides for all amendments to be in writing executed by Government and Grantee;

NOW, THEREFORE, in consideration of the foregoing and mutually agreed upon promises, conditions, and covenants hereinafter set forth, the parties hereto agree as follows:

1. Article II, "TIME OF PERFORMANCE," shall be amended in its entirety to read as follows:

"The SUBRECIPIENT agrees to complete the rehabilitation of the Hope Center Shelter located at 360 West Loudon Avenue no later than March 31, 2016. The SUBRECIPIENT agrees to operate the facility as a shelter for homeless persons through June 30, 2026."

3. In all other respects, except as specifically modified herein, the terms of the Agreement dated April 25, 2013, shall remain in full force and effect with respect to the provisions outlined therein.

IN WITNESS WHEREOF, the parties executed this Amendment at Lexington, Kentucky, the day, month, and year above written.

**LEXINGTON-FAYETTE URBAN COUNTY
GOVERNMENT**

Jim Gray, Mayor

ATTEST:

Clerk of Urban County Council

THE HOPE CENTER

BY: _____
Signature of Authorized Official

Printed Name