

STATE OF GEORGIA
COUNTY OF DEKALB

CONSENT TO SUBLEASE AND MODIFICATION OF FACILITIES
FOR DEKALB COUNTY CONTRACT NO. 13-800971

THIS CONSENT, made and entered into this ____ day of _____, 2026, by **DEKALB COUNTY**, a political subdivision of the State of Georgia, (hereinafter referred to as "Lessor" or "County"), by and among DeKalb Community Service Board, d.b.a. Claratel Behavioral Health, a public agency and instrumentality of the State of Georgia, (hereinafter referred to as "Lessee"), and Genoa Healthcare LLC, a Pennsylvania limited liability company (hereinafter referred to as the "Sublessee").

WHEREAS, County and Lessee previously entered into a certain Lease Agreement effective January 31, 2013 (Contract No. 13-800971), as amended by that certain Amendment No. 1 dated July 26, 2022, for the lease of various premises, hereinafter referred to collectively as the "Lease";

WHEREAS, Lessee desires to sublease portions of the following leased premises to Sublessee: a) approximately 269 square feet of space located in the building known as Kirkwood Mental Health Center, 23 Warren Street, Atlanta, GA 30317; b) approximately 308 square feet of space located in the building known as Clifton Springs Mental Health Center, 3110 Clifton Springs Road, Suite B, Decatur, Georgia 30034; and c) approximately 280.5 Square feet of space in the building known as Winn Way Mental Health Center, 445 Winn Way, Suite 220, Decatur, GA 30030 (hereinafter collectively referred to as "the Subleased Properties"). The Subleased Properties are more particularly described in Exhibits A, C, and E, Site Plans, attached hereto and incorporated herein by reference; and

WHEREAS, Section 26 of the Lease, Succession of Interests Under Lease, requires Lessee to receive the County's Written Consent to sublease the leased property or any portion thereof; and

WHEREAS, Sublessee desires to make modifications and alterations to the Subleased Properties, at no cost to the County, for use as pharmacies serving the needs of the patients of

Claratel. Said modifications are more particularly described in Exhibits B, D, and F, Improvements to the Subleased Premises, attached hereto and incorporated herein by reference; and

WHEREAS Section 22 of the Lease, Modifications and Alterations to the Premises, requires Lessee to receive Lessor's prior written approval before undertaking any structural modifications, alterations, or improvements of any kind; and

WHEREAS, Sublessee desires to accept said Sublease upon the terms and conditions set forth in the Sublease Agreement; and

WHEREAS, Lessee understands and agrees to provide any amendments to its Sublease with Sublessee so that Lessor may maintain in its files; and

WHEREAS, Lessee understands and agrees that it remains bound by the Lease Agreement and assures Lessor that its Sublease with Sublessor will not affect or disturb the rights, interest and obligations belonging to Lessor pursuant to the Lease.

WHEREAS, the County's Governing Authority approved this Consent to Sublease and consent for modification of facilities on _____ as Agenda Item No. _____; and

NOW THEREFORE, for and in consideration of the premises and covenants herein contained, and of the terms and conditions herein set forth, County hereby consents to the sublease of the Subleased Properties by DeKalb Community Service Board to Genoa Healthcare LLC, and to the modifications to Subleased Properties as identified in the exhibits incorporated herein.

This consent to sublease and modification is intended to satisfy all provisions of the Lease Agreement requiring the County's consent to or approval of the proposed sublease to Genoa Healthcare LLC, and the County's consent to or approval of the proposed modifications of the premises by Genoa Healthcare LLC, including, but not limited to, Sections 26 and 22 of the Lease Agreement.

(Signatures Follow on Next Page)

IN WITNESS WHEREOF, the parties hereto have caused this Consent to Sublease and Modification to be executed the day and date hereinabove written.

LESSEE:
DeKalb Community Service Board dba
Claratel Behavioral Health

By: _____
Signature (SEAL)

Name (Typed or Printed)

Title

Federal Tax Identification Number

LESSOR:
DeKalb County, Georgia

(SEAL)
LORRAINE COCHRAN-JOHNSON
Chief Executive Officer
DeKalb County, Georgia

ATTEST:

BARBARA SANDERS-NORWOOD, CCC, CMC
Clerk of the Chief Executive Officer and
Board of Commissioners of
DeKalb County, Georgia

Date

APPROVED AS TO FORM:

Shaheem Williams
Counsel for DeKalb CSB

APPROVED AS TO FORM:

County Attorney Signature

County Attorney Name (Typed or Printed)

APPROVED AS TO SUBSTANCE:

SUBLESSEE: Genoa Healthcare LLC

By: _____
Signature (SEAL)

Name (Typed or Printed)

Title

Federal Tax Identification Number

ATTEST:

Name (Typed or Printed) (Seal)

Title

Exhibit A

Site Plan

Kirkwood Mental Health Center, 23 Warren Street, Atlanta, GA 30317

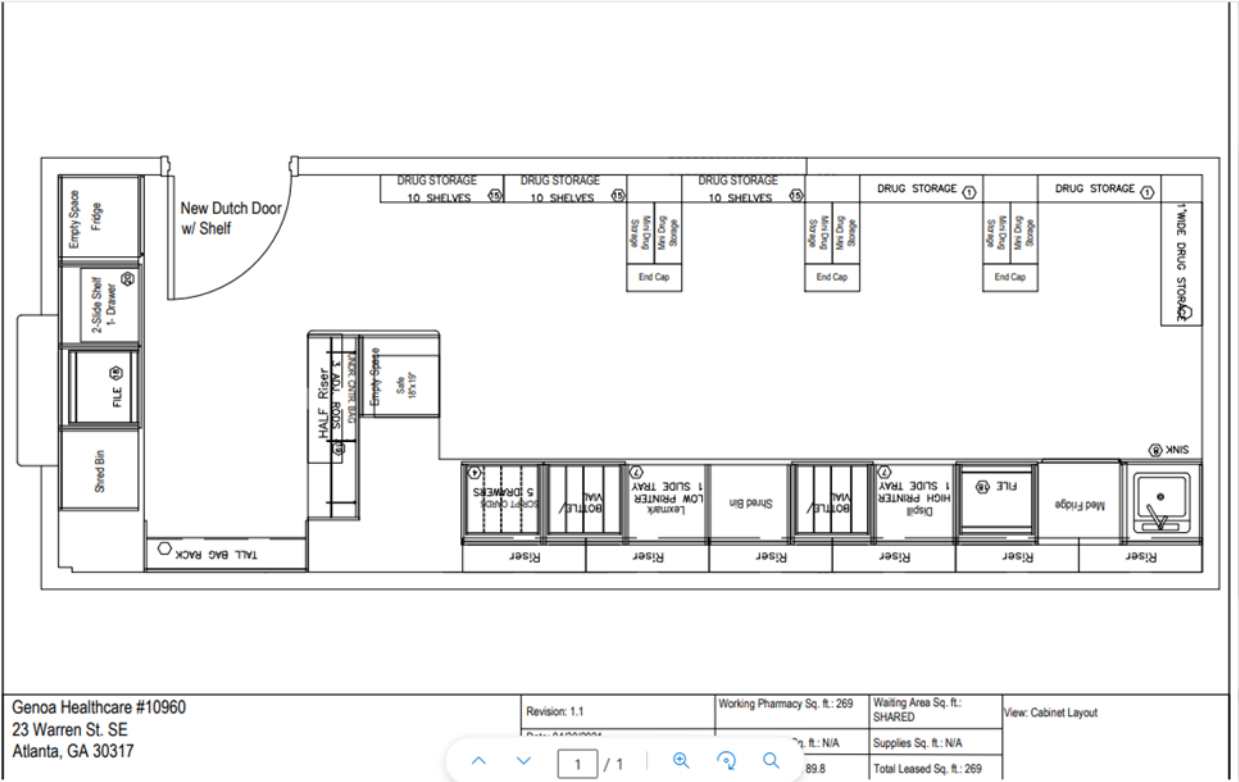


Exhibit B

Improvements to Subleased Premises

Kirkwood Mental Health Center, 23 Warren Street, Atlanta, GA 30317

- Create lobby access
- Build counter space
- Extend phone and electrical as required
- Extend plumbing as required or acquire Board of Pharmacy variance
- Add security system or extend current security system to conform to Board of Pharmacy requirements
- Acquire necessary building permits
- Bring space into conformity with all Board of Pharmacy Rules and Regulations

Exhibit C

Site Plan

Clifton Springs Mental Health Center, 3110 Clifton Springs Road, Suite B, Decatur,
Georgia 30034

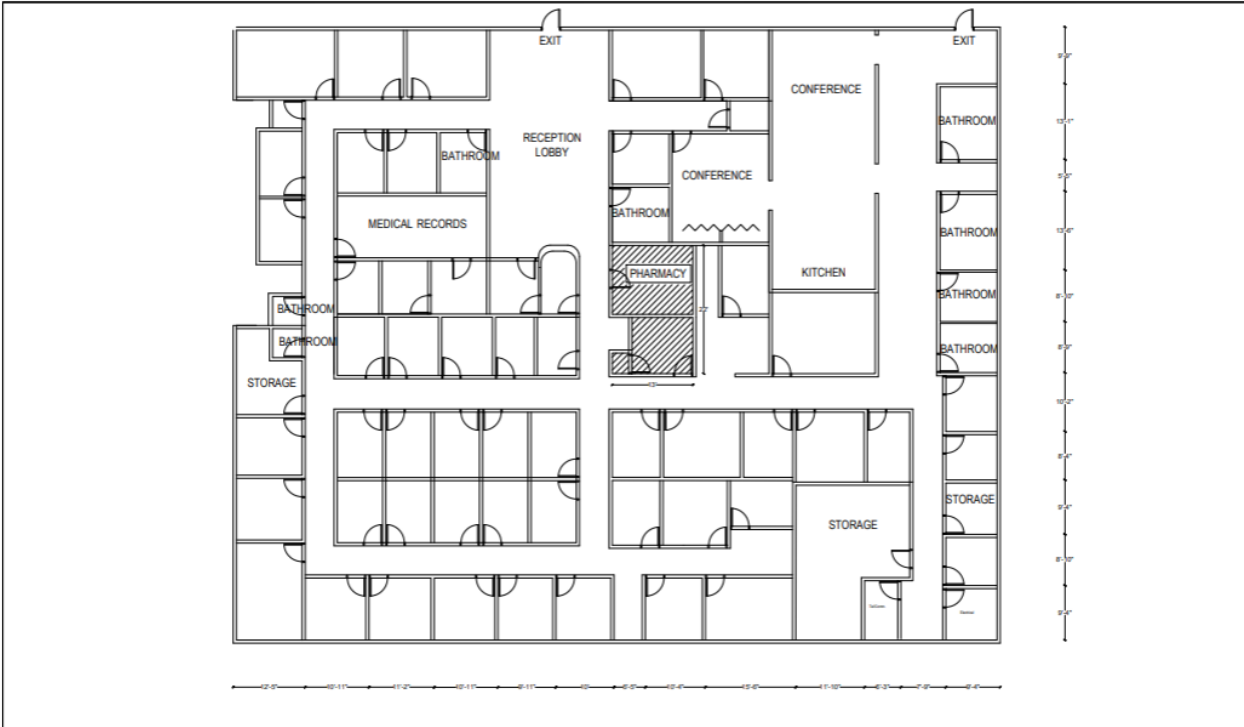


Exhibit D

Improvements to Subleased Premises

**Clifton Springs Mental Health Center, 3110 Clifton Springs Road, Suite B, Decatur,
Georgia 30034**

- Create lobby access
- Build counter space
- Extend phone and electrical as required
- Extend plumbing as required or acquire Board of Pharmacy variance
- Add security system or extend current security system to conform to Board of Pharmacy requirements
- Acquire necessary building permits
- Bring space into conformity with all Board of Pharmacy Rules and Regulations

Exhibit E

Site Plan

Winn Way Mental Health Center, 445 Winn Way, Suite 220, Decatur, GA 30030

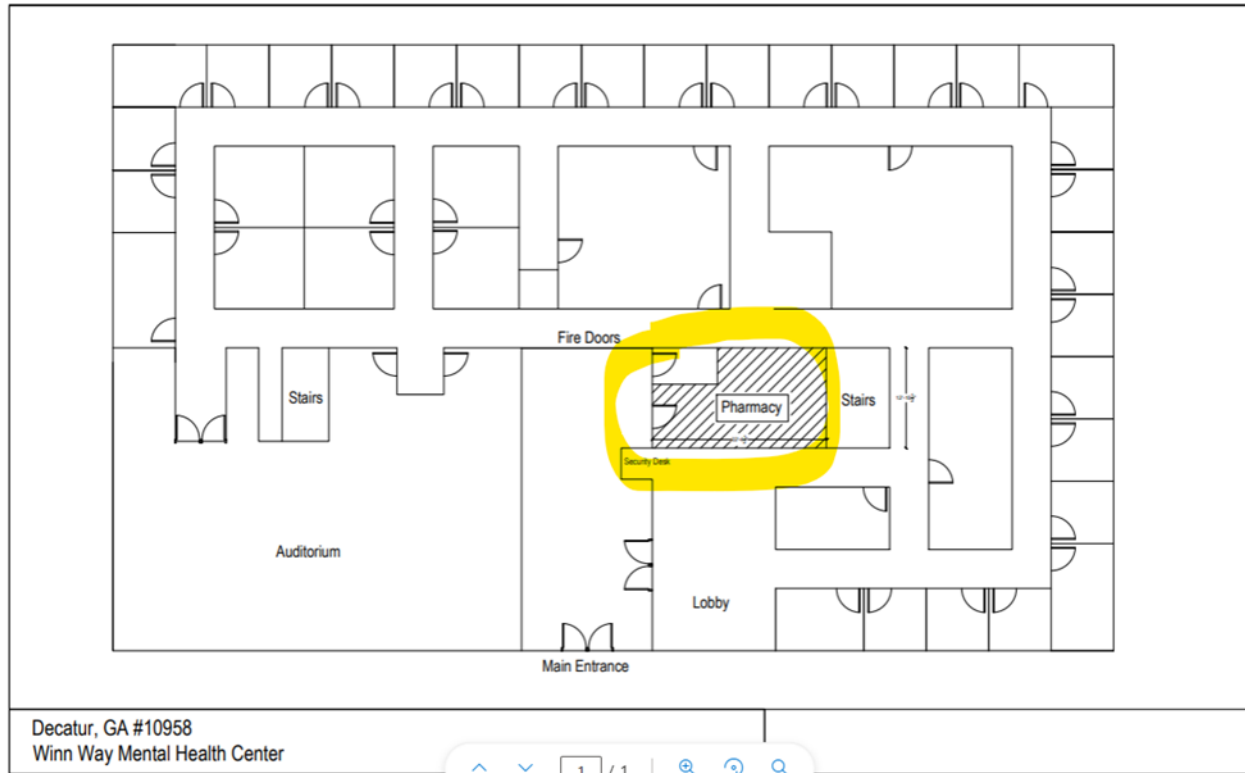


Exhibit F

Improvements to Subleased Premises

Winn Way Mental Health Center, 445 Winn Way, Suite 220, Decatur, GA 30030

- Create lobby access
- Build counter space
- Extend phone and electrical as required
- Extend plumbing as required or acquire Board of Pharmacy variance
- Add security system or extend current security system to conform to Board of Pharmacy requirements
- Acquire necessary building permits
- Bring space into conformity with all Board of Pharmacy Rules and Regulations