



1 conditions in Agreement No. 32983 are ratified and confirmed and shall remain in full force  
2 and effect.

3 IN WITNESS WHEREOF, the Parties have caused this document to be duly  
4 executed with all formalities required by law as of the date first stated above.

CENTRAL PARKING SYSTEM, INC., a  
Tennessee corporation

7 March 28, 2017

By [Signature]  
Name Robert [unclear]  
Title President of Vehicle Operations

9 \_\_\_\_\_, 2017

By \_\_\_\_\_  
Name \_\_\_\_\_  
Title \_\_\_\_\_

"Manager"

CITY OF LONG BEACH, a municipal  
corporation

14 March 31, 2017

By [Signature]  
City Manager

EXECUTED PURSUANT  
TO SECTION 301 OF  
THE CITY CHARTER.

Assistant City Manager

"City"

17 This Third Amendment to Agreement No. 32983 is approved as to form on  
18 March 30, 2017.

CHARLES PARKIN, City Attorney

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By [Signature]  
Deputy

OFFICE OF THE CITY ATTORNEY  
CHARLES PARKIN, City Attorney  
333 West Ocean Boulevard, 11th Floor  
Long Beach, CA 90802-4664

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California FLORIDA )  
County of BROWARD )

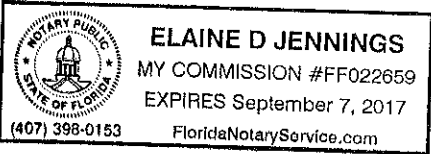
On 3/28/17 before me, ROBERT M. TOY, PRESIDENT OF URBAN OPERATIONS US  
Date Here Insert Name and Title of the Officer

personally appeared ROBERT M. TOY  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Elaine D Jennings  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document  
Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_  
Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_

Capacity(ies) Claimed by Signer(s)  
Signer's Name: \_\_\_\_\_ Signer's Name: \_\_\_\_\_  
 Corporate Officer — Title(s): \_\_\_\_\_  Corporate Officer — Title(s): \_\_\_\_\_  
 Partner —  Limited  General  Partner —  Limited  General  
 Individual  Attorney in Fact  Individual  Attorney in Fact  
 Trustee  Guardian or Conservator  Trustee  Guardian or Conservator  
 Other: \_\_\_\_\_  Other: \_\_\_\_\_  
Signer Is Representing: \_\_\_\_\_ Signer Is Representing: \_\_\_\_\_