

Information:

Drawer: Accounts Payable - Invoices  
Vendor Number: 1565105  
Vendor Name: GS MTG SEC CORP II COMM MG P-T  
Invoice Number: PAYMENT#1  
Invoice Date: 10/29/18  
PO Number: B0361218  
Check Number: 0244523  
Check Amount: \$ 14,559.31  
Check Date: 11/14/2018  
Department ID: 00837  
Reviewer Name:  
Voucher Number: V0542170  
Redaction Type: None  
Document Type: AP Invoice-3 Way/Pre-Approved

Document Below

#1565105

Corporate Lakes I  
2525 Cabot Drive  
Lisle, IL 60532  
tel 630 932 1234

**NAI Hiffman**

## RENT STATEMENT

College of DuPage  
425 Fawell Boulevard  
Attn: VP & Treasurer  
Glen Ellyn, IL 60137

Date:
10/29/2018

Date	Code	Description	Charges	Payments	Amount Due
11/1/2018	RENT	Rent	\$ 13,746.25		\$ 13,746.25
11/1/2018	CAM	CAM	\$ 14.46		\$ 14.46
11/1/2018	RET	Real Estate Taxes	\$ 798.60		\$ 798.60
Total Due					\$ 14,559.31

NEW  
→ Please Remit Payment To:  
~~CIII GSMS07-GG10 Corporate Lakes I~~  
c/o NAI Hiffman Asset Mgmt  
One Oakbrook Terrace, Suite 400  
Oakbrook Terrace, IL 60181

B.P.O. #361218

Payment #1

Payable Upon Receipt

**AP VERIFIED**

**11/12/18 - MARIA ZERRUDO**

Manual check

y Brian W. Caputo

Brian W. Caputo, Ph.D., C.P.A.  
Vice President/CFO  
Administrative Affairs

## Certificate of Insurance Information

### Corporate Lakes I, LLC

**Owner:**

U.S. Bank National Association, as Trustee, successor-in-interest to Bank of America, N.A., as Trustee, successor to Wells Fargo Bank, N.A., as Trustee, for the registered holders of GS Mortgage Securities Corporation II, Commercial Mortgage Pass-Through Certificates, Series 2007-GG10

**Managing Agent:**

NAI Hiffman Asset Management, LLC

**Additional Insured Info:**

U.S. Bank National Association, as Trustee, successor-in-interest to Bank of America, N.A., as Trustee, successor to Wells Fargo Bank, N.A., as Trustee, for the registered holders of GS Mortgage Securities Corporation II, Commercial Mortgage Pass-Through Certificates, Series 2007-GG10

C-III Asset Management, LLC (as Special Servicer for Owner)

NAI Hiffman Asset Management, LLC (Manager)

**Certificate must include:**

1. Coverage is Primary and Non-contributory.
2. The Additional insured's are included in all coverages.
2. Waiver of Subrogation in favor of the Additional insured's applies for all coverages.
3. Umbrella in excess of all liability coverage & follows form.
4. Deductible/self-insured retention shall not exceed \$10,000.
5. Commercial property/Equipment evidence of coverage for full replacement - Waiver of Subrogation applies.
6. Must delete all X, C & U exclusions.
7. Insurance company authorized in IL with a minimum A.M. Best rating A-VIII.

**Certificate should be sent to:**

Corporate Lakes I, LLC

c/o NAI Hiffman Asset Management

One Oakbrook Terrace, Suite 400

Oakbrook Terrace, IL 60181

Attn: Property Manager

Phone: 630.317.0708

Email: Maureen Zizzo-Morsello - mzizzo@hiffman.com

**Limits:**

As per the terms of your Lease



October 29, 2018

College of DuPage  
2525 Cabot Drive, Suite #201  
Lisle, IL 60532

RE: Corporate Lakes  
2525 Cabot Drive  
Lisle, IL 60532

~~Feed Vendor #1665105~~  
Signed up ACH

Dear Tenant:

Corporate Lakes has now been foreclosed and is under new ownership effective October 23, 2018. I am pleased to announce that NAI Hiffman Asset Management will be retained as the Managing Agent for the above-referenced location. The staff assigned to handle the property are Maureen Zizzo-Morsello and Jennifer Johnson and we can be reached at:

Name	Title	Office	Cell	Email
Maureen Zizzo-Morsello	Property Manager	630.317.0708	815.577.0575	mzizzo@hiffman.com
Jennifer Johnson	General Manager	630.317.0765	312.446.7522	jjohnson@hiffman.com

After 5:00 p.m. on weekdays, Saturday and Sunday, all emergency calls should be directed to 708.237.3993.

Outlined below is additional information regarding the change in management. Please note the change in address for notices and management agent under your lease at 2525 Cabot Drive, Lisle, IL.

#### Rental Payments

All current and future rental payments should be made payable to the new ownership entity and addressed as follows:

#### Payable To:

CIII GSMS07-GG10 Corporate Lakes I - Vendor Name:

#### Mail To:

CIII GSMS07-GG10 Corporate Lakes I  
c/o NAI Hiffman Asset Management  
One Oakbrook Terrace, Suite 400  
Oakbrook Terrace, IL 60181

In the event you prefer to wire transfer funds, arrangements can be made through our office. Please advise and this information will be provided.

#### Rental Statements

Rental statements are provided to our tenants as a courtesy and will be mailed to the address on your most recent statement, unless directed otherwise. Your November rent statement is attached. If you have already made your November rent payment these funds will be transferred to the new bank account and will be reflected on your account once we have everything set up.



Insurance Certificates

A new certificate of insurance will need to be provided immediately with the limit requirements per the terms of your lease and naming the following as additional insured:

U.S. Bank National Association, as Trustee, successor-in-interest to Bank of America, N.A., as Trustee, successor to Wells Fargo Bank, N.A., as Trustee, for the registered holders of GS Mortgage Securities Corporation II, Commercial Mortgage Pass-Through Certificates, Series 2007-GG10 (Owner)

C-III Asset Management LLC (Special Servicer for Owner)

NAI Hiffman Asset Management, LLC (Manager)

Please feel free to email the new certificate to Maureen Zizzo-Morsello at [mzizzo@hiffman.com](mailto:mzizzo@hiffman.com).

Correspondence

Any correspondence relative to the Lease Agreement should be directed as follows:

CIII GSMS07-GG10 Corporate Lakes I  
c/o NAI Hiffman Asset Management  
One Oakbrook Terrace, Suite 400  
Oakbrook Terrace, IL 60181

Tenant Emergency Contact List

Enclosed is the Tenant Emergency Contact List that we have on file for your company. If there are any changes, please update and return to Maureen via email. Also enclosed is a blank fillable PDF for your files.

I respectfully request your prompt attention to the above items. If you have any questions or concerns, or if I can be any assistance to you, please do not hesitate to email or call me.

On behalf of NAI Hiffman Asset Management, LLC, I look forward to a long and successful relationship.

Sincerely,

**NAI HIFFMAN ASSET MANAGEMENT, LLC**

As Manager for U.S. Bank National Association, as Trustee, successor-in-interest to Bank of America, N.A., as Trustee, successor to Wells Fargo Bank, N.A., as Trustee, for the registered holders of GS Mortgage Securities Corporation II, Commercial Mortgage Pass-Through Certificates, Series 2007-GG10 (Owner)

Maureen Zizzo-Morsello  
Property Manager

Enclosures

cc: Jennifer Johnson – General Manager

# Tenant Contact Information

Building Address: 2525 Cabot Drive, Suite 201  
Date: 6/25/2018  
Tenant Name: College of DuPage  
Tenant Address: 2525 Cabot Drive  
Lisle IL 60532  
Suite 201  
Phone Number: 630.942.2616  
Fax Number: \_\_\_\_\_

Number of Employees: 11-15  
Billing Address: 425 Fawell Boulevard  
Glen Ellyn IL 60137  
Attn: Brian Caputo  
Business Description: community college/grant funded small business assistance  
SIC Code: 8221

## General Contacts

Contact	Name	Email Address	Office Phone	Cell Phone	Home Phone	Fax Number
Office Manager	Maryellen Schlosse	schlossem473@cod.edu	630.942.2600			
Accounts Payable	Brian Caputo	caputob@cod.edu	630.942.2218			
Tenant Service Requests	Rita Haake	haaker@cod.edu	630.942.2616			
Other Admin Issues	Rita Haake	haaker@cod.edu	630.942.2616			

## Emergency Contacts

Contact	Name	Email Address	Office Phone	Cell Phone	Home Phone	Fax Number
ER #1	Rita Haake	haaker@cod.edu	630.942.2616	630.452.7094		
ER #2	Brian Caputo	caputob@cod.edu	630.942.2218			
ER #3						

## Normal Business Hours

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
closed	7:30-5:00	7:30-5:00	7:30-5:00	7:30-5:00	7:30-5:00	closed



# Tenant Contact Information

Building Address: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

Date: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Tenant Name: \_\_\_\_\_

Tenant Address: \_\_\_\_\_

Business Description: \_\_\_\_\_

SIC Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

## General Contacts

Contact	Name	Email Address	Office Phone	Cell Phone	Home Phone	Fax Number
Office Manager						
Accounts Payable						
Tenant Service Requests						
Other Admin Issues						

## Emergency Contacts

Contact	Name	Email Address	Office Phone	Cell Phone	Home Phone	Fax Number
ER #1						
ER #2						
ER #3						

## Normal Business Hours

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

