

**AMENDMENT No. 1
TO
CONTRACT NO. 1115522**

THIS AMENDMENT by and between DeKalb County, a political subdivision of the State of Georgia (hereinafter referred to as the "County"); and AP Triton, LLC, a limited liability company organized and existing under the laws of the State of California (hereinafter referred to as "Contractor") with offices in Sacramento ~~Naples~~, California.

WITNESSETH:

WHEREAS, County and Contractor have previously entered into a certain Contract dated June 27, 2018, (DeKalb County Contract No. 1115522, hereinafter referred to as the "Agreement" or "Contract") for EMS Consulting Services with AP Triton.

WHEREAS, the County and Contractor desire to amend said Contract to extend the Contract Time and provide for the purchase of additional Services under the Scope of Work as set forth in the Scope of Work attached hereto as Attachment A, in amount not to exceed \$75,000 ~~\$85,000.00~~; and,

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged and in consideration of the mutual promise and undertakings contained herein, the parties hereto do hereby agree and consent to the following:

I. THE CONTRACT IS HEREBY AMENDED AS FOLLOWS:

A. Attachment A, Phase 1 Ambulance Feasibility Study, Scope of Work, page 11, Delete in its entirety and add the revised provision:

ATTACHMENT A

PHASE 2, SCOPE OF WORK AND COST PROPOSAL

1. The following Scope of Work is to be completed by AP Triton as follows:
 - a) Shall develop a DRAFT Request for Proposal (RFP) which will be used

for solicitation to private EMS ambulance providers.

- b) Will assist the DeKalb County Fire Rescue with answering any technical questions during the RFP process that are within the scope of the RFP, final report or professional expertise of the consultants. Any legal and/or purchasing questions shall be referred to respective departments within DeKalb County.

~~c) Shall assist the DeKalb County Fire Rescue in developing a contract with the successful contractor for the provision of EMS ambulance services, once the successful respondent has been selected and notified.~~

- 2. The total cost for the development of the Scope of Work as outlined above is ~~\$75,000~~ \$85,000.

- a) Billing will be ~~as follows and will be~~ due 30 days from date of receipt of 07.13.19 letter to Fire Chief D. Fullum from CEO M. DuRee ~~invoice~~:
 - ~~50% (\$42,500) at time of contract award~~
 - ~~50% (\$42,500) at completion of contract~~
- b) Travel expenses (airfare, lodging, meals, etc.): Actual costs, for in-person meetings pre-approved by the County, will be billed separately and shall be due 30 days from date of invoice. And,

- B. to extend **ARTICLE I. CONTRACT TIME** to fully complete the Work by December 31, 2019.

II. **NO ADDITIONAL MODIFICATION.** All other terms and conditions of the Contract remain unchanged and in full force and effect. The terms and conditions contained in this Amendment No. 1 shall govern over any inconsistent terms and conditions contained in the Agreement.

[SIGNATURES CONTINUE ON FOLLOWING PAGE]

IN WITNESS WHEREOF, the parties hereto have set their hands and caused their seals to be affixed hereupon in three (3) counterparts, each to be considered as an original by their authorized representatives, on this ____ day of _____, 20 .

AP TRITON

DEKALB COUNTY, GEORGIA

By: [Signature] (SEAL)

Signature

Michael Dufree

Name (Typed or Printed)

CEO/Managing Partner

Title

May 6, 2019

Date

by Dir. (SEAL)

MICHAEL L. THURMOND

Chief Executive Officer

DeKalb County, Georgia

Date

ATTEST:

[Signature]

Signature

Valerie J Erwin

Name (Typed or Printed)

Executive Assistant

Title

05.06.2019

Date

ATTEST:

BARBARA SANDERS, CCC
Clerk of the Chief Executive Officer
And Board of Commissioners of
DeKalb County, Georgia

Date

APPROVED AS TO SUBSTANCE:

[Signature]

Department Director

APPROVED AS TO FORM:

[Signature]

Asst.

County Attorney Signature

T. Harlow

Asst.

County Attorney Name (Typed or Printed)

CERTIFICATE OF CORPORATE RESOLUTION

I, certify the following:

That I am the duly elected and authorized Secretary of _____ (hereinafter referred to as the "corporation"), a corporation organized and incorporated to do business under the laws of the State of _____;

That said corporation has, through lawful resolution of the Board of Directors of the corporation, duly authorized and directed _____, in his official capacity as _____ of the corporation, to enter into and execute the following described agreement with DeKalb County, a political subdivision of the State of Georgia:

Contract No. 1115522

AP Triton, LLC

That the foregoing Resolution of the Board of Directors has not been rescinded, modified, amended, or otherwise changed in any way since the adoption thereof, and is in full force and effect on the date hereof.

IN WITNESS WHEREOF, I have set my hand and corporate seal;

This the _____ day of _____, 2019.

(Secretary) (CORPORATE SEAL)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

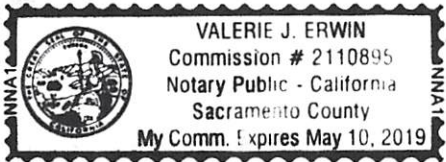
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Sacramento)
On May 6, 2019 before me, Valerie J Erwin,
Date Here Insert Name and Title of the Officer
personally appeared Michael DuRee
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 [Handwritten Signature]
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: Contract Amendment Document Date: n/a
Number of Pages: 4 Signer(s) Other Than Named Above: n/a Contract # 1115522

Capacity(ies) Claimed by Signer(s)

Signer's Name: Michael DuRee
 Corporate Officer — Title(s): CEO
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____

Signer Is Representing: AD Inton Consulting, LLC

Signer Is Representing: _____