

SECOND AMENDMENT

This Amendment made and entered into this _____ day of _____, 2017, by and between PINELLAS COUNTY, a political subdivision of the State of Florida, hereinafter referred to as "County," and Varsity Contractors, Inc., d/b/a Varsity Facility Services, hereinafter referred to as "Contractor,"

WITNESSETH:

WHEREAS, the County and the Contractor entered into an agreement on December 10, 2013, pursuant to Pinellas County Contract No. 123-0084-P (hereinafter "Agreement") pursuant to which the Contractor agreed to provide Janitorial Services for County; and

WHEREAS, Section twenty (20) of the Agreement permits modification by mutual written agreement of the parties; and

WHEREAS, the County and the Contractor now wish to modify the Agreement in order to extend the term for an additional six (6) months at the same prices, terms, and conditions;

NOW THEREFORE, the parties agree that the Agreement is amended as follows:

1. Section 5. of the Agreement is amended to include the following amended language: "The term of this Agreement is being extended on January 1, 2018 for six (6) months, unless terminated sooner in accordance with the terms of this Agreement."

2. Except as changed or modified herein, all provisions and conditions of the original Agreement and any amendments thereto shall remain in full force and effect.

Each Party to this Agreement represents and warrants that: (i) it has the full right and authority and has obtained all necessary approvals to enter into this Agreement; (ii) each person executing this Agreement on behalf of the Party is authorized to do so; (iii) this Agreement constitutes a valid and legally binding obligation of the Party, enforceable in accordance with its terms.

IN WITNESS WHEREOF the parties herein have executed this Second Amendment as of the day and year first written above.

PINELLAS COUNTY, FLORIDA
by and through its
Board of County Commissioners

Chairman

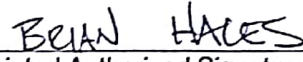
ATTEST:
KEN BURKE

Deputy Clerk

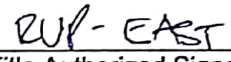
CONTRACTOR:



Authorized Signature




Printed Authorized Signature



Title Authorized Signature

APPROVED AS TO FORM

By: 

Office of the County Attorney