



## Marion County Board of County Commissioners

### Procurement Services

2631 SE Third St.  
Ocala, FL 34471  
Phone: 352-671-8444  
Fax: 352-671-8451

October 21, 2025

John Kantner  
University of North Florida Board of Trustees  
1 UNF Drive  
Jacksonville, FL 32224-2645  
Delivered via email to: l.fairweather@unjf.edu

### Sixteenth Contract Amendment for 10C-022 Small Business Development

On behalf of the Marion County Board of County Commissioners, it is our pleasure to notify you of the award of the Project listed above. The following are required to complete the contract process, and shall be returned within one (1) week: *Documents can be returned via email, fax, or courier (USPS, FedEx, UPS, hand delivery).*

- One (1) set of the Agreement with exhibits if applicable, fully executed before two witnesses - *if a person other than a company Officer signs, a statement must be included noting the signatory's authorization to sign on behalf of the company.*
- The Work under this Amendment shall commence unless a start date has been specifically mentioned in the Amendment.
- No payment(s) shall be rendered until all required documents have been received, in good order and deemed complete by the Marion County Procurement Services Department.

We look forward to continued business with you.

A handwritten signature in blue ink, appearing to read "S. Olsen".

Susan Olsen  
Procurement Services Director

xc: Administration  
/df  
Rev 10.8.2018

SEVENTEENTH AMENDMENT TO THE AGREEMENT

In accordance with the Small Business Development Agreement entered into on November 18, 1997, and all of its amendments (if any), collectively (the "Agreement") this Seventeenth Amendment to the Agreement (this "Amendment") is made and entered into by and between **University of North Florida Board of Trustees**, whose address is 1 UNF Drive, Jacksonville, FL 32224-2645; (hereinafter referred to as "Provider") and Marion County, a political subdivision of the State of Florida, 601 SE 25th Avenue, Ocala, FL, 34471, (hereinafter referred to as "COUNTY").

WITNESSETH

WHEREAS this Amendment shall remain in full force and effect until all completion of services required of Provider, and the parties wish to amend the Agreement.

IN CONSIDERATION of the mutual covenants and conditions contained herein, COUNTY and Provider (singularly referred to as "Party", collectively "Parties") hereto agree as follows:

1. **Allocation of Funds.** COUNTY has allocated \$180,000 to provide for Small Business Development.
2. **Term.** The term of the Agreement shall be amended and extended for services performed during FY 25/26, defined as October 1, 2025 through September 30, 2026.
3. **Compensation.** Payments shall be made under COUNTY'S established procedure.
4. **Maintenance of Records.** Provider shall retain copies of all financial records to the Agreement in accordance with the general records schedules established by the Department of State Florida Division of Library and Information Services as calculated from the date funds are dispersed. COUNTY shall have the right to review, inspect, copy and audit all such records during normal business hours and upon reasonable notice.
5. **Audit.** Provider will conduct an annual audit of all its accounts by a Certified Public Accountant. A copy of the audit is to be provided to COUNTY.

IN WITNESS WHEREOF the Parties have entered into this Amendment, as approved by the Marion County Board of County Commissioners, on the date of the last signature below.

ATTEST:

**MARION COUNTY, A POLITICAL SUB-DIVISION OF THE STATE OF FLORIDA**

\_\_\_\_\_  
GREGORY C. HARRELL, DATE  
MARION COUNTY CLERK OF COURT

\_\_\_\_\_  
KATHY BRYANT DATE  
CHAIRMAN

**FOR USE AND RELIANCE OF MARION  
COUNTY ONLY, APPROVED AS TO  
FORM AND LEGAL SUFFICIENCY**

**BCC APPROVED:** October 21, 2025  
10C-022-CA-17 Small Business Development

\_\_\_\_\_  
MATTHEW G. MINTER, DATE  
MARION COUNTY ATTORNEY

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WITNESS:

**UNIVERSITY OF NORTH FLORIDA BOARD OF  
TRUSTEES**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
BY:

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
PRINTED:

\_\_\_\_\_  
ITS: (TITLE)

WITNESS:

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME