# FIRST AMENDMENT TO GRANT AGREEMENT BETWEEN SHELTERING HANDS, INC.

#### **AND**

### MARION COUNTY, FLORIDA

This First Amendment to the Grant Agreement is made and entered into this 20<sup>TH</sup> day of August, 2024, by and between Marion County, a political subdivision of the State of Florida, with its principal place of business located at 601 SE 25<sup>th</sup> Ave., Ocala, FL 34471 (hereinafter referred to as "COUNTY") and Sheltering Hands, Inc., with its principal place of business located at 10397 N US Highway 27, Ocala, FL 34482 (hereinafter referred to as "RECIPIENT")(individually "Party"," collectively "Parties").

#### RECITALS

WHEREAS, COUNTY and RECIPIENT entered into a Grant Agreement ("Agreement") on <u>December 1971</u>, 2023, whereby COUNTY authorized a grant of Funds (the "Grant") to RECIPIENT subject to the terms and conditions provided in the Agreement in the amount of Twenty-five thousand (\$25,000) Dollars (the "Award Amount") for funding to be disbursed and distributed by RECIPIENT for low-cost spay and neutering, vaccination and microchipping services to eligible low-income Marion County residents seeking RECIPIENT's assistance in connection with its animal care program (the "Program"); and

WHEREAS, the dollar amount of assistance awarded to RECIPIENT (the "Award Amount") may be replenished by providing RECIPIENT with an additional **Five thousand** (\$5,000) **Dollars** in grant funding, by amending the Agreement depending upon the showing of need and the successful operation of RECIPIENT's Program; and

WHEREAS, RECIPIENT has demonstrated to COUNTY a satisfactory showing of continuing grant funding need and the successful operation of its Program; and

WHEREAS, COUNTY and RECIPIENT desire to amend the Agreement in order to replenish RECIPIENT's Award Amount thereunder;

**NOW THEREFORE**, in consideration of the mutual covenants in this Amendment, the Agreement is amended as follows:

**SECTION 1. RECITALS.** The recitals stated above are true, correct, and incorporated herein as material provisions of this Agreement.

**SECTION 2. REPLENISHMENT.** The Agreement is hereby amended to reflect that the dollar amount of assistance awarded to RECIPIENT (the "Award Amount") is being replenished with an additional **Five Thousand (\$5,000) Dollars** in grant funding, to be disbursed and distributed by RECIPIENT for continuing low-cost spay and neutering, vaccination and microchipping services to eligible low-income Marion County residents seeking RECIPIENT's assistance in connection with its animal care program.

**SECTION 3. DELETION.** Section 5.6 of the Agreement is hereby deleted in its entirety.

**SECTION4**. Except as expressly modified herein, the Agreement shall continue in full force and effect and be binding upon the Parties thereto.

[Remainder of this page intentionally left blank; Signature page follows]

**IN WITNESS WHEREOF**, COUNTY and RECIPIENT have entered into this Agreement as of the date of the last signature below.

	SHELTERING HANDS, INC.
	By: <u>Ilena Jould</u> Leslie Hinson Board Sacretar  President Elena Gouldt  Date: 8/12/24
STATE OF FLORIDA COUNTY OF MARION	
online notarization, this 12 day of President of SHELTERING HANDS, INC. (SEAL)  Notary Public State of Florida Coral Gowen My Commission HH 404257	before me by means of <u>V</u> physical presence or f <u>Hugust</u> , 2024, by Leslie Hinson as
Expires 5/30/2027	Coral Yowen  Notary Public, State of Florida
Personally Known OR  Y Produced Identification Type of Identification Produced: Driver	·
-VF	

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## **COUNTY**

MARION COUNTY, FLORIDA, a political subdivision of the State of Florida, by its **Board of County Commissioners** 

By:	
Michelle Stone, Chairman	

ATTEST:

Gregory C. Harrell, Clerk of Court and Comptroller

For use and reliance of Marion County only, approved as to form and legal sufficiency:

Matthew G. Minter, County Attorney