

**AMENDMENT NUMBER 2/SECOND EXTENSION TO THE AGREEMENT
FOR MEDICAL SUPPLIES**

THIS AGREEMENT entered into this 9th day of May, 2016 by and between the **BOARD OF COUNTY COMMISSIONERS OF NASSAU COUNTY, FLORIDA**, a political subdivision of the State of Florida, (hereinafter referred to as "County") and **QUADMED, INC.** located at 11210-1 Philips Industrial Boulevard, Jacksonville, FL 32256; (hereinafter referred to as "Vendor").

WHEREAS, the parties entered into an agreement on March 24, 2014 for the purchase of Medical Supplies; and

WHEREAS, the original agreement provided for an initial term beginning March 24, 2014 and ending March 23, 2015 with an option to renew for three additional one year periods;

WHEREAS, the parties agreed to extend the agreement for the period beginning March 24, 2015 and ending March 23, 2016; and

WHEREAS, the parties desire to amend and extend said Agreement.

NOW, THEREFORE, FOR AND IN CONSIDERATION of the mutual covenants and agreements herein contained, the parties hereto agree as follows:

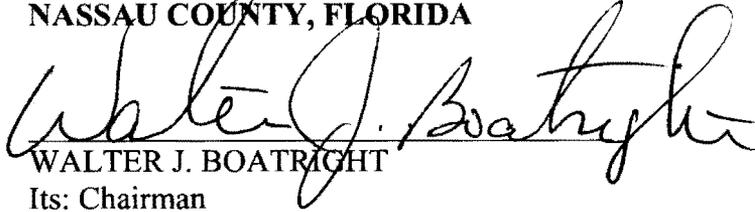
1. The performance period is hereby extended for an additional period beginning March 24, 2016 and ending March 23, 2017.
2. Line Item Pricing under Attachment "A" shall be amended as follows:

| Line Item # | Description | Manuf./Brand | Unit | Previous Unit Cost | New Unit Cost |
|-------------|---------------|-----------------------|------|--------------------|---------------|
| 251 | Gloves, Small | Sterling Xtra Nitrile | Case | \$95.74 | \$102.00 |
| 252 | Gloves, | Sterling Xtra Nitrile | Case | \$95.74 | \$102.00 |
| 253 | Gloves, Large | Sterling Xtra Nitrile | Case | \$95.74 | \$102.00 |
| 254 | Gloves, | Sterling Xtra Nitrile | Case | \$95.74 | \$102.00 |

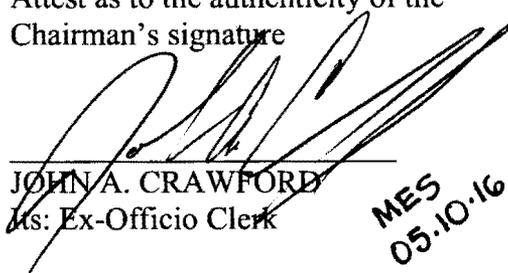
3. All other provisions of said Agreement not in conflict with this Addendum shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this amendment on this day and year first above written.

**BOARD OF COUNTY COMMISSIONERS
NASSAU COUNTY, FLORIDA**


WALTER J. BOATRIGHT
Its: Chairman

Attest as to the authenticity of the
Chairman's signature


JOHN A. CRAWFORD
Its: Ex-Officio Clerk

MES
05.10.16

Approved as to form and legality


MICHAEL MULLIN

[Signature page continued on next page]

QUADMED, INC.

Jackie Gieger
By: Jackie Gieger (Print Name)
Its: Contract Manager (Title)

STATE OF Florida
COUNTY OF Duval

Before me personally appeared, Jackie Gieger, who is personally known or produced _____ as identification, known to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that he/she executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 3rd day of May, 2016.

Deborah Anne Clemmer
Notary Signature

Notary-Public-State of FL at large
My Commission expires: 10-6-2016

DEBORAH ANNE CLEMMER
Notary Public, State of Florida
My Comm. Expires Oct. 6, 2016
Commission No. EE 219755