



with copy to: William E. Sexton, Esq., City Attorney
City of Ocala
110 SE Watula Avenue, Third Floor
Ocala, FL 34471
E-Mail: cityattorney@ocalafl.gov

- 6. **COUNTERPARTS.** This First Amendment may be executed in counterparts, each of which shall be an original and all of which shall constitute the same instrument.
- 7. **ELECTRONIC SIGNATURE(S).** Medical Director, if and by offering an electronic signature in any form whatsoever, will accept and agree to be bound by said electronic signature to all terms and conditions of this First Amendment. Further, a duplicate or copy of the First Amendment that contains a duplicated or non-original signature will be treated the same as an original, signed copy of this original First Amendment for all purposes.
- 8. **LEGAL AUTHORITY.** Each person signing this First Amendment on behalf of either party individually warrants that he or she has full legal power to execute this First Amendment on behalf of the party for whom he or she is signing, and to bind and obligate such party with respect to all provisions contained in this First Amendment.

ATTEST:

CITY OF OCALA

DocuSigned by:
Angel B. Jacobs
8E833FAC28E54A5

DocuSigned by:
Peter Lee
8B972E10272E1C7

Angel B. Jacobs
City Clerk

Peter Lee
City Manager

Approved as to form and legality:

MEDICAL DIRECTOR

DocuSigned by:
William E. Sexton
81C2C4C18891C8

DocuSigned by:
Frank Fraunfelter
8082484E80808

By: William E. Sexton

(Printed Name)

By: Frank Fraunfelter

(Printed Name)

Title: City Attorney

Title: medical director

(Title of Authorized Signatory)

Certificate Of Completion

Envelope Id: 6E63438AC4FE4A188AAEACF952189C10
Subject: SIGNATURE - OFR/220057
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Envelope Originator:
Jamil Ramirez
110 SE Watula Avenue
City Hall, Third Floor
Ocala, FL 34471
jramirez@ocalafl.org
IP Address: 216.255.240.104

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Status: Original
3/25/2024 3:40:15 PM
Security Appliance Status: Connected
Storage Appliance Status: Connected
Status: Original
3/27/2024 4:03:32 PM
Security Appliance Status: Connected
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Holder: Jamil Ramirez
jramirez@ocalafl.org
Pool: StateLocal
Pool: City of Ocala - Procurement & Contracting
Holder: Patricia Lewis
plewis@ocalafl.org
Pool: StateLocal
Pool: City of Ocala - Procurement & Contracting
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Signer Events

William E. Sexton
wsexton@ocalafl.org
City Attorney
City of Ocala
Security Level: Email, Account Authentication
(None)

Signature

DocuSigned by:
William E. Sexton
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Signature Adoption: Pre-selected Style
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Frank Fraunfelter
fraunfelter@cox.net
medical director
Security Level: Email, Account Authentication
(None)

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Frank Fraunfelter
168FEF47B4C8416...
Signature Adoption: Pre-selected Style
Using IP Address: 98.180.68.185
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Sent: 3/29/2024 9:00:21 AM
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ID: 3b2e1009-1235-4d50-954e-bd53ee5a0757

Peter Lee
plee@ocalafl.org
City Manager
City of Ocala
Security Level: Email, Account Authentication
(None)

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Peter Lee
5BB28E162F2E4C2...
Signature Adoption: Pre-selected Style
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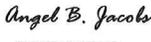
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Signer Events

Angel B. Jacobs
 ajacobs@ocalafl.org
 City Clerk
 Security Level: Email, Account Authentication
 (None)

Signature

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Jamil Ramirez
 jramirez@ocalafl.org
 Contract Specialist
 City of Ocala

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You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: contracts@ocalafl.org

To advise City of Ocala - Procurement & Contracting of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at contracts@ocalafl.org and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to contracts@ocalafl.org and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

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ii. send us an email to contracts@ocalafl.org and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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