THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY

SAN BERNARDINO COUNTY

Contract Number

25-227 A2

SAP Number

4400028040

Arrowhead Regional Medical Center

Department Contract Representative	**Andrew Goldfrach**
Telephone Number	**(909) 580-6150**
Contractor	**Renovo Solutions LLC**
Contractor Representative	Sandy Morford
Telephone Number	(818) 903-9733
Contract Term	May 1, 2025 through April 30, 2028
Original Contract Amount	$1,230,701
Amendment Amount	$24,002.40
Total Contract Amount	$1,254,703.40
Cost Center	9176304200
Grant Number (if applicable)	N/A

AMENDMENT NO. 2

WHEREAS, San Bernardino County on behalf of Arrowhead Regional Medical Center and Renovo Solutions LLC ("Renovo") entered into an Asset Management Agreement ("Agreement") with a term of May 1, 2025 through April 30, 2028 for Renovo to provide asset management, maintenance, and repair services to certain equipment specified in the Agreement; and

WHEREAS, the parties now desire to amend the list of equipment to receive services under the Agreement;

NOW THEREFORE, effective as of the date this Amendment is fully executed, the Agreement is amended as follows:

1. The following is added to the equipment list on Attachment A:

Room	**Manufacturer**	**Model**	**Serial Number**	**RENOVO SOLUTIONS** Annual Price for Full-Service Including Parts & Detector
ARMC – Room 2	Konica Minolta Medical Imaging	AeroDR 1717 HQ	A6C3-51538	$6,000.60

ARMC - Ortho	Konica Minolta Medical Imaging	AeroDR P 21	A6C3-51535	$6,000.60

2. **Full Force and Effect**. All other terms and conditions of the Agreement remain in full force and effect.

3. **Capitalized Terms**. Any capitalized term used but not defined in this Amendment shall have the meaning given to it in the Agreement.

4. **Electronic Signatures**. This Amendment may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Amendment. The parties shall be entitled to sign and transmit an electronic signature of this Amendment (whether by facsimile, PDF or other mail transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment upon request.

IN WITNESS WHEREOF, San Bernardino County on behalf of Arrowhead Regional Medical Center and Renovo Solutions LLC have each caused this Amendment to be subscribed by its respective duly authorized officers, on its behalf.

SAN BERNARDINO COUNTY ON BEHALF OF ARROWHEAD REGIONAL MEDICAL CENTER

►

Dawn Rowe, Chair, Board of Supervisors

Dated: _____

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

By _____
Deputy

RENOVO SOLUTIONS LLC

(Print or type name of corporation, company, contractor, etc.)

By ►

(Authorized signature - sign in blue ink)

Name Wayne Nicoles
(Print or type name of person signing contract)

Title _____
(Print or Type)

Dated: _____

Address _____

FOR COUNTY USE ONLY

Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
►	►	►
Daniella V. Hernandez, Deputy County Counsel		Andrew Goldfrach, ARMC Chief Executive Officer
Date _____	Date _____	Date _____