

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



Contract Number

24-934-A1

SAP Number

4400026204

Arrowhead Regional Medical Center

Department Contract Representative	<u>Andrew Goldfrach</u>
Telephone Number	<u>(909) 580-6150</u>
Contractor	<u>Endologix, LLC</u>
Contractor Representative	<u>Steve Malfatto</u>
Telephone Number	<u>(949) 280-3669</u>
Contract Term	<u>September 24, 2024 through May 31, 2028</u>
Original Contract Amount	<u>\$480,000</u>
Amendment Amount	<u>\$480,000</u>
Total Contract Amount	<u>\$960,000</u>
Cost Center	<u>7631</u>
Grant Number (if applicable)	<u>N/A</u>

AMENDMENT NO. 1

This Amendment No. 1 (Amendment), effective as of the date fully executed, is made by and between Endologix, LLC ("Company") and San Bernardino County on behalf of Arrowhead Regional Medical Center ("Buyer") and modifies the terms of the Sales Pricing Agreement between the parties with an effective date of September 24, 2024 ("Agreement") as follows:

- 1. Term.** The term of the Agreement is extended through May 31, 2028.
- 2. Contract Amount.** Total payments under the Agreement shall not exceed \$960,000 without a further amendment to the Agreement approved by the San Bernardino County Board of Supervisors. It shall be Buyer's responsibility to monitor its purchases under the Agreement.
- 3. Full Force and Effect.** All other terms and conditions of the Agreement remain in full force and effect.
- 4. Counterparts.** 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 email 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, Buyer and Company 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

By *Dawn Rowe*
Dawn Rowe, Chair, Board of Supervisors

Dated: MAY 05 2026

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



By *Lynna Monell*
Lynna Monell, Clerk of the Board of Supervisors
San Bernardino County
Deputy

ENDOLOGIX LLC

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

Signed by:
By *Bonnie Kim*
Authorized signature - sign in blue ink

Name Bonnie Kim
(Print or type name of person signing contract)

Title Director, Financial Planning & Analysis
(Print or Type)

Dated: 03/24/2026

Address 3910 Brickway Blvd
Santa Rosa, CA 95403

FOR COUNTY USE ONLY

Approved as to Legal Form
By *Charles Phan*
Charles Phan, Supervising Deputy County Counsel
Date 4/15/2026

Reviewed for Contract Compliance
By _____
Date _____

Reviewed/Approved by Department
By *Andrew Goldfrach*
Andrew Goldfrach, ARMC Chief Executive Officer
Date 4/15/26