

STATE OF TEXAS §
 §
COUNTY OF FORT BEND §

**AMENDMENT TO AGREEMENT FOR
PROFESSIONAL CONSTRUCTION MANAGEMENT SERVICES**

THIS AMENDMENT, is made and entered into by and between Fort Bend County (hereinafter "County"), a body corporate and politic under the laws of the State of Texas, and Mike Stone Associates, Inc., (hereinafter "Consultant"), a company authorized to conduct business in the State of Texas.

WHEREAS, the parties executed and accepted that certain Agreement for Professional Construction Management Services on August 25, 2015, (hereinafter "Agreement"), pursuant to SOQ 14-025; and

WHEREAS, the parties desire to amend the Agreement for additional Construction Management Support and Oversight Services to be provided for the construction of Phase 2A of the Project and increase the total Maximum Compensation to complete the additional services.

NOW, THEREFORE, the parties do mutually agree as follows:

1. The Scope of Services under the Agreement shall hereby be amended to include Phase 2A of the Project, and Consultant shall render the same Services described therein to Phase 2A of the Project.
2. The Time of Performance under the Agreement is hereby extended to end no later than December 31, 2019.

Except as provided herein, all terms and conditions of the Agreement shall remain unchanged.

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FORT BEND COUNTY

Robert E. Hebert

Robert E. Hebert, County Judge

MIKE STONE ASSOCIATES, INC

Michael E. Stone

Michael E. Stone, President

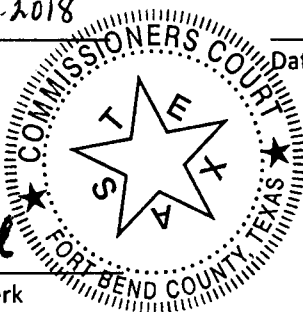
Date 2-6-2018

Date 1/31/2018

ATTEST:

Laura Richard

Laura Richard, County Clerk



APPROVED:

Richard W. Stolleis

Richard W. Stolleis, P.E., County Engineer

APPROVED AS TO LEGAL FORM:

Marcus D. Spencer

Marcus D. Spencer, First Assistant County Attorney

AUDITOR'S CERTIFICATE

I hereby certify that funds are available in the amount of \$ 492,000.⁰⁰ to accomplish and pay the obligation of Fort Bend County under this contract.

Robert Ed Sturdivant

Robert Ed Sturdivant, County Auditor

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2018-307661

Date Filed:
01/30/2018

Date Acknowledged:
02/06/2018

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Mike Stone Associates, Inc.
Richmond, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Fort Bend County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
FM 1093/Westpark Phase II
Consulting Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)