

THE STATE OF TEXAS §
 §
 COUNTY OF FORT BEND §

AMENDMENT TO LEGAL SERVICES AGREEMENT

THIS AMENDMENT TO LEGAL SERVICES AGREEMENT (the "Amendment") is entered into by and between Fort Bend County, (hereinafter the "County"), a body corporate and politic under the laws of the State of Texas, and The Cox Pradia Law Firm (hereinafter the "Counsel"), a law firm authorized to conduct business in the State of Texas. The County and the Counsel may be individually referred to as a "Party" or collectively as the "Parties".

WHEREAS, the Parties executed and accepted that certain Legal Services Agreement on November 2, 2021 for matters related to the collection of funds distributed by the county under the CARES act/ ARPA, (hereinafter the "Agreement"); and

WHEREAS, the Parties desire to amend the Agreement to specify the rate payable to counsel by the County for services to be performed under the Agreement.

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

1. To replace Section 3.1 in its entirety with the following:

"Counsel's fees shall be calculated at the rate of \$300.00 per hour." The Maximum Compensation for the performance of Services within the Scope of Services described in Exhibit A is one hundred thousand and five dollars and no/100 (\$105,000). In no case shall the amount paid by County under this Agreement exceed the Maximum Compensation without an amendment.

2. The Parties hereby agree terms and conditions of the Agreement have remained in effect to date and the Term of Agreement shall be extended to terminate September 30, 2023. Counsel shall complete the tasks described in the Scope of Services within this time or within such additional time as may be extended by the County.
3. BY ACCEPTANCE OF AGREEMENT, ACKNOWLEDGES THAT THE COUNTY IS OPPOSED TO HUMAN TRAFFICKING AND THAT NO COUNTY FUNDS WILL BE USED IN SUPPORT OF SERVICES OR ACTIVITIES THAT VIOLATE HUMAN TRAFFICKING LAWS.

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

IN WITNESS WHEREOF, the parties have executed this Agreement and caused this Agreement to be effective on the date executed by County.

FORT BEND COUNTY

KP George
County Judge KP George
KP George, County Judge

THE COX PRADIA LAW FIRM

Troy J. Pradia
Authorized Agent - Signature

November 22, 2022
Date

Troy J. Pradia
Authorized Agent - Printed Name

ATTEST:



Laura Richard
Laura Richard, County Clerk

Title
11/7/2022
Date

AUDITOR'S CERTIFICATE

I hereby certify that funds are available in the amount of \$ 105,000.00 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**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 The Cox Pradia Law Firm PLLC
 Houston, TX United States

Certificate Number:
 2022-953872

Date Filed:
 11/09/2022

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

Date Acknowledged:
 11/22/2022

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.
 35900
 Legal Services

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	The Cox Pradia Law Firm PLLC	Houston, TX United States	X	

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)