



**DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE**

**CONTRACT RENEWAL AGREEMENT**

**DEPARTMENT:** Department of Real Estate & Asset Management

**BID/RFP NUMBER:** 25ITBC1352939C-JH(B)

**BID/RFP TITLE:** Plumbing Supplies and Related Items

**ORIGINAL APPROVAL DATE:** May 1, 2025

**RENEWAL EFFECTIVE DATES:** January 1, 2026

**RENEWAL OPTION #:** 1 OF 2

**NUMBER OF RENEWAL OPTIONS:** 2

**RENEWAL AMOUNT:** \$20,000.00

**COMPANY'S NAME:** Levonne Industries, LLC

**ADDRESS:** 1910 Cedar Glenn Way

**CITY:** Atlanta

**STATE:** GA

**ZIP:** 30339

**This Renewal Agreement No. \_\_\_\_ was approved by the Fulton County Board of Commissioners on BOC DATE: \_\_\_\_\_ BOC NUMBER: \_\_\_\_\_**

**CERTIFICATE OF INSURANCE:** The Contractor is required to maintain insurance during the entire term of this Agreement, including any contract renewals. Upon request, the Contractor/Vendor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

**SIGNATURES: SEE NEXT PAGE**

**SIGNATURES:**

Contractor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

**FULTON COUNTY, GEORGIA**

**Levonnie Industries, LLC**

\_\_\_\_\_  
**Robert L. Pitts, Chairman  
Fulton County Board of Commissioners**

\_\_\_\_\_  
**Sarina Bell  
Project Director**

**ATTEST:**

**ATTEST:**

\_\_\_\_\_  
**Tonya R. Grier  
Clerk to the Commission**

\_\_\_\_\_  
**Secretary/  
Assistant Secretary**

**(Affix County Seal)**

**(Affix Corporate Seal)**

**AUTHORIZATION OF RENEWAL:**

**ATTEST:**

\_\_\_\_\_  
**Joseph Davis, Director  
Department Of Real Estate & Asset  
Management**

\_\_\_\_\_  
**Notary Public**

**County:**\_\_\_\_\_

**Commission Expires:** \_\_\_\_\_

**(Affix Notary Seal)**

|                                      |                                                     |
|--------------------------------------|-----------------------------------------------------|
| <b>ITEM#:</b> _____ <b>RM:</b> _____ | <b>ITEM#:</b> _____ <b>2<sup>nd</sup> RM:</b> _____ |
| <b>REGULAR MEETING</b>               | <b>SECOND REGULAR MEETING</b>                       |

# **CERTIFICATE OF INSURANCE**