

**AMENDMENT NO. 1 TO FORM OF CONTRACT**

Contractor: **EOLA Power, LLC**

Contract No. **19ITB118788C-GS, Uninterrupted Power Supply (UPS) System  
Maintenance Services**

Address: **66 W Flager Street, Suite 1214**  
City, State **Miami, FL 33130**

Telephone: **(305) 407-5232**

E-mail: [marias@eolapower.com](mailto:marias@eolapower.com)

Contact: **Mateo Arias**  
**National Sales Director**

**W I T N E S S E T H**

WHEREAS, Fulton County ("County") entered into a Contract with **EOLA Power, LLC**, to provide on-site Generator System Maintenance and Repair Services, dated 1<sup>st</sup> day of January 2020, on behalf of the **Department of Real Estate and Asset Management**; and

WHEREAS, the purpose of this amendment is for the approving of increasing spending authority to cover the cost for the replacement of an existing uninterrupted power supply (UPS) unit, and provide installation of a new uninterrupted power supply UPS) systems unit in the 911 Center located at Futon County Government Center Complex Public Safety Building 141 Pryor Street, Atlanta, GA 30303.

WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this amendment was approved by the Fulton County Board of Commissioners on **October 20, 2021, BOC Items #21-** .

**NOW, THEREFORE**, the County and the Contractor agree as follows:

This Amendment No. 1 to Form of Contract is effective as of the 20<sup>th</sup> day of October, 2021, between the County and **EOLA Power, LLC**, who agree that all Services specified will be performed in accordance with this Amendment No. 1 to Form of Contract and the Contract Documents.

1. **SCOPE OF WORK TO BE PERFORMED:** To cover the cost for replacement of the existing uninterrupted power supply (UPS) unit, and provide labor, tools, equipment

and appurtenance necessary for the installation of a new uninterrupted power supply (UPS) system unit in the 911 Center located at the Fulton County Government Center Complex Public Safety Building, 141 Pryor Street, Atlanta, GA 30303.

Capital Replacement Project Cost:

	<b>Project Description</b>	<b>Project Cost</b>
1	Installation of new Liebert EXM single module UPS Systems Unit	\$67,169.39
2	Disconnect and remove existing unit and wire up new UPS System Unit	\$65,000.00
3	Available Spending Authority	-\$57,500.00
	<b>Increase Authority Needed</b>	<b>\$74,669.39</b>

2. **COMPENSATION:** The services described under Scope of Work herein shall be performed by Contractor for a total amount not to exceed **\$75,000.00** (Seventy Five Thousand and Zero Cents).
3. **LIABILITY OF COUNTY:** This Amendment No. 1 to Form of Contract shall not become binding on the County and the County shall incur no liability upon same until such agreement has been executed by the Chair to the Commission, attested to by the Clerk to the Commission and delivered to Contractor.
4. **EFFECT OF AMENDMENT NO. 1 TO FORM OF CONTRACT:** Except as modified by this Amendment No. 1 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

**[INTENTIONALLY LEFT BLANK]**

**IN WITNESS THEREOF**, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and their corporate seals to be hereunto affixed as of the day and year date first above written.

OWNER:

**FULTON COUNTY, GEORGIA**

DocuSigned by:

*Dennal Stewart*

2277A2CEE73F4E4...

Robert L. Pitts, Chairman  
Fulton County Board of Commissioners

CONSULTANT:

**EOLA POWER,LLC**

DocuSigned by:

*Mateo Arias*

DBA948294F864D6...

Mateo Arias,  
National Sales Director

ATTEST:

DocuSigned by:

*Tonya R. Grier*

EEC478C4837648D...

Tonya R. Grier  
Clerk to the Commission

(Affix County Seal)

DocuSigned by:

Secretary/  
Assistant Secretary

(Affix Corporate Seal)

APPROVED AS TO FORM:

DocuSigned by:

*Dennal Stewart*

2277A2CEE73F4E4...

Office of the County Attorney

APPROVED AS TO CONTENT:

DocuSigned by:

*Joseph N. Davis*

E45C5C5E17EB417...

Joseph N. Davis, Director,  
Department of Real Estate and Asset  
Management

DocuSigned by:

*Mateo Arias*

DBA948294F864D6...

Notary Public

County: Miami-Dade

Commission Expires: 2024

(Affix Notary Seal)

DS

ROSARIO B.  
MY COMMISSIO  
EXPIRES: Au  
gust 2024

xxx	xxx	21-0770	10/06/21
ITEM#: _____	RCS: _____	ITEM#: _____	RM: _____
RECESS MEETING		REGULAR MEETING	





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/7/2021

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> Rovner Insurance Group 11098 Biscayne Boulevard Suite 100 Miami FL 33161	<b>CONTACT NAME:</b> Marc Rovner <b>PHONE (A/C, No, Ext):</b> 561-287-6279 <b>FAX (A/C, No):</b> 561-629-1335 <b>E-MAIL ADDRESS:</b> mrovner@rovnerco.com														
<b>INSURED</b> EOLA Power, LLC 8782 NW 18th Terrace Doral FL 33172	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td><b>INSURER A:</b> United Specialty Insurance Company</td> <td></td> </tr> <tr> <td><b>INSURER B:</b> Travelers</td> <td></td> </tr> <tr> <td><b>INSURER C:</b> Startstone National Insurance Company</td> <td></td> </tr> <tr> <td><b>INSURER D:</b> Guard Insurance Group</td> <td></td> </tr> <tr> <td><b>INSURER E:</b> LLOYDS OF LONDON</td> <td>A1122J</td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> United Specialty Insurance Company		<b>INSURER B:</b> Travelers		<b>INSURER C:</b> Startstone National Insurance Company		<b>INSURER D:</b> Guard Insurance Group		<b>INSURER E:</b> LLOYDS OF LONDON	A1122J	<b>INSURER F:</b>	
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**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>			CCP-913413	07/16/2021	07/16/2022	EACH OCCURRENCE	\$ 2,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE	\$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	<b>AUTOMOBILE LIABILITY</b>			BA-0N501982-19-42-G	05/26/2021	05/26/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
								\$
C	<b>UMBRELLA LIAB</b>			85556617-319-6434	03/05/2021	03/05/2022	EACH OCCURRENCE	\$ 5,000,000
	<input checked="" type="checkbox"/> <b>EXCESS LIAB</b>	<input type="checkbox"/> OCCUR	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE	\$ 5,000,000
	DED <input type="checkbox"/> RETENTION \$							\$
D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			EOWC296407	05/24/2021	05/24/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y / N	N / A				E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
E	Professional Liability			B1262BW0238920	05/04/2021	05/04/2022	Each Claim \$3,000,000	
E	Professional Liability			B1262BW0238920	05/04/2021	05/04/2022	Aggregate \$3,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

Fulton County Government 130 Peachtree Street, S.W. Suite 1168 Atlanta GA 30303-3459	<p><b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b></p> <p><b>AUTHORIZED REPRESENTATIVE</b></p> <p style="text-align: center;"><i>Marc Rovner</i></p>
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WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this amendment was approved by the Fulton County Board of Commissioners on **October 6, 2021, BOC Items #21-0770**.

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