

## First Amendment to Scholarship Fund Agreement

THIS First Amendment to Scholarship Fund Agreement, ("Agreement"), made and entered this \_\_\_\_ day of November, 2025, ("Effective Date"), is by and between the City of Fort Lauderdale, a Florida municipality, ("City" or "Donor"), whose principal place of business is 101 NE Third Avenue, Suite 2100, Fort Lauderdale, Florida, 33301, and Broward Education Foundation, Inc., a Florida not for profit corporation, ("Foundation" or "Organization"), whose principal address is 600 SE Third Avenue, 1st Floor, Fort Lauderdale, FL 33301.

WHEREAS, City and Foundation entered into a Scholarship Fund Agreement ("Agreement"), dated March 4, 2025, to provide an irrevocable gift to establish the CITY OF FORT LAUDERDALE SCHOLARSHIP FUND ("Fund"), a newly established fund to enable twelve City of Fort Lauderdale graduating high school students to be selected to receive educational scholarships to attend an accredited college, university, or technical college of their choice, within the State of Florida; and

WHEREAS, the City desires to fund additional scholarships and Foundation wishes to administer the additional scholarships through this First Amendment to Scholarship Fund Agreement ("First Amendment").

NOW, THEREFORE, the City and Foundation agree as follows:

- 1. The foregoing recitals are true and correct and incorporated herein by reference.
- Pursuant to the Agreement, the City agrees to fund additional scholarships.
   City agrees to pay Foundation an additional one-time payment in the amount of \$13,300, which shall only be used by Foundation to fund scholarships to eligible students pursuant to the terms of the Agreement.
- 3. All other terms and provisions of the Agreement, as amended, between the parties are hereby ratified, reaffirmed, and shall remain in full force and effect.



IN WITNESS WHEREOF, the City of Fort Lauderdale and the Broward Education Foundation, Inc., execute this First Amendment as follows:



WITNESSES:	BROWARD EDUCATION FOUNDATION, INC., a Florida not for profit corporation.
Print Name: Liz Reynolds	By: James Knapp, President and CEO
Print Name: Buffy Could	
(CORPORATE SEAL)	
STATE OF FLORIDA: COUNTY OF BROWARD	
presence or □ online notarization, this	acknowledged before me by means of physical s /6 day of October, 2025, by James ve Officer for Broward Education Foundation, Inc.,
(SEAL)	Signature of Notary Public – State of Florida
Carol McFadden Comm.: HH 500527 Expires: Mar. 6, 2028 Notary Public - State of Florida	Caro ) McFadden Print, Type, or Stamp Commissioned Name of Notary Public
Personally Known OR Produced Identification	

The undersigned, on behalf of Broward Education Foundation, Inc.
(Print entity's complete legal name as registered with suffix: INC, LLC, LTD, LP, PA, etc.)
a Florida nongovernmental entity ("Nongovernmental Entity"), under penalty of perjury, (State entity is registered) hereby deposes and says:
My name is
I am an X officer or authorized representative (Select one) of the Nongovernmental Entity. My title is: President & CEO  (Print title of corporate officer/authorized representative)
<ol> <li>I attest that the Nongovernmental Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes (2024), as may be amended or revised.</li> </ol>
Under penalties of perjury, I declare that I have read the foregoing Anti-Human Trafficking Affidavit and that the facts stated in it are true.
Signature of Officer or Representative:
Office Address: 600 SE 3rd Avenue, 1st Floor, Fort Lauderdale, FL 33301
Email Address: jknapp@browardschools.com
Main Phone Number: 754-321-2030 FEIN No.: 59-2359433
STATE OF Florida COUNTY OF Broward
Sworn to and subscribed before me by means of physical presence or online notarization, this /6 day of october, 2025, by James A. Knapp.  (Print name of corporate officer/representative)
Carol McFadden Comm.: HH 500527 Expires: Mar. 6, 2028 Notary Public - State of Florida  Carol McFadden Comm.: HH 500527 Expires: Mar. 6, 2028 Notary Public - State of Florida
(NOTARY SEAL)  Print, Type or Stamp Commissioned Name of Notary Public)
Personally Known OR Produced Identification
Type of Identification Produced
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