

AMENDMENT TO FUNDING AGREEMENT BETWEEN
NORTH LAKE COUNTY HOSPITAL DISTRICT AND
LIFESTREAM BEHAVIORAL CENTER, INC. d/b/a
LIFESTREAM PRIMARY CARE CLINIC

This Amendment is made this 21st day of August 2014 by and between NORTH LAKE COUNTY HOSPITAL DISTRICT, an independent special taxing district of the County of Lake, State of Florida, referred to herein as "NORTH LAKE COUNTY HOSPITAL DISTRICT"; and LIFESTREAM BEHAVIORAL CENTER, INC., licensed hospital provider d/b/a LIFESTREAM PRIMARY CARE CLINIC, a primary care clinic provider referred to herein as "LIFESTREAM PRIMARY CARE CLINIC."

Whereas, the parties have previously entered into a Funding Agreement to provide funds for indigent care of the residents of the defined district in excess of the actual costs of providing care dated the 3rd day of January, 2014 hereinafter referred to as "FUNDING AGREEMENT".

Whereas, the parties agree to amend the following provisions to the above mentioned FUNDING AGREEMENT.

Now, Therefore, in consideration of the premises and the mutual representations, warranties, covenants and agreements herein contained, the parties hereby agree to amend Paragraph I in the FUNDING AGREEMENT as follows:

I. Provided all obligations of LIFESTREAM PRIMARY CARE CLINIC as described above are met and continue to be met, payment shall be distributed to LIFESTREAM PRIMARY CARE CLINIC, not to exceed ONE HUNDRED THOUSAND AND NO/100THS DOLLARS (\$100,000.00) under this Agreement by the North Lake County Hospital District.

IN THE EVENT OF ANY CONFLICT, INTERPRETATION OR INCONSISTENCY, THE PROVISIONS OF THIS AMENDMENT SHALL BE PARAMOUNT AND CONTROLLING AND SHALL SUPERSEDE ANY PROVISIONS IN THE AGREEMENT.

THIS AMENDMENT shall take effect upon signing by all parties hereto.

In Witness Whereof, the parties hereto have made and executed this Agreement effective the date first written above.

Signed, sealed and delivered in our presence: NORTH LAKE COUNTY HOSPITAL DISTRICT

Sign: [Signature]
Print Name: Thomas D. Talmage

By: [Signature]
Catherine C. Hanson
Chairperson

Sign: [Signature]
Print Name: MERRIE M. KIRSTE

Signed, sealed and delivered in our presence

LIFESTREAM PRIMARY CARE CLINIC

Sign: Melissa L. Altom
Print Name: Melissa L. Altom

By: Jonathan M. Cherry
Jonathan M. Cherry
President

Sign: Carol E. Dotter
Print Name: Carol E. Dotter

STATE OF FLORIDA

COUNTY OF LAKE

Personally appeared before me this 21st day of August, 2014, CATHERINE C. HANSON as Chairperson of the North Lake County Hospital District, who, being duly sworn on oath, says that she is the Chairperson of the North Lake County Hospital District and that she hereby acknowledges the execution of the foregoing Funding Agreement.

Merrie M. Kirste
Notary Public
My Commission Expires:

(SEAL)



STATE OF FLORIDA

COUNTY OF LAKE

Personally appeared before me this 21st day of August, 2014, Jonathan M. Cherry as President/CEO of the LIFESTREAM BEHAVIORAL CENTER, INC. d/b/a LIFESTREAM PRIMARY CARE CLINIC, who, being duly sworn on oath, says that he is the President/CEO of LifeStream Behavioral Center, Inc. and that he hereby acknowledges the execution of the foregoing Funding Agreement.

Melissa L. Altom
Notary Public
My Commission Expires: 8/23/2015

