

**SECOND AMENDMENT TO
AGREEMENT**

THIS SECOND AMENDMENT TO AGREEMENT entered into on the _____ day of _____, 2013 by and between:

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
(hereinafter referred to as "SBBC")
a body corporate and political subdivision of the State of Florida,
whose principal place of business is
600 Southeast Third Avenue,
Fort Lauderdale, Florida 33301

and

METROPOLITAN LIFE INSURANCE COMPANY
(hereinafter referred to as "MetLife")
whose principal place of business is
1200 Abernathy Road, N.E.
Building 600, Suite 1450
Atlanta, Georgia 30328

and

SAFEGUARD HEALTH PLANS, INC.
A MetLife, Inc. Company
(hereinafter referred to as "SafeGuard")
whose principal place of business is
95 Enterprise, Suite 200
Aliso Viejo, California 92656-2611

WHEREAS, SBBC and SafeGuard entered into an Agreement dated June 21, 2011 (hereinafter "Agreement") for Group Dental Insurance and Group Vision Insurance for School Board Employees under RFP 12-005V; and

WHEREAS, SBBC and SafeGuard entered into a First Amendment to Agreement dated August 21, 2012 (hereinafter "First Amendment"); and

NOW THEREFORE, in consideration of the premises and of the mutual covenants contained herein and the sum of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Parties hereby agree as follows:

ARTICLES

1. **Recitals.** The Parties agree that the foregoing recitals are true and correct and that such recitals are herein incorporated by reference.

2. **Premiums.** The premiums/rates for the period January 1, 2014 through December 31, 2014 shall be:

	<u>DHMO Basic</u>	<u>DHMO Enhanced</u>
Employee Only	\$ 10.87	\$ 14.80
Employee Plus One	18.62	25.59
Employee Plus Family	25.26	34.34
Dual Spouse	14.35	19.68

3. **Priority of Documents.** In the event of a conflict between the documents, the following priority of documents shall govern:

- First: Second Amendment to Agreement;
- Second: First Amendment to Agreement;
- Third: The Agreement;
- Fourth: Addendum Number Five [dated January 31, 2011] to the RFP;
- Fifth: Addendum Number Four [dated January 7, 2011] to the RFP;
- Sixth: Addendum Number Three [dated January 6, 2011] to the RFP;
- Seventh: Addendum Number Two [dated December 15, 2010] to the RFP;
- Eighth: Addendum Number One [dated December 15, 2010] to the RFP;
- Ninth: RFP 12-005V "Group Dental Insurance and Group Vision Insurance for School Board Employees"; and;
- Tenth: The Proposal submitted in response to the RFP by MetLife [dated February 4, 2011].

In case of any other doubt or difference of opinion, the decision of SBBC shall be final and binding on both parties.

4. **Terms of Agreement.** Except as expressly provided herein, all terms and conditions set forth in this Agreement and Amendment shall remain in force and effect for the contract term specified within this Addendum.
5. **Authority.** Each person signing this Amendment to Agreement on behalf of either party individually warrants that he or she has the full legal power to execute this Agreement on behalf of the party for whom he or she is signing, and to bind and obligate such party with respect to all provisions contained in this Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment to Agreement through their duly authorized representatives.

FOR SBBC

(Corporate Seal)

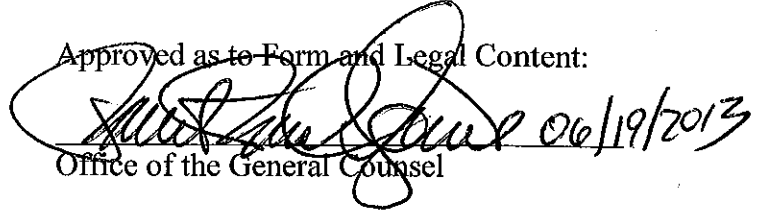
THE SCHOOL BOARD OF BROWARD
COUNTY, FLORIDA

ATTEST:

By: _____
Laurie Rich Levinson, Chair

Robert W. Runcie
Superintendent of Schools

Approved as to Form and Legal Content:

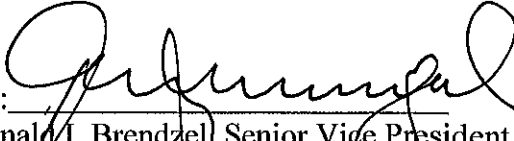
 06/19/2013
Office of the General Counsel

**FOR METROPOLITAN LIFE INSURANCE COMPANY
AND
SAFEGUARD HEALTH PLANS, INC.**


Metropolitan Life Insurance Company

(Corporate Seal)

Attest: _____
Secretary

By: 
Ronald I. Brendzel, Senior Vice President
~~and General Counsel~~, SafeGuard Health
Plans, Inc., And ~~Associate General Counsel~~, **VICE**
Metropolitan Life Insurance Company **PRESIDENT**

-Or-


Witness Sheri Lawson

Nichole Coman
Witness Nichole Coman

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 2013,
by Ronald I. Brendzel of Metropolitan Life Insurance Company. He took an oath and is
personally known to me or has produced _____ as identification.

My Commission expires:

(SEAL)

Signature – Notary Public

My Commission expires:

Printed Name of Notary

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of Orange }

On June 17, 2013 before me, Kathryn S. Viau, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Ronald J. Brundage
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal Above

Signature [Signature]
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: _____

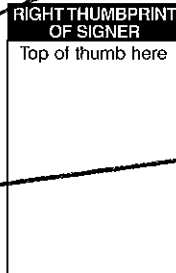
Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

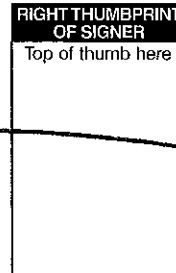
- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: _____



Signer Is Representing: _____

Signer's Name: _____

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: _____



Signer Is Representing: _____
