

## **FIRST AMENDMENT TO CONSULTANT SERVICES AGREEMENT**

THIS FIRST AMENDMENT TO THE AGREEMENT (Amendment) made and entered into effective the \_\_\_\_ of May 2025, (Effective Date) between the CITY OF FRESNO, a California municipal corporation (City), and BPR Consulting Group, LLC. (Consultant).

### **RECITALS**

WHEREAS, the City and the Consultant entered into an agreement on December 14, 2023 (Agreement), to provide professional plan checking, back checking, and inspection services on an as needed basis (Project); and

WHEREAS, the initial term of the Agreement was for a total fee not to exceed \$150,000 for a term effective from December 14, 2023, through December 31, 2025; and

WHEREAS, City and Consultant now desire to increase the Consultant's total compensation by \$42,500 for a total of \$192,500 and to extend the term of the Agreement to June 30, 2026, to complete the terms of the Agreement; and

WHEREAS, with entry into this Amendment, the Consultant agrees it has no claim, demand, or dispute against the City and affirms that it will abide by all obligations contained in the Agreement.

### **AGREEMENT**

NOW, THEREFORE in consideration of the above recitals, which recitals are contractual in nature, the mutual promises herein contained, and for other good and valuable consideration hereby acknowledged, the parties agree that the aforesaid Agreement be amended as follows: The recitals to this Amendment are incorporated and made a part of this Amendment.

1. The Consultant's sole compensation for satisfactory performance of all services required or rendered pursuant to this Amendment shall be a total fee of \$42,500 for a total contract value of \$192,500.

2. The term of the Agreement shall be extended up to and including June 30, 2026.

3. In the event of any conflict between the body of this Amendment and any Exhibit or Attachment hereto, the terms and conditions of the body of this Amendment shall control and take precedence over the terms and conditions expressed within the Exhibit or Attachment. Furthermore, any terms or conditions contained within any Exhibit or Attachment hereto which purport to modify the allocation of risk between the Parties, provided for within the body of this Amendment, shall be null and void.

4. Except as otherwise provided herein, the Agreement entered into by the City and the Consultant on December 14, 2023, remains in full force and effect.

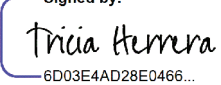
[SIGNATURES FOLLOW ON THE NEXT PAGE.]

IN WITNESS WHEREOF, the parties have executed this Amendment at Fresno, California, on the day and year first above written.

CITY OF FRESNO,  
A California municipal corporation

By: \_\_\_\_\_  
Georgeanne A. White  
City Manager

APPROVED AS TO FORM:  
ANDREW JANZ  
City Attorney


By:  \_\_\_\_\_ 5/15/2025  
Tricia Herrera  
Deputy City Attorney Date

ATTEST:  
TODD STERMER, MMC  
City Clerk

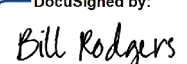
By: \_\_\_\_\_  
Deputy Date

Addresses:  
CITY:  
City of Fresno  
Attention: Nadia Salinas  
Project Manger  
2600 Fresno St, Room 3065  
Fresno, CA 93721  
Phone: (559) 621-8150  
Email: Nadia.Salinas@fresno.gov

BPR CONSULTING GROUP, LLC.,  
California

By:  \_\_\_\_\_  
Name: Ron Beehler  
Director

Title: \_\_\_\_\_  
(If corporation or LLC., Board Chair,  
President or Vice President)

By:  \_\_\_\_\_  
Name: Bill Rodgers  
Principal

Title: \_\_\_\_\_  
(If corporation or LLC., CFO, Treasurer,  
Secretary or Assistant Secretary)

CONSULTANT:  
BPR Consulting Group, LLC  
Attention: Ron Beehler, SE, CBO  
2201 Francisco Drive, Suite 104-658  
El Dorado Hills, CA 95762  
Phone: (916) 204-3175  
Email: rbeehler@bpr-grp.com



**Secretary of State**  
**Statement of Information**  
 (Limited Liability Company)

**LLC-12**

21-D38212

**FILED**

In the office of the Secretary of State  
 of the State of California

JUL 06, 2021

**This Space For Office Use Only**

**IMPORTANT — Read instructions before completing this form.**

**Filing Fee — \$20.00**

**Copy Fees —** First page \$1.00; each attachment page \$0.50;  
 Certification Fee - \$5.00 plus copy fees

**1. Limited Liability Company Name** (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

BPR CONSULTING GROUP LLC

**2. 12-Digit Secretary of State File Number**

202118210521

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

CALIFORNIA

**4. Business Addresses**

a. Street Address of Principal Office - Do not list a P.O. Box

2201 Francisco Drive, Ste 140-658

City (no abbreviations)

El Dorado Hills

State

CA

Zip Code

95762

b. Mailing Address of LLC, if different than item 4a

2201 Francisco Drive, Ste 140-658

City (no abbreviations)

El Dorado Hills

State

CA

Zip Code

95762

c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box

2201 Francisco Drive, Ste 140-658

City (no abbreviations)

El Dorado Hills

State

CA

Zip Code

95762

**5. Manager(s) or Member(s)**

If no managers have been appointed or elected, provide the name and address of each member. At least one name and address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A (see instructions).

a. First Name, if an individual - Do not complete Item 5b

Ronald

Middle Name

J.

Last Name

Beehler

Suffix

b. Entity Name - Do not complete Item 5a

c. Address

2201 Francisco Drive, Ste 140-658

City (no abbreviations)

El Dorado Hills

State

CA

Zip Code

95762

**6. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** — Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)

Ronald

Middle Name

J.

Last Name

Beehler

Suffix

b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box

2201 Francisco Drive, Ste 140-658

City (no abbreviations)

El Dorado Hills

State

CA

Zip Code

95762

**CORPORATION** — Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 6a or 6b

**7. Type of Business**

a. Describe the type of business or services of the Limited Liability Company

Consulting

**8. Chief Executive Officer, if elected or appointed**

a. First Name

Middle Name

Last Name

Suffix

b. Address

City (no abbreviations)

State

Zip Code

**9. The Information contained herein, including any attachments, is true and correct.**

07/06/2021

Ronald J. Beehler

Director

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. [SEE INSTRUCTIONS BEFORE COMPLETING.](#))

Name:

Company:

Address:

City/State/Zip:



**Attachment to  
Statement of Information  
(Limited Liability Company)**

**LLC-12A  
Attachment**

21-D38212

**A. Limited Liability Company Name**

BPR CONSULTING GROUP LLC

This Space For Office Use Only

**B. 12-Digit Secretary of State File Number**


202118210521

**C. State or Place of Organization** (only if formed outside of California)

CALIFORNIA

**D. List of Additional Manager(s) or Member(s)** - If the manager/member is an individual, enter the individual's name and address. If the manager/member is an entity, enter the entity's name and address. Note: The LLC cannot serve as its own manager or member.

First Name William	Middle Name T.	Last Name Rodgers	Suffix
Entity Name			
Address 2201 Francisco Drive, Ste 140-658		City (no abbreviations) El Dorado Hills	State CA Zip Code 95762
First Name Roger	Middle Name E.	Last Name Peterson	Suffix
Entity Name			
Address 2201 Francisco Drive, Ste 140-658		City (no abbreviations) El Dorado Hills	State CA Zip Code 95762
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address		City (no abbreviations)	State Zip Code
First Name	Middle Name	Last Name	Suffix
Entity Name			
Address		City (no abbreviations)	State Zip Code
First Name	Middle Name	Last Name	Suffix
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**4. Business Addresses**

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<b>a. First Name, if an individual</b> - Do not complete Item 5b Ronald	Middle Name J.	Last Name Beehler	Suffix
<b>b. Entity Name</b> - Do not complete Item 5a			
<b>c. Address</b> 2201 Francisco Drive, Ste 140-658	City (no abbreviations) El Dorado Hills	State CA	Zip Code 95762

**6. Service of Process** (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete Items 6a and 6b only. Must include agent's full name and California street address.

<b>a. California Agent's First Name</b> (if agent is not a corporation) Ronald	Middle Name J.	Last Name Beehler	Suffix
<b>b. Street Address</b> (if agent is not a corporation) - Do not enter a P.O. Box 2201 Francisco Drive, Ste 140-658	City (no abbreviations) El Dorado Hills	State CA	Zip Code 95762

CORPORATION — Complete Item 6c only. Only include the name of the registered agent Corporation.

<b>c. California Registered Corporate Agent's Name</b> (if agent is a corporation) - Do not complete Item 6a or 6b
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**7. Type of Business**

<b>a. Describe the type of business or services of the Limited Liability Company</b> Consulting
--

**8. Chief Executive Officer, if elected or appointed**

<b>a. First Name</b>	Middle Name	Last Name	Suffix
<b>b. Address</b>	City (no abbreviations)	State	Zip Code

**9. The Information contained herein, including any attachments, is true and correct.**

07/06/2021

Ronald J. Beehler

Director

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. [SEE INSTRUCTIONS BEFORE COMPLETING.](#))

Name: [ ]

Company:

Address:

City/State/Zip: [ ]





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