

**TAMPA-HILLSBOROUGH COUNTY
EXPRESSWAY AUTHORITY**

ADDENDUM NO. 2

FOR

REQUEST FOR QUALIFICATIONS (RFQ)

Disclosure Counsel Services

RFQ No. L-00120

ADDENDUM NO. 2

PROJECT NAME: **Disclosure Counsel Services**

DATE OF ADDENDUM: March 02, 2020

PLEASE NOTE THE FOLLOWING ADDENDUM TO THE ELOI:

The following are changes (which are highlighted) to the “TIMETABLE” section of the RFQ:

EVENT	DATE/TIME
Release of RFQ	January 31, 2020
Deadline for Questions/Request for Clarification	February 14, 2020
Addendum Release (if required)	February 17, 2020
RFQ Due Date/Time (Deadline)	March 06, 2020 by 2 p.m. EST
Evaluation Committee meets to evaluate proposals at: 1104 E Twiggs Street, Suite 300, Tampa, Florida 33602 <i>(Firms are not required to attend, however, this meeting is open to the public)</i>	March 11, 2020 @ 11:00 a.m. March 13, 2020 @ 10 a.m. March 12, 2020 @ 11 a.m.
Posting of Notice of Intended Final Ranking	March 13, 2020
Board Approval of Final Ranking & Award of Contract	March 23, 2020
Posting of Notice of Board Approval & Award of Contract	March 24, 2020

Firms MUST acknowledge receipt of this Addendum with their proposal.

All other items, conditions, and specifications in the RFQ document not specifically changed by the Addendum remain unchanged.

Firms failing to acknowledge the addendum issued may be deemed non-responsive to the RFQ. Please send all questions to THEA’s Procurement Manager, Man Le, via email at Man.Le@tampa-xway.com.

**ACKNOWLEDGEMENT OF RECEIPT OF ADDENDUM and/or
LETTER OF CLARIFICATION**

Addenda issued on this Solicitation?

- Yes
 No

Letter of Clarification issued on this Solicitation?

- Yes
 No

I (We) hereby acknowledge receipt of the following Addendum/Addenda or Letter of Clarification issued in reference to this solicitation by listing the number, date and signing the form:

Addendum _____ Date: _____

Addendum _____ Date: _____

Letter of Clarification _____ Date: _____

Letter of Clarification _____ Date: _____

FIRM:

By: _____
Authorized Signature

Printed Name of Signer

Title of Signer

Date Signed

[END OF ACKNOWLEDGMENT OF RECEIPT FORM]