CONTRACT RENEWAL NO. 2

This amendment by and between the Supplier and State Entity defined below shall be effective as of the date this Amendment is fully executed. To the extent the contract requires the State Entity to issue a Notice of Award Amendment for purposes of exercising the renewal option, this written document shall serve as such Notice of Award Amendment.

STATE OF GEORGIA CONTRACT	
State Entity's Name:	Georgia Department of Corrections
Supplier's Full Legal Name:	Correct Rx Pharmacy Services, Inc.
Contract No.:	46700-054-GDC0000930
Solicitation No./Event ID:	46700-GDC0000930
Solicitation Title/Event Name:	Offender Pharmacy Services
Contract Award Date:	4/1/2021
Current Contract Term:	07/01/2021 - 6/30/2022
Amendment No.:	5

WHEREAS, the Contract is in effect through the Current Contract Term as defined above; and

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties do hereby agree as follows:

1. **CONTRACT RENEWAL/EXTENSION.** The parties hereby agree that the contract will be renewed/extended for an additional period of time as follows:

NEW CONTRACT TERM	
Beginning Date of New Contract Term:	7/1/2022
End Date of New Contract Term:	6/30/2023

The parties agree the contract will expire at midnight on the date defined as the "End Date of the New Contract Term" unless the parties agree to renew/extend the contract for an additional period of time.

2. **SUCCESSORS AND ASSIGNS.** This Amendment shall be binding upon and inure to the benefit of the successors and permitted assigns of the parties hereto.

3. **ENTIRE AGREEMENT.** Except as expressly modified by this Amendment, the contract shall be and remain in full force and effect in accordance with its terms and shall constitute the legal, valid, binding and enforceable obligations to the parties. This Amendment and the contract (including any written amendments thereto), collectively, are the complete agreement of the parties and supersede any prior agreements or representations, whether oral or written, with respect thereto.

IN WITNESS WHEREOF, the parties have caused this Amendment to be duly executed by their authorized representatives.

CONTRACTOR

Contractor's Full Legal Name: (PLEASE TYPE OR PRINT)	Correct RX Pharmacy Services Inc.
Authorized Signature:	Ellen H. Yankellow
Printed Name and Title of Person Signing:	Ellen H. Yankellow, PharmD President and CEO
Date:	June 27, 2022
Company Address:	1352 CHARWOOD RD HANOVER, MD 21076-3125

STATE ENTITY

Authorized Signature:	R Barrineau
Printed Name and Title of Person Signing:	Ross Barrineau, GCPM, GCPCA Agency Procurement Officer
Date:	6/28/2022
Company Address:	State Offices South – Tift Campus 300 Patrol Road Forsyth, Georgia 30129