



**Town of Davie
Town Attorney Contract Summary Exemption Form**

| Type of Agreement | | Entity Information |
|--|-------------------------------------|--|
| Developer Agreement: | <input type="checkbox"/> | Entity: Sunshine Nursing Care, PLLC |
| Grant Agreement: | <input type="checkbox"/> | Contact Name: Nademeh Vega |
| Interlocal Agreement: | <input type="checkbox"/> | Entity Address: 4151 SW 87th Terrace, Cooper City, FL 33328 |
| Amendment (Created by Town Attorney): | <input type="checkbox"/> | Entity Phone: 954-554-2912 |
| Other: Addendum to Professional Services Agreement | <input checked="" type="checkbox"/> | Entity E-Mail: Nana_k91@hotmail.com |

Reason for Exception

Requesting an addendum to the professional services agreement for Sunshine Nursing Care, PLLC. This request is for the purpose of satisfying a grant requirement to clarify contracted support services for the grant agreement between DOH-Broward and the Town of Davie Fire Rescue Department for the Florida Department of Health in Broward County (DOH-Broward) for Contract #BW846 to implement the Overdose and Post-Overdose Co-Responder Model. The program will provide harm reduction services, linkage to care and social support services for individuals involved in substance-related emergencies.

The Town Attorney has reviewed the attached documentation and finds it to be compliant with all rules, regulations, and laws regarding the Town of Davie, Broward County and the State of Florida and other legal requirements.

| Signatures | |
|---|----------------------|
| Department Director Signature: <i>d. Henry</i> | Date: <i>4/28/26</i> |
| Town Attorney Signature: <i>Alle Weichel</i> | Date: <i>4/28/26</i> |