



## Notice of Material Change to the Vendor Contract

Pursuant to the terms of your awarded vendor contract, all vendors must notify Region 4 Education Service Center ("Region 4") when any material change in operations, that may adversely affect members, (i.e. assignment, bankruptcy, change of ownership, merger, etc.) is made. No material change may be made to the contract without the prior written approval of Region 4. Region 4 reserves the right to accept or reject any new party.

Audio Visual Innovations, Inc. \_\_\_\_\_ (vendor company name) hereby provides notice of the following material change  
contract number: R201201 to on this date 6-3-2024

**Instructions:** (Vendors must check all that may apply and provide supporting documentation. Place your initials next to each item to confirm that documents are, indeed, included. Be sure to sign the signature page with all require signatures, prior to submitting your notice to Region 4 for approval).

- Assignment
    - Change in ownership (*sale/purchase*)
    - Asset Purchase Agreement
    - Other supporting documentation
  - Bankruptcy
    - Acquisition
    - Asset Purchase Agreement
    - Other supporting documentation
  - Merger
    - Other
    - Supporting documentation
- Indicate if you are assigning to your own subsidiary  
 Assumption Agreement  
 Other supporting documentation  
 Official legal Notice of Bankruptcy Proceedings  
 Other supporting documentation  
 Share Exchange Agreement  
 Merger and Acquisition Agreement  
 Asset Purchase Agreement  
 Other supporting documentation

Notes: Vendor may include any other notes regarding the material change here: (attach another page if necessary).

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Changed name from Audio Visual Innovations, Inc. to AVI-SPL LLC as of January 2021. Federal ID number stayed the same (59-1958935), remit to address remains the same: PO Box 844612 Boston, MA. 02284-4612.

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Upon approval of this notice, the awarded contract holder and/or subsequent assignee agree to and understand the following principles:

i. **Contract holder reference.** If the contract holder undergoes a merger, acquisition, or partial assignment, in which case they still maintain the contract, then all transactions made under the existing contract number (including purchase orders) must reference the name of the awarded contract holder. The exception to this requirement is if the contract holder no longer holds the contract or if the company has been acquired by another company and undergone a name change. Notice of the authorized name change, to the existing contract, must be provided and approved by Region 4.



In instances where the contract holder has acquired a separate and distinct company, and it is necessary to designate those certain purchases facilitated by the non-contract holder, then this designation may be made if, and only if, the contract holder is also referenced on the transaction.

ii. **Maintenance of records.** Both the awarded contract holder and subsequent assignee agree to remain responsible for maintaining all auditable records, including documents kept in the ordinary course of business and sales invoices, related to OMNIA Partners, Public Sector and/or contract number pursuant to the statutory requirements identified in the vendor contract.

iii. **Payments.** Both the awarded contract holder and subsequent assignee agree that all payments made by participating entities must be made directly to the contract holder, unless otherwise approved by Region 4. Accordingly, both parties acknowledge that in instances where it is necessary to designate the purchases facilitated by assignee, that the contract holder must also be referenced on the purchase order.

iv. **Handling of Proprietary and/or Confidential Information.** In accord with the terms of the contract, both awarded vendor and assignee agree that at all times it will hold in strict confidence and not disclose to any third party Confidential and/or Proprietary information of Region 4, except as approved in writing by Region 4, and will use the Confidential Information for no purpose other than providing services under the contract. Both awarded vendor and assignee shall only permit access to Confidential Information to those of its employees or authorized representatives having a need to know and who have signed confidentiality agreements or are otherwise bound by confidentiality obligations at least as restrictive as those contained herein.

This document is to be construed in strict accordance with the terms and conditions outlined in the Region 4/vendor master agreement referenced herein. Both awarded vendor and assignee agree to uphold the vendor obligations set forth in the vendor agreement. This Agreement will become effective when signed by all parties.

**AGREED AND ACCEPTED AS OF THE DATE FIRST SET FORTH ABOVE:**

**Company name of awarded vendor**  
Audio Visual Innovations, Inc.

**Official name of assigned or added company**  
AVI-SPL LLC

Steve Benjamin,  
Executive Vice President,  
BY: AVI-SPL LLC  
Digitally signed by Steve Benjamin,  
Executive Vice President, AVI-SPL  
LLC  
Date: 2024.06.03 11:19:34 -04'00'

Steve Benjamin, Executive  
Vice President, AVI-SPL LLC  
BY:  
Digitally signed by Steve Benjamin,  
Executive Vice President, AVI-SPL LLC  
Date: 2024.06.03 11:20:09 -04'00'

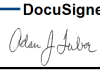
NAME: Steve Benjamin

NAME: Steve Benjamin

TITLE: Executive Vice President

TITLE: Executive Vice President


**Region 4 Education Service Center**

DocuSigned by:  
BY:   
A5A9F62707BB46B...

NAME: Adam Tabor

TITLE: Director, Procurement

DATE: 6/12/2024 | 4:10 PM CDT

 CW Region 4 1st Initial Review



Corporate HQ  
6301 Benjamin Road, Suite 101  
Tampa, FL 33634  
phone 813.884.7168  
toll free 800.282.6733  
fax 813.882.9508  
www.avispl.com

**January 1, 2021**

**Re: Audio Visual Innovations, Inc. to Rebrand as AVI-SPL LLC**

Dear Valued Customer:

We are excited to announce that Audio Visual Innovations, Inc. has undergone an internal consolidation and, effective January 1, 2021, is re-branding as AVI-SPL LLC (the "Rebranding"). The Rebranding is a simplification of our internal legal entity structure and will not result in any change in our ownership or management. Aside from change in name from Audio Visual Innovations, Inc. to AVI-SPL LLC, our remittance information will remain the same. We have included a W-9 for AVI-SPL LLC.

Rest assured, the Rebranding will have no effect on our great products and services that you know and have come to expect. We look forward to continuing our valued relationship with you.

Sincerely,

By: *Steve Benjamin*

Name: Steve Benjamin

Title: Executive Vice President

Form **W-9**  
(Rev. October 2018)  
Department of the Treasury  
Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

AVI-SPL LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC     C Corporation     S Corporation     Partnership     Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ **C**  
**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

*(Applies to accounts maintained outside the U.S.)*

5 Address (number, street, and apt. or suite no.) See instructions.

6301 BENJAMIN ROAD, SUITE 101

6 City, state, and ZIP code

TAMPA, FL 33634

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type. See Specific Instructions on page 3.

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number  
[ ][ ] - [ ][ ] - [ ][ ][ ][ ]

or  
Employer identification number  
5 9 - 1 9 5 8 9 3 5

## Part II Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person ▶

Date ▶

January 10, 2024

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.



6301 Benjamin Road, Suite 101  
Tampa, FL 33634  
phone: 813.884.7168  
toll free: 800.282.6733  
fax: 813.882.9508  
[www.avispl.com](http://www.avispl.com)

Dear Valued Customer:

To ensure that your payments are processed without delay, it is recommended that you review the detail below and update your Accounts Payable systems with the appropriate remittance information.

AVI-SPL LLC (FEIN 59-1958935) is a single member LLC.

**ACH / Fed Wire Remittance (Preferred Method):**

**Routing/Transit # 211170101**  
**Account # 0010962666**

Webster Bank  
436 Slater Road, New Britain , CT 06053  
Contact: Darija Musovski (212) 806-4541  
Remit email: [ARRESOURCES@AVISPL.COM](mailto:ARRESOURCES@AVISPL.COM)

**Remittance Address via USPS:**

AVI-SPL LLC  
PO Box 844612  
Boston, MA 02284-4612

**Correspondence Address/Overnight Payments:**

AVI-SPL  
Attn: Accounts Receivable  
6301 Benjamin Road, Suite 101  
Tampa, FL 33634

If you have questions, please feel free to contact us directly at (888) 884-7168.

Michael Chitty  
Director, Credit & Collections  
813-884-7168 ext. 2009  
[Mike.Chitty@avispl.com](mailto:Mike.Chitty@avispl.com)