

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/16/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER					CONTACT Arlene Rodriguez							
CRC Insurance Services, Inc.					(A/C, No, Ext).					92-1144		
THE ABC PROGRAM					E-MAIL ADDRESS: arodriguez@falconinsurance.com							
One Metroplex Dr., Suite 400					INSURER(S) AFFORDING COVERAGE					NAIC#		
Birmingham, AL 35209					INSURER A: Ace American Insurance Company							
INSURED						INSURER B:						
Yellow Submarine, Inc						INSURER C:						
P.O. Box 1815					INSURER D :							
Destin, FL 32541					INSURER E :							
Destill, 1 E 02041												
COVEDAGES CERTIFICATE NUMBER.					REVISION NUMBER:							
COVERAGES CERTIFICATE NUMBER: REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD											ICY PERIOD	
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.												
INSR TYPE OF INSURANCE			SUBR POLICY NUMBER			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
	OMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$ 1		\$ 1,00	00,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTI PREMISES (Ea occu	ED	\$ Exc	luded	
								MED EXP (Any one		\$ 5,00		
A -		Υ	N	SVRD95394553-005		2/18/2024	2/18/2025	PERSONAL & ADV INJURY \$ Excl				
	AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	4 000 000			
	PRO- X								COMP/OP AGG \$ Excluded			
								PRODUCTS - COMP	P/OP AGG	\$ = 100	luucu	
	THER: IOBILE LIABILITY							COMBINED SINGLE	LIMIT	\$		
ANY AUTO								(Ea accident) BODILY INJURY (Pe	ar person)	\$		
		SCHEDULED						BODILY INJURY (Pe		\$		
L AU	JTOS ONLY AUTOS RED NON-OWNED							PROPERTY DAMAG				
AU	JTOS ONLY AUTOS ONLY							(Per accident)		\$		
										\$		
-	MBRELLA LIAB OCCUR							EACH OCCURRENCE	CE	\$		
EX	CESS LIAB CLAIMS-MADE							AGGREGATE		\$		
DE								I DED	T OTIL	\$		
	RS COMPENSATION IPLOYERS' LIABILITY Y/N							PER STATUTE	OTH- ER			
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDEN	NT	\$		
(Mandatory in NH)								E.L. DISEASE - EA E	MPLOYEE	\$		
DESCRI	escribe under PTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
Hangar ad	Idress: 1001 Airport Rd. Lot 3 Blk	182	Desi	tin FL 32541								
Hangar address: 1001 Airport Rd. Lot 3 Blk 1&2. Destin, FL 32541												
Certificate holder is included as additional insured. We will endeavor to provide ten (10) days Notice of Cancellation												
Building \/	alue is \$220,419											
Dullullig V	aide 13 4220,413				_		00.0045	AD				
					LEASE: L08-0345-AP							
CERTIFICATE HOLDER					YELLOW SUBMARINE, INC.							
OLIVIII IOATE HOLDER					DAP BLOCK 3/LOT 1 XFERED FM #L218							
					EXPIRES: 01/07/2035							
						EATIRES. 01/01/2000						
Okaloosa County												
5479A Old Bethel Road												
Crestview, FL 32536					AUTHORIZED REPRESENTATIVE							
						Arlene Rodriguez						