MSUMMERLIN

DATE (MM/DD/YYYY) 2/19/2024

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

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).

PRC	DDUCER				CONTACT NAME:					
	rke Agency, LLC Commerce St.	PHONE (A/C, No, Ext): (334) 263-5535 FAX (A/C, No): (3				(334) 2	64-3375			
	ntgomery, AL 36104	E-MAIL ADDRESS: info@starkeagency.com								
					INS	URER(S) AFFO	RDING COVERAGE			NAIC#
					INSURER A: Travele	rs Prop Ca	s Co of			25674
INSU	URED	INSURER B: Travelers Indemnity Co.					25658			
	KAM Technologies, LLC				INSURER C : Safety I					15105
	151 Market Pl				INSURER D : Navigat					42307
	Montgomery, AL 36117				INSURER E :					
					INSURER F:					
CO	VERAGES CER	REVISION NUMBER:								
T IN C	HIS IS TO CERTIFY THAT THE POLICIE NDICATED. NOTWITHSTANDING ANY R SERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	S O EQU PER	F INS IREM TAIN,	SURANCE LISTED BELOWN ENT, TERM OR CONDITION THE INSURANCE AFFORD	N OF ANY CONTRAC DED BY THE POLICE	CT OR OTHER IES DESCRIE	RED NAMED ABO R DOCUMENT WIT BED HEREIN IS SI	VE FOR T	CT TO	WHICH THIS
INSR LTR			SUBR		POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYYY			LIMIT	· c	
A	X COMMERCIAL GENERAL LIABILITY		WVD	TOLICT NOWIDER	(MM/DD/YYYY)	(MM/DD/YYYY)				1,000,000
	CLAIMS-MADE X OCCUR			ZLP-16P23063-24-I5	1/31/2024	1/31/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)		\$	300,000
							MED EXP (Any one person)		\$	10,000
							PERSONAL & ADV		\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREC		\$	2,000,000
	X POLICY PRO- LOC						PRODUCTS - COMP/OP AGG		\$	2,000,000
	OTHER:						EMPLOYEE BI		\$	3,000,000
В	AUTOMOBILE LIABILITY						COMBINED SINGLE (Ea accident)	LIMIT	\$	1,000,000
	X ANY AUTO		l	BA-1T249455-24-I5-G	1/31/2024	1/31/2025	BODILY INJURY (Pe		\$	
	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Pa	er accident)	\$	
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAG (Per accident)	E	\$	
	AUTOS ONET						(1.01.000,001,1)		\$	
Α	X UMBRELLA LIAB X OCCUR					1/31/2025	EACH OCCURRENCE	CF.	\$	1,000,000
	EXCESS LIAB CLAIMS-MADE			CUP-1T249535-24-I5	1/31/2024		AGGREGATE		\$	1,000,000
	DED X RETENTION\$ 10,000						7,001,120,112		\$	
С	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER STATUTE	OTH- ER		
				PRE4004287	1/1/2024	1/1/2025	E.L. EACH ACCIDE		\$	2,000,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. DISEASE - EA I		<u> </u>	2,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POL		\$	2,000,000
С	Worker's Comp			4010903	1/1/2024	1/1/2025	Statutory	JOT LINIT	<u> </u>	
D	Professional Liab			MR24PTLZ0DCCWIC	1/31/2024	1/31/2025	Aggregate: 1,0	00,000		1,000,000
whe With By v emp	icription of operations / Locations / Vehicle loosa County BOCC and their agents, or the required by written contract. Coverage respect to the Workers Compensation: waiving subrogation, the employer and soloyer and servicing agent may not file a visions of the Alabama Workers Compensations of the Alabama Workers Compensations.	ge is ervi	prim cing a m or	ary and non-contributory. agent may still receive r a law suit against Okalo	CONTRA Kam Techn	m. \CT: C	23-3297 , Inc.		omobile	er, the
CE	RTIFICATE HOLDER	Network &	Cabling	Repairs						
					EXPIRES:0	1/31/20	26 w/2 1 y			<i>_</i>
	Okaloosa County BOCC 5479A Old Bethel Road Crestview, FL 32536	ACCORDANCE WITH THE POLICY PROVISIONS.								
	·				AUTHORIZED REPRESE	NTATIVE				