							MA	CRINC-01		SLP
Ą	C	ORD C	ER	RTI	FICATE OF LIABI		SURAN	CE		(MM/DD/YYYY)
C B R	ERT ELO EPR	CERTIFICATE IS ISSUED AS A IFICATE DOES NOT AFFIRMATI W. THIS CERTIFICATE OF INS ESENTATIVE OR PRODUCER, AN	VEL'	Y OF NCE HE C	R NEGATIVELY AMEND, EXT DOES NOT CONSTITUTE A ERTIFICATE HOLDER.	END OR ALT CONTRACT	ER THE CO	VERAGE AFFORDED	E HO BY TH S), AU	E POLICIES JTHORIZED
lf	SU	RTANT: If the certificate holder BROGATION IS WAIVED, subject	t to:	the	terms and conditions of the pe	olicy, certain	policies may			
	DUCE	ertificate does not confer rights to	5 the	cert	CONT		ŀ			
Dwi 500	ght / Dov	Andrus Insurance er Blvd. Ste. 110 e, LA 70503			PHON (A/C, I	E No, Ext): (337) 9 ESS: CUStome			(337)	984-2166
	.,	.,								NAIC #
						ER A : Indian				36940
INSL	RED					ERB: XL Spe				37885
		Macro Companies, Inc. See 2nd Page for Named Ins	ured	I		ERC:XL Spe				37885
		101 Millistone Rd.						<u>s' Comp. Corp.</u>		22350 24147
		Broussard, LA 70518				ER F :	public mán	rance Company		2414/
	VER	AGES CER	TIFIC		ENUMBER:			REVISION NUMBER:		<u> </u>
T ⊪ C	HIS I IDICA ERTI	IS TO CERTIFY THAT THE POLICIE ATED. NOTWITHSTANDING ANY R FICATE MAY BE ISSUED OR MAY	EQUI PER	E INS REM	SURANCE LISTED BELOW HAVE ENT, TERM OR CONDITION OF THE INSURANCE AFFORDED E	ANY CONTRA	CT OR OTHER	ED HEREIN IS SUBJECT T	CT TO	WHICH THIS
INSR LTR		JSIONS AND CONDITIONS OF SUCH TYPE OF INSURANCE	ADDL	SUBR		POLICY EFF	POLICY EXP			
A	X		INSD	WVD			(MM/OD/YYYY)	EACH OCCURRENCE	e	1,000,000
		CLAIMS-MADE X OCCUR	x	x	GEC0020156-17	3/2/2023	3/2/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	s.	100,000
)	MED EXP (Any one person)	\$	5,000
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:	ĺ	ĺ				GENERAL AGGREGATE	\$	2,000,000
	-							PRODUCTS - COMP/OP AGG	\$\$	2,000,000
В	AUI							COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X	ANY AUTO	Х	Х	AEC002015417/AEC00201551	7 3/2/2023	3/2/2024	BODILY INJURY (Per person)	<u>\$</u>	
1	X	AUTOS ONLY HIRED AUTOS ONLY HIRED AUTOS ONLY						BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$\$	
	<u> </u>		Ļ—-	ļ		<u>+</u>	ļ		\$	
С		UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE	x	x	UEC0034240-12	3/2/2023	3/2/2024	EACH OCCURRENCE	\$	10,000,000
-		DED X RETENTION \$ 10,000		<u> </u>	 	<u> </u>	[Y PER_ OTH-	\$	
D		RKERS COMPENSATION EMPLOYERS' LIABILITY Y / N		v	129593-D	3/2/2023	3/2/2024	<u> STATUTE ER</u>	-	1,000,000
	OFF	PROPRIETOR/PARTNER/EXECUTIVE	N/A	^		UI M LVLJ	VILILULY	E.L. EACH ACCIDENT	<u>\$</u>	1,000,000
	If yes	s, describe under	ĺ					E.L. DISEASE - EA EMPLOYEE		1,000,000
A					PEC0028648-13	3/2/2023	3/2/2024	E.L. DISEASE - POLICY LIMIT	<u> </u>	10,000,000
E	Wo	rkersComp Multi St	1		MWC 302555 09	3/2/2023	3/2/2024	Limits		1,000,000
Ded Mc eac	, incl itor (h cov	TION OF OPERATIONS / LOCATIONS / VEHIC: AR PHYSICAL DAMAGE Policy #Al ludes trailers per auto definition on Carrier Endorsement, form CA 23 30 vered trailer, Collision \$1,000 Deduc	polic) 10 1	:y. 3, in	cludes: Schedule of Trailer inter ach covered trailer	change Cover CONTRACT	age: \$30,000 : C20-28 MPANIES ,	Limit of Insurance, Comp 98-FLT INC .	-	
<u>~E</u>	<u>K }</u>	IVALE NULVER			ť	EMERGENC	Y FUEL S	ERVICES	NUMBER	т ——

Okaloosa County 5479A Old Bethel Road Crestview, FL 32536

EMERGENCY FUEL SERVICES EXPIRES: 12/16/2023 W/1 1 YR RENEWAL

AUTHORIZED REPRESENTATIVE -

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ACORD 25 (2016/03)

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AGENCY CUSTOMER ID: MACRINC-01

LOC #: 1

ADDITIONAL REMARKS SCHEDULE Page 1 of 3

AGENCY Dwight Andrus Insurance		NAMED INSURED Macro Companies, Inc.
POLICY NUMBER		See 2nd Page for Named Insured
SEE PAGE 1		Broussard, LA 70518
CARRIER	NAIC CODE	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1
ADDITIONAL REMARKS		
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO	ACORD FORM,	
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of	Liability Insurance	
	A) Environmenta	cs, LLC; Macro, Inc.; Macro Transport, LLC; Macro Management, al Specialties, LLC; Macro Oil Management, LLC; Macro
Form #EVPRL110a 0220 CONTRACTOR'S POLLUTION (JOB SITE) COVERA Job Site Coverage: \$10,000,000 Job Site Limit of Liability for each Pol \$10,000,000 Job Site Aggregate Limit of Liability \$25,000 Job Site Self-Insured Retention Amoun Retroactive Date: June 4, 2009 •Blanket Additional Named Insured: Additional Na or Affiliated Entity is required by written contact of inception of the Policy Period, but solely to the ex development, operation, maintenance, financing of	llution Condition nt for each Pollu med Insured also agreement to tent such perso or use of Your L	n
	Site) Limit of Lia Site) Aggregate te) Self-Insured the following: npanies Inc. is also an Addi es that are rend	Limit of Liability Retention Amount for each Pollution Condition
Workers Compensation (129593) Endorsements: •Waiver of Our Right to Recover from Others Endo •Alternate Employer Endorsement: Blanket, Per Fe •Outer Continental Shelf Lands Act Coverage End •Longshore and Harbor Workers' Compensation A •Notice of Cancellation Endorsement: 30 days, pe	orm WC 00 03 0 orsement, per f Act Coverage Er	1A orm WC 00 01 09C idorsement, Per Form WC 00 01 06A
Other States Workers Compensation Policy #MW0 03/02/23-03/02/24 Old Republic Insurance Compar		des GA, FL, SC, NC, MS, TX, AL, AZ, OK, TN, MI Effective 00,000/1,000,000/1,000,000
Excess- Policy #AEC 9244966-11. Effective 03/02/ of \$10,000,000. XL policy - Follow Form **Excess Policy Number AEC9244966-11 does NO		eadfast Insurance Co., NAIC #26387 - Liability Limit \$10,000,000. XS roadened Pollution
contract to name as an additional insured: Any co	ten Contract exe o include as an overage provide	
ACORD 101 (2008/01)		© 2008 ACORD CORPORATION. All rights reserved.

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AGENCY CUSTOMER ID: MACRINC-01

LOC #: 1

MADKS SCHE

		ARNS SCHEDULE Page 2 or 3
AGENCY Dwight Andrus Insurance		NAMED INSURED Macro Companies, Inc. See 2nd Page for Named Insured 101 Millstone Rd.
		Broussard, LA 70518
CARRIER SEE PAGE 1	NAIC CODE	EFFECTIVE DATE: SEE PAGE 1
ADDITIONAL REMARKS	<u> </u>	
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC	ORD FORM.	
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liabil	•	
contract specifically requires that this policy be primar •Primary and NonContributory - Other Insurance Cond •Cancellation Notification to Others Endorsement: 30 I written contract that the Named Insured provide advan •Pollution Liability - Broadened Coverage for Covered 10 13 •Waiver of Transfer of Right of Recovery Against Other Agreement executed prior to loss (except where not pe •Wrong Delivery of Liquid Products, Form #CA 23 05 1 Auto (AEC002015417 & AEC002015517) Endorsements •Endorsement for Motor Carrier Policies of Insurance f per form MCS-90 01/05/2017	ry, per form ition, form Days advan iced writter Autos - Bus r to Us (Wa ermitted by 0 13	CA 04 49 11 16 ced notice of cancellation: Any person(s) or entity(ies) requiring by n notice of cancellation, per form IXI 405 0910 siness Auto and Motor Carrier Coverage Forms, per form CA 99 48 iver of Subrogation): Where Required by Written Contract or
	ions, vehic 1 04 13, Inc	
Coverage Part to the first Named Insured, this insurance a. As if each Named Insured were the only Named Insured b. Separately to each insured against whom claim is m •Additional Insured - Designated Person or Organization that such contract was executed prior to the date of los •Additional Insured - Designated Person or Organization required in a written oilfield contract, which is on file w Macro Oil Company, Macro Environmental Specialties, •Additional Insured - Lessor of Leased Equipment - Au 34 04 13 •Additional Insured - Owners, Lessees or Contractors written contract or written agreement to include as an subsequent to the execution of the written contract or •Additional Insured - Owners, Lessees or Contractors organization that you are required in a written oilfield of named insureds: Macro, Inc., Macro Oil Company, Mac form CG 20 37 10 01 •Additional Insured - Owners, Lessees or Contractors written contract or written agreement to include as an subsequent to the execution of the written contract or •Additional Insured - Owners, Lessees or Contractors written contract or written agreement to include as an subsequent to the execution of the written contract or •Additional Insured - Owners, Lessees or Contractors written contract or written agreement to include as an subsequent to the execution of the written contract or •Additional Insured - Owners, Lessees or Contractors required by written contract provided that such contract	ce applies: ared; and ade or "sui on - Any pe ss, per Forn on - This Er vith compan , LLC, to ind tomatic Sta - Competed additional i written agr - Completed additional i written agr - Scheduled ct was exed er to Us: Ar	it" is brought. rson or organization where required by written contract provided m CG 20 26 04 13 indorsement applies to any person or organization that you are my, and entered into by the following named insureds: Macro, Inc., clude as an additional insured, per form CG 20 26 11 85 atus When Required In Lease Agreement With You, per form CG 20 I Operations: Any person or organization that you are required in a insured provided the "bodily injury" or "property damage" occurs eement, Per Form CG 20 37 04 13 I Operations: The Endorsement Applies to any person or nich is on file with company, and entered into by the following mental Specialties, LLC, to include as an additional insured, per d Operations: Any Person or Organization that you are required in a insured provided the "bodily injury" or "property damage" occurs eement, Per Form CG 20 37 07 04 d Operations: Any Person or Organization that you are required in a insured provided the "bodily injury" or "property damage" occurs eement, per form CG 20 37 07 04 d Person or Organization: Any Person or Organization where cuted prior to the date of loss, per form CG 20 10 04 13 by Person or Organization where Required by written contract or

ACORD	

AGENCY CUSTOMER ID: MACRINC-01

LOC #: 1

Product Numbers Product Numbe		Insured	NAMED INSURED Macro Companies, Inc. See 2nd Page for Name 101 Millstone Rd.				AGENCY Dwight Andrus POLICY NUMBER
SEE PAGE 1 SEE P 1 EFFECTIVE DATE: SEE PAGE 1 ADDITIONAL REMARKS THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance •Designated Construction Project(s) General Aggregate Limit: Each "project" for which you have agreed, in a written com is in effect during this policy period, to provide a separate general aggregate limit; provided that, the contract is signed a executed prior to any loss which coverage is sought, per form CG 25 03 05 09 •Cancellation Notification to Others Endorsement: 30 days advanced notice of cancellation, Any person or organization to required in a written contract or written agreement to include as, per form IXI 405 0910 •Primary Insurance Clause Endorsement: It is agreed that to the extent that insurance is afforded to any Additional Insure this policy, this insurance shall apply as primary and not contributing with any insurance carried by such Additional Insure required by written contract, per form XL 424 0605 •CG 24 26 04 13 - Amendment of Insured Contract Definition - is hereby deleted with respects to the oilfield contracts, on company, and entered into by the following named insured's: Macro, Inc., Macro Oil Company, Inc., Macro Environmental Speciaties, LLC, Per form MANUS •Additional Insured - Controlling Interest: Lemoine Services Holdings, LP; Lemoine Services Sole Member, LLC; Lemoine Operations, LLC; The Lemoine Company, LLC, per form CG 20 05 12 19 Umbrella/Excess Policy Notable Endorsements/Terms: •Schedule of Underlying Insurance - Commercial Excess Follow Form and Umbrella Liability Policy per			Broussard, LA 70518				
ADDITIONAL REMARKS ADDITIONAL REMARKS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance Designated Construction Project(s) General Aggregate Limit: Each "project" for which you have agreed, in a written con is in effect during this policy period, to provide a separate general aggregate limit; provided that, the contract is signed a executed prior to any loss which coverage is sought, per form CG 25 03 05 09 Cancellation Notification to Others Endorsement: 30 days advanced notice of cancellation, Any person or organization t required in a written contract or written agreement to include as, per form IXI 405 0910 Primary Insurance Clause Endorsement: It is agreed that to the extent that insurance is afforded to any Additional Insure this policy, this insurance shall apply as primary and not contributing with any insurance carried by such Additional Insure required by written contract, per form XLI 424 0605 CG 24 26 04 13 - Amendment of Insured Contract Definition - is hereby deleted with respects to the oilfield contracts, on company, and entered into by the following named insured's: Macro, Inc., Macro Oil Company, Inc., Macro Environmenta Specialties, LLC, Per form MANUS *Additional Insured - Controlling Interest: Lemoine Services Holdings, LP; Lemoine Services Sole Member, LLC; Lemoine Operations, LLC; The Lemoine Company, LLC, per form CG 20 05 12 19 Umbrella/Excess Policy Notable Endorsements/Terms: *Schedule of Underlying Insurance - Commercial Excess Follow Form and Umbrella Liability Policy per form XCU 300 084 *Endorsement for Motor Carrier Policies of Insurance for Public Liability Under 29 and 30 of the Motor Carrier Act of 1980 MCS-90 01/05/2017 *Additional Insured Endorsement: Lemoine Services Holdings, LP; Lemoine Services Sole Member, LLC; Lemoine Service			1				
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability insurance Designated Construction Project(s) General Aggregate Limit: Each "project" for which you have agreed, in a written con s in effect during this policy period, to provide a separate general aggregate limit; provided that, the contract is signed a executed prior to any loss which coverage is sought, per form CG 25 03 05 09 Cancellation Notification to Others Endorsement: 30 days advanced notice of cancellation, Any person or organization the required in a written contract or written agreement to include as, per form IXI 405 0910 Primary Insurance Clause Endorsement: It is agreed that to the extent that insurance is afforded to any Additional Insure this policy, this insurance shall apply as primary and not contributing with any insurance carried by such Additional Insure this policy, this insurance, per form XIL 424 0605 CG 24 26 04 13 - Amendment of Insured Contract Definition - is hereby deleted with respects to the oilfield contracts, on company, and entered into by the following named insured's: Macro, Inc., Macro Oil Company, Inc., Macro Environmenta Speciatites, LLC, Per form MANUS Additional Insured - Controlling Interest: Lemoine Services Holdings, LP; Lemoine Services Sole Member, LLC; Lemoine Operations, LLC; The Lemoine Company, LLC, per form CG 20 05 12 19 Jmbrella/Excess Policy Notable Endorsements/Terms: Schedule of Underlying Insurance - Commercial Excess Follow Form and Umbrella Liability Policy per form XCU 300 084 Endorsement for Motor Carrier Policies of Insurance for Public Liability Under 29 and 30 of the Motor Carrier Act of 1980 WCS-90 01/05/2017 Additional Insured Endorsement: Lemoine Services Holdings, LP; Lemoine Services Sole Member, LLC; Lemoine Servic		<u> </u>	EFFECTIVE DATE: SEE PA	SEE P 1		9E 1	EE PAGE 1
ORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance Designated Construction Project(s) General Aggregate Limit: Each "project" for which you have agreed, in a written consist in effect during this policy period, to provide a separate general aggregate limit; provided that, the contract is signed a executed prior to any loss which coverage is sought, per form CG 25 03 05 09 Cancellation Notification to Others Endorsement: 30 days advanced notice of cancellation, Any person or organization to equired in a written contract or written agreement to include as, per form [XI 405 0910 Primary Insurance Clause Endorsement: It is agreed that to the extent that insurance is afforded to any Additional Insure on this policy, this insurance shall apply as primary and not contributing with any insurance carried by such Additional Insure quired by written contract, per form XIL 424 0605 CG 24 26 04 13 - Amendment of Insured Contract Definition - is hereby deleted with respects to the oilfield contracts, on sompany, and entered into by the following named insured's: Macro, Inc., Macro Oil Company, Inc., Macro Environmenta Specialties, LLC, Per form MANUS Additional Insured - Controlling Interest: Lemoine Services Holdings, LP; Lemoine Services Sole Member, LLC; Lemoine Derations, LLC; The Lemoine Company, LLC, per form CG 20 05 12 19 Jmbrella/Excess Policy Notable Endorsements/Terms: Schedule of Underlying Insurance - Commercial Excess Follow Form and Umbrella Liability Policy per form XCU 300 081 Endorsement for Motor Carrier Policies of Insurance for Public Liability Under 29 and 30 of the Motor Carrier Act of 1980						NAL REMARKS	DDITIONAL R
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	d under red, as file with Services 1 per form	afforded to any Additional Insured us e carried by such Additional Insured ects to the oilfield contracts, on file apany, Inc., Macro Environmental ices Sole Member, LLC; Lemoine Se ility Policy per form XCU 300 0811 of the Motor Carrier Act of 1980 per	per form IXI 405 0910 ktent that insurance is ting with any insurance ereby deleted with res ro, Inc., Macro Oil Con ngs, LP; Lemoine Serv 12 19 orm and Umbrella Lial ability Under 29 and 3 ; Lemoine Services Se	t to include as, eed that to the e and not contribu 5 Definition - is h d insured's: Mad e Services Holdi r form CG 20 05 erms: Excess Follow F nce for Public L ees Holdings, LF	written agreemen orsement: It is agr apply as primary r form XIL 424 066 f Insured Contrac ne following name US g Interest: Lemoir Company, LLC, po Endorsements/T nce - Commercial Policies of Insura nt: Lemoine Servi	d in a written contract or w y Insurance Clause Endors icy, this insurance shall ap d by written contract, per fo 26 04 13 - Amendment of Ir by, and entered into by the ties, LLC, Per form MANUS anal Insured - Controlling Ir ons, LLC; The Lemoine Co a/Excess Policy Notable E ule of Underlying Insurance ement for Motor Carrier Po 01/05/2017 anal Insured Endorsement:	required in a w •Primary Insur this policy, thi required by wr •CG 24 26 04 1 company, and Specialties, LL •Additional Ins Operations, Ll Umbrella/Exce •Schedule of L •Endorsement MCS-90 01/05/ •Additional Ins