CERTIFICATE OF INSURANCE

CERTIFICATE DATE: 6-5-202

CERTIFICATE HOLDER:

Okaloosa County Board of County Commissioners Destin-Fort Walton Beach Airport Administration 1701 State Road 85 N Eglin AFB, FL 32542-1498 POLICY HOLDER:

Boogies Leasing, Inc P.O. Box 1815 Destin, FL 32541

This is to certify that the following policy(s), subject to the terms and conditions, limitations and endorsements contained therein, and during their effective period, have been issued by the company(s) indicated below. In the event of material change or cancellation of said policy(s) the company will endeavor to notify the certificate holder, but failure to do so shall impose no liability or obligation of any kind upon the undersigned or the company(s) involved.

Policy Type: GL - Premises Only

Insurance Company: U. S. Specialty Insurance Company

Policy Number: AP2000576-06 **Policy Period:** 6/9/2023 to 6/9/2024

Airport Premises Liability - \$1,000,000 Each Occurrence / \$2,000,000 Aggregate / \$100,000 Per Person

Combined Single Limit Bodily Injury and Property Damage

Autos Within Airport Operation Area \$1,000,000 Each Occurrence / Per Person

Contractual Liability \$1,000,000 Each Occurrence / Per Person

Personal and Advertising Injury Liability \$1,000,000 Each Occurrence / Per Person

CONTRACT L17-0458-AP BOOGIES LEASING, INC. STORAGE SPACE EXPIRES 06/20/2027

THE FOREGOING EVIDENCE OF COVERAGE IS NOT VERBATIM OF POLICY CONDITIONS, LIMITATIONS OR LANGUAGE; THE POLICY(S)REPRESENTED BY THIS CERTIFICATE ARE NOT AMENDED IN ANY WAY UNLESS SO STATED ON THIS CERTIFICATE.

Additional Insured - Okaloosa County Board of County Commissioners is included as an Additional Insured for Liability Coverages, but solely with respect to operations of the Named Insured, subject to all policy terms and conditions.

This Certificate is only valid provided that all terms and conditions of the policy have been met by the named insured.

NOTICE OF CANCELLATION: IN THE EVENT OF MATERIAL CHANGE OR CANCELLATION OF SAID POLICY(S), THE COMPANY(S) SHALL ENDEAVOR TO GIVE 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER WITH THE EXCEPTION OF A 10 DAY NOTICE FOR NON-PAYMENT OF PREMIUM.

Authorized Signature

Kimmel Aviation Insurance Agency, Inc.

442 Airport Road

Greenwood, MS 38930 (662) 455-3003 Fax: (662) 455-1611