

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/02/2018

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	321-445-1117	CONTACT Lauren Hampton			
JCJ Insurance Agency 2208 Hillcrest Street Orlando, FL 32803 Mark E. Jackson		PHONE (A/C, No, Ext): 321-445-1117	AX No): 321-445-1076		
		E-MAIL ADDRESS: certs@jcj-insurance.com			
		INSURER(S) AFFORDING COVERAGE	NAIC #		
		INSURER A : Phoenix Insurance Co.	25623		
INSURED Arminius Consultants, LLC 2501 Bayfront Parkway Orlando, FL 32806		INSURER B : RLI Insurance Company	13056		
		INSURER C:			
		INSURER D:			
		INSURER E :			
		INSURER F:			

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 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	ADDL S	SUBR	POLICY NUMBER		POLICY EXP (MM/DD/YYYY)	LIMIT	S	
A	X COMMERCIAL GENERAL LIABILITY	IIVSD V	1110		I I I I I I I I I I I I I I I I I I I		EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR	Y		660-1H304196	04/05/2018	04/05/2019	DAMAGE TO RENTED PREMIŞEŞ (Ea occurrence)	\$	100,000
		1		And Early	RECEI	VEN	MED EXP (Any one person)	\$	5,000
					El See Of Ear S	W Bez Ed	PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:				MAD - E	2040	GENERAL AGGREGATE	\$	2,000,000
	POLICY X PRO-				MAR - 5	2018	PRODUCTS - COMP/OP AGG	\$	2,000,000
	OTHER:				BION DE	O F K MA		\$	
Α	AUTOMOBILE LIABILITY				KIDN M	EM!	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	ANY AUTO	Y		660-1H304196	04/05/2018	04/05/2019	BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
								\$	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION\$							\$	
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A		UB-4J859678	04/05/2018	04/05/2019	E.L. EACH ACCIDENT	\$	1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	A					E.L. DISEASE - EA EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000
В	Professional Liab			RDP0031045	12/21/2017	12/21/2019	Per Claim		1,000,000
							Aggregate		2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is listed as an Additional Insured with regards to General & Auto Liability when required by written contract. Coverage is

Primary & Non-Contributory with respect to all policies.	

	DAYT245	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE
City of Daytona Beach P.O. Box 2451		THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Daytona Beach, FL 32115		AUTHORIZED REPRESENTATIVE
3		Mark & Clocker

CANCELLATION

CERTIFICATE HOLDER