

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/9/2024

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.

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

tì	is certificate does not confer rights t	o the	cert	ificate holder in lieu of su	ich end	lorsement(s)		equire an endorsement.	A St	atement on	
PRODUCER 770-978-4855 Ebco Aviation Insurance, LLC 3070 Five Forks Trickum Road P.O. Box 1534 Snellville, GA 30078 Terry M. Britt						CONTACT Terry M. Britt					
						PHONE (A/C, No, Ext): 770-978-4855 FAX (A/C, No):					
						E-MAIL ADDRESS: tbritt@eaisllc.com					
						INSURER(S) AFFORDING COVERAGE				NAIC#	
						INSURER A : ACE American Insurance Co					
INSURED Emerald Coast Aviation dba Agro EV Inc. Fuel EV						INSURER B:					
INSURED Emerald Coast Aviation dba Aero FX, Inc., Fuel FX 5535 John Givens Road					INSURER C:						
Crestview, FL 32539						RD:					
						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 LTR	TYPE OF INSURANCE	ADDL INSD				POLICY EFF (MM/DD/YYYY)		LIMITS	 :		
Α	X COMMERCIAL GENERAL LIABILITY	III OD	1111			111111111111111111111111111111111111111		EACH OCCURRENCE	\$	25,000,000	
	CLAIMS-MADE X OCCUR	x		AAPN10721118005		01/06/2024	01/06/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000	
		``						MED EXP (Any one person)	\$	25,000	
								PERSONAL & ADV INJURY	\$	25,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	25,000,000	
	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	\$	25,000,000	
	OTHER:							HKLL	\$	5,000,000	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS								\$		
	HIRED ONLY AUTOSONED	İ						PROPERTY DAMAGE (Per accident)	\$		
		<u> </u>							\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE	-						AGGREGATE	\$		
	DED RETENTION \$	<del> </del>	<del> </del>		•			PER OTH- STATUTE ER	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  ANY ENOURIES OF THE PERSON OF THE PERSO							E.L. EACH ACCIDENT	\$		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								E.L. DISEASE - EA EMPLOYEE			
If yes, describe under DESCRIPTION OF OPERATIONS below								·	\$		
	DESCRIPTION OF CHARTONS BRIOW							C.E. DIGENOE - POLICY ENTITY	<u></u>		
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (	ACORI	) 101, Additional Remarks Schedu	sie, may b	e attached if mo	e space is requir	ed)			
L08	-0335-AP/C12-938-AP/C21-3047-AP										
						CONTRACT:	C21-3047-A	•			
					1	RHEL EX. IN	C. DRA EMEI	RALD COAST AVIATION	ND RE	PAIR —	
CE	RTIFICATE HOLDER			FUEL FARM STORAGE SYSTEM MAINTENANCE AND REPAIR EXPIRES: 12/31/2024							
				OKALOO1						RE	
Olutera County Provide County County County										IN IN	
Okaloosa County Board of County Commissioners C/O Destin-Fort Walton Beach Airport Administration											
	1701 State Road 85, North	J. L F	.aou auton	<b></b>		A LIVE & DOLL OF					
Eglin AFB, FL 32542						Terry M. Britt					

NOTEPAD

Emerald Coast Aviation dba Aero FX, INSURED'S NAME Inc., Fuel FX OP ID: CR

PAGE 2 Date 1/09/2024

Per Chubb Form AAP236 Okaloosa County shall be included as additional insured but only as respects operations of the named insured. The insurance extended by this endorsement shall not apply to, and no person or organization named in the schedule shall be insured for bodily injury or property damage which arises from the design, manufacture, modification, repair, sale, or servicing of aircraft by that person or organization.

The Certificate Holder will be provided with thirty (30) days, (ten (10) days if for non-payment of premium) notice of cancellation.

The coverage includes On Airport Premises Auto Liability Limit.

Coverage is primary and non-contributory to any other insurance available to the Certificate Holder.

The coverage includes Contractual Liability, independent Contractors Liability and Excess Auto Liability