

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.

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 liquid such endorsement(s).

	s certificate does not confer rights t							equite all endors	sement	. A 5	laternesit 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 Strict (A/C, No):						
						INSURER A : ACE American Insurance Co					NAIC#	
											-	
						INSURED Emerald Coast Aviation dba Aero FX, Inc., Fuel FX 5535 John Givens Road Crestview, FL 32539						INSURER B:
RC:												
Crestinew, FL 32335					INSURER D:					<u> </u>		
						RE:						
						INSURER F:						
CO	ERAGES CER	TIFIC	CATE	NUMBER:		REVISION NUMBER:						
IN CE EX	IS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RI RTIFICATE MAY BE ISSUED OR MAY CLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT POLI	REME TAIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	of an'	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS,	DOCUMENT WITH	RESPEC	OT TO	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	3		
Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE		\$	25,000,000	
	CLAIMS-MADE X OCCUR	X		AAPN10721118005		01/06/2024	01/06/2025	DAMAGE TO RENTEL PREMISES (Ea occurr	ence)	\$	500,000	
								MED EXP (Any one pe		\$	25,000	
								PERSONAL & ADV IN		\$	25,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGA		\$	25,000,000	
	POLICY PRO-		ĺ					PRODUCTS - COMP/O		\$	25,000,000	
								HKLL	DI 700	s	5,000,000	
	OTHER: AUTOMOBILE LIABILITY	-	-					COMBINED SINGLE L (Ea accident)	.IMIT	\$		
	ANY AUTO							BODILY INJURY (Per		\$		
	OWNED SCHEDULED AUTOS	İ								S		
	HIRED NON-OWNED AUTOS ONLY							BODILY INJURY (Per PROPERTY DAMAGE (Per accident)	accident			
	AUTOS ONLY AUTOS ONLY							(Per accident)		\$		
	UMBRELLA LIAB OCCUR	1	\vdash						_	\$		
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE							EACH OCCURRENCE	÷	\$		
		1						AGGREGATE		\$		
	DED RETENTION \$	+	1					PFR	OTH- ER	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER STATUTE	LER			
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								E.L. EACH ACCIDENT		\$		
	(Mandatory in NH)							E.L. DISEASE - EA EN	<i>IPLOYEE</i>	\$		
	If yes, describe under DESCRIPTION OF OPERATIONS below	<u> </u>	<u> </u>					E.L. DISEASE - POLIC	CY LIMIT	\$		
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORI	D 101, Additional Remarks Schedu	ale, may b	e attached if mo	re space is requir	red)				
LUS	0335-AP/C12-938-AP/C21-3047-AP											
							0005 40					
					L)	EASE: LOS	C DRA	EMERALD CO.	AST A	VIAT:	ION	
CEI	RTIFICATE HOLDER	A. R	eko fa, ii Sap fixel	BASE OP	ERATOR							
<u> </u>	5.5	OKALO01	E	BSAP FIXED BASE OPERATOR EXPIRES: 01/01/2054								
					-						DRE	
	Okaloosa County Board of Co		IN									
ļ	C/O Destin-Fort Walton Beach											
1701 State Road 85, North Eglin AFB, FL 32542						AUTHORIZED REPRESENTATIVE Terry M. Britt						

NOTEPAD

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

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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 promium) notice of samellation.

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