

Certificate of Insurance

Named Insured : N.FL. SERVICING, LLC, SRB SERVICING, LLC, CARTER MARKETING, LLC, TRGE MANAGEMENT, LLC, HANGAR ONE, LLC, SPECIALIZED STRUCTURES, INC., R.W. GRIFFIN INDUSTRIES, LLC, CONTINENTAL PACIFIC, LLC AND JAMES BARRON STROTHER
Address of Insured: P.O. Box 2548, Santa Rosa Beach, Florida 32459
Company : Endurance Assurance Corporation/W. Brown & Associates
Policy Number : Renewal of Policy #NAB6045466
Effective Date : January 22, 2023 at 12:01 A.M. Local Standard Time
Expiration Date : January 22, 2024 at 12:01 A.M. Local Standard Time
Aircraft Covered : 2000 Bonanza A36, N3185C, having 1 crew seat & 5 passenger seats

AIRCRAFT LEGAL LIABILITY	LIMITS OF LIABILITY
Combined Single Limit Bodily Injury & Property Damage, Including Passengers	\$ 2,000,000 Each Occurrence

Certificate Holder: OKALOOSA COUNTY BOARD OF COUNTY COMMISSIONERS
DESTIN-FORT WALTON BEACH AIRPORT ADMINISTRATION
1701 STATE ROAD 85 N
EGLIN AFB, FL 32542-1498

This Certificate of Insurance is issued for informational purposes only and confers no rights upon the Certificate Holder. Should any of the above described policies be cancelled before the expiration date thereof, the Company will endeavor to mail 30 days written notice, except 10 day for non-payment of premium, to the Certificate Holder but failure to mail such notice shall impose no obligation or liability of any kind upon the Company, its Agents or Representatives. Aviation Insurance Managers, Inc. assumes no legal responsibility for failure to provide such notice. Aviation Insurance Managers, Inc. is not the insurer hereunder, and shall not be held liable for any loss or damage. This Certificate does not amend, extend or alter the coverage provided by the Insurance Policy referenced above. The actual policy of insurance contains the complete description of the coverages, limitations, terms and conditions of coverage.

Endorsements Attached-The Certificate Holder shall be included as Additional Insured, but only to the extent of liability imposed upon the Additional Insured solely as the result of an act or omission of the Named Insured or its employees in connection with the Named Insured's Operations. The limits shown above in favor of the Certificate Holder are within, and not in addition to, the limits provided to the Named Insured.

ALL OTHER POLICY TERMS & CONDITIONS REMAIN UNCHANGED.



January 22, 2023

Authorized Representative

Date
/mn

AVIATION INSURANCE MANAGERS, INC.
11650 CLEVELAND AVENUE NW, UNIONTOWN, OHIO 44685
(330) 494-1500

**CONTRACT: L20-0486-AP
HANGAR ONE, LLC
BLOCK 11 LOT 3
EXPIRES: 10/01/2048**