

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/18/2024

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 lieu of such endorsement(s).											
PRODUCER						CONTACT NAME: Certificate Unit					
Edgewood Partners Insurance Center						PHONE (A/C, No, Ext): (404) 781-1700 (A/C, No):					
1 Čalifornia Street, Suite 400 San Francisco CA 94105						(A/C, NO). (A/C, NO). E-MAIL ADDRESS: Apexcerts@epicbrokers.com					
Call Transisco CA 54 105						INSURER(S) AFFORDING COVERAGE NAIC #					
L'										19445	
<u>License#: 0B29370</u> INSURED APEXSVCP					INSURER B : AIU Insurance Company					19399	
Triton Air, Inc.										19399	
1221 Puerta Del Sol #300					INSURER C:						
San Clemente, CA 92673					INSURER D:						
						INSURER E :					
COVERAGES CERTIFICATE NUMBER: 1104139080						INSURER F:					
			N ISSUED TO		REVISION NUMBER:	4E P∩I	ICV PERIOD				
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 I						POLICY FEE POLICY FXP					
INSR LTR		INSD	INSD WVD POLICY NUMBER			(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT			
Α	X COMMERCIAL GENERAL LIABILITY			GL9952707		4/1/2024	4/1/2025	EACH OCCURRENCE DAMAGE TO RENTED	\$2,000	,000	
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 300,0	00	
								MED EXP (Any one person) \$10,0		0	
	X SIR \$250,000							PERSONAL & ADV INJURY	\$2,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$4,000,000		
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG \$4,000		,000	
	OTHER:								\$		
A A	A AUTOMOBILE LIABILITY			AL9812741 (AOS)		4/1/2024	4/1/2025	COMBINED SINGLE LIMIT (Ea accident)	\$5,000,000		
,,	X ANY AUTO			AL9812740 (MA Only)		4/1/2024	4/1/2025	BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MAD	=						AGGREGATE	\$		
	DED RETENTION \$							\$			
В	WORKERS COMPENSATION			WC020396018 (AOS)	4/1/2024 4/1/2024 4/1/2024	4/1/2025	X PER OTH-				
B B	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE N	1		WC020396019 (CA Only) WC020396020 (WI Only)			4/1/2025 4/1/2025	E.L. EACH ACCIDENT	\$ 1,000	,000	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		, , , , , , , , , , , , , , , , , , , ,				E.L. DISEASE - EA EMPLOYEE	\$1,000,000		
	If yes, describe under DESCRIPTION OF OPERATIONS below										
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder is included as Additional Insured on General Liability and Business Auto Liability. Insurance is Primary and non-contributory, Blanket Waiver of Subrogation of General Liability included, incorporated into the policy forms. Business Auto Additional Insured and Waiver of Subrogation automatically included.											
CERTIFICATE HOLDER CANCELLATION											
Evidence of Insurance						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
Evidence of modification						Laura M. Desovino					