

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 08/30/2023

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 Reilly Ferguson										
-	own & Brown of Florida, Inc.	NAME.								
					PHONE (A/C, No, Ext): (727) 461-6044 FAX (A/C, No): (727) 442-7695   E-Mail					
03	Park Place Blvd, Suite 101		ADDRESS: Keilig. Feiguson @ bbiown.com							
Clearwater FL 33759					INSURER(S) AFFORDING COVERAGE					
	earwater	INSURER A: Monroe Guaranty Insurance Company					32506			
INSU	SURED	INSURER B : FCCI Insurance Company				10178				
Tag Media Group, DBA: Gulf Coast Aluminum					INSURER C: FFVA Mutual Insurance Co.					
16751 Link Court					INSURER D :					
			INSURER E :							
Fort Muoro EL 22012					INSURER F :					
со	OVERAGES CERT	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 SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
				T				<sub>\$</sub> 1,000	),000	
	CLAIMS-MADE 🗙 OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	<sub>\$</sub> 100,0	000	
					09/01/2023	09/01/2024	MED EXP (Any one person)	\$ 5,000		
А			GL100087082-00					\$ 1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							\$ 2,000,000		
								<u>\$</u> 2,000		
								\$ \$		
	OTHER: AUTOMOBILE LIABILITY							SINGLE LIMIT \$ 1 000 00		
_							(Ea accident)			
	ANY AUTO OWNED SCHEDULED		0.4.400007004.00		00/04/0000	00/04/0004	,			
В	AUTOS ONLY AUTOS	CA100087081-00		09/01/2023	09/01/2024					
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$		
							PIP-Basic	\$ 10,00	00	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$		
	DED RETENTION \$							\$		
	WORKERS COMPENSATION				01/01/2023	01/01/2024	X PER OTH- STATUTE ER			
~	AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE							500.000		
С	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	WC840-0035455-2023A					500.000		
	If yes, describe under DESCRIPTION OF OPERATIONS below							<u>\$</u> 500,0	000	
								Ψ ,		
DES	SCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES	S (ACORD	101, Additional Remarks Schedule,	may be att	ached if more s	oace is required)	·			
						. ,				
CERTIFICATE HOLDER CANCELLATION										
Gulf Coast Aluminum					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	16751 Link Ct			AUTHOR	AUTHORIZED REPRESENTATIVE					
Fort Myers FL 33912										
			1 - 00012	I.						

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## Additional Named Insureds

Other Named Insureds

Gulf Coast Aluminum

Doing Business As

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