

**SHAWK** 

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/6/2023

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.

	SUBROGATION IS WAIVED, subje nis certificate does not confer rights t				ıch end	lorsement(s)		require an endorsemen	t.As	tatement on	
PRODUCER Insurance Office of America 1855 West State Road 434 Longwood, FL 32750						CONTACT NAME:					
						PHONE (A/C, No, Ext): (407) 788-3000 FAX (A/C, No): (407) 788-7933					
						E-MAIL ADDRESS:					
						INSURER(S) AFFORDING COVERAGE NAIC #					
					INSURER A : Auto-Owners Insurance Company					18988	
INSURED  Freedom Exteriors LLC 6001 Anno Avenue						INSURER B : Builders Mutual Insurance Company 10844					
						RC:	<u> </u>			10011	
						RD:					
Orlando, FL 32809					INSURE						
					INSURER F:						
COVERAGES CERTIFICATE NUMBER:						REVISION NUMBER:					
IN C	HIS IS TO CERTIFY THAT THE POLICI IDICATED. NOTWITHSTANDING ANY F ERTIFICATE MAY BE ISSUED OR MAY	EQUI PER	REMI TAIN,	ENT, TERM OR CONDITION THE INSURANCE AFFOR	N OF A	NY CONTRAC	CT OR OTHEF IES DESCRIB	RED NAMED ABOVE FOR T R DOCUMENT WITH RESPE	CT TO	WHICH THIS	
INSR				VE BEEN REDUCED BY PAID CLAIMS. POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS							
LTR	TYPE OF INSURANCE  COMMERCIAL GENERAL LIABILITY		SUBR WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)				
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
	CLAIMS-IMADE OCCUR								\$		
								MED EXP (Any one person)	\$		
								PERSONAL & ADV INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$		
A	OTHER:  AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	X ANY AUTO			5452001801		5/25/2023	5/25/2024	BODILY INJURY (Per person)	\$		
	OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								\$		
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	N/A					12/23/2023	X PER OTH-ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE			WCP1056317 05	CP1056317 05			E.L. EACH ACCIDENT	\$	1,000,000	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (	ACORE	D 101, Additional Remarks Schedu	ıle, may b	e attached if mor	re space is requir	red)			
						CANCELLATION					
CERTIFICATE HOLDER						CANCELLATION					
∥nformation Copy						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
						AUTHORIZED REPRESENTATIVE  By Unt					

ACORD 25 (2016/03)

© 1988-2015 ACORD CORPORATION. All rights reserved.