

CERTIFICATE OF LIABILITY INSURANCE										Date 4/3/2025	
<b>Producer:</b> Plymouth Insurance Agency 2739 U.S. Highway 19 N. Holiday, FL 34691 (727) 938-5562						<b>This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.</b>					
<b>Insured:</b> South East Personnel Leasing, Inc. & Subsidiaries 2739 U.S. Highway 19 N. Holiday, FL 34691						Insurers Affording Coverage				NAIC #	
						Insurer A: Lion Insurance Company				11075	
						Insurer B:					
						Insurer C:					
						Insurer D:					
						Insurer E:					
<b>Coverages</b>											
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. Aggregate limits shown may have been reduced by paid claims.											
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date(MM/DD/YY)	Limits					
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur  General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence		\$			
						Damage to rented premises (EA occurrence)		\$			
						Med Exp		\$			
						Personal Adv Injury		\$			
						General Aggregate		\$			
						Products - Comp/Op Agg		\$			
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)		\$			
						Bodily Injury (Per Person)		\$			
						Bodily Injury (Per Accident)		\$			
						Property Damage (Per Accident)		\$			
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible				Each Occurrence					
						Aggregate					
A		<b>Workers Compensation and Employers' Liability</b>  Any proprietor/partner/executive officer/member excluded? <b>NO</b>  If Yes, describe under special provisions below.	WC 71949	01/01/2025	01/01/2026	<input checked="" type="checkbox"/> WC Statutory Limits	<input type="checkbox"/> OTH-ER				
						E.L. Each Accident				\$1,000,000	
						E.L. Disease - Ea Employee				\$1,000,000	
						E.L. Disease - Policy Limits				\$1,000,000	
Other			<b>Lion Insurance Company is A.M. Best Company rated A (Excellent). AMB # 12616</b>								
<b>Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions:</b>											
Client ID: 96-66-281											
Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company":											
Florida Blue Roofing, LLC											
Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s) , while working in: FL.											
Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.											
A list of the active employee(s) leased to the Client Company can be obtained by emailing a request to certificates@lioninsurancecompany.com											
<b>Project Name:</b>											
ISSUE 04-03-25 (CF)											
Begin Date: 4/1/2025											
<b>CERTIFICATE HOLDER</b>						<b>CANCELLATION</b>					
BREVARD COUNTY PLANNING AND DEVELOPMENT 2725 JUDGE FRA JAMIESON WAY MELBOURNE, FL 32940						Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.					
											