

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

	GENI	III ICAIL OI LI				11/5/2024	
PRODUCE	R (949)679-3700 FAX: (	949)679-3701			ED AS A MATTER OF INFO		
IQ Ri	sk Insurance Services,	LLC		ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR			
8881 Research Drive ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.							
Irvine CA 92618				INSURERS AFFORDING COVERAGE			
INSURED			INSURER A: Und	$_{\mbox{\scriptsize INSURER}A:}$ Underwriters at Lloyd's London (			
Downstream Exchange Co.			INSURER B:				
909 E. Green Street			INSURER C:				
			INSURER D:	INSURER D:			
Pasadena CA 91106		INSURER E:	INSURER E:				
COVER							
ANY R MAY P	POLICIES OF INSURANCE LISTED BEL REQUIREMENT, TERM OR CONDITION OF PERTAIN, THE INSURANCE AFFORDED DIES. AGGREGATE LIMITS SHOWN M.	OF ANY CONTRACT OR OTHER DO BY THE POLICIES DESCRIBED HE	CUMENT WITH RESP REIN IS SUBJECT TO	ECT TO WHICH THI	S CERTIFICATE MAY BE ISSU	ED OR	
INSR ADD'	'L RD TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS		
	GENERAL LIABILITY			, ,	EACH OCCURRENCE \$		
	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$		
	CLAIMS MADE OCCUR				MED EXP (Any one person) \$		
					PERSONAL & ADV INJURY \$		
					GENERAL AGGREGATE \$		
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG \$		
	POLICY PRO- JECT LOC						
	ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)		
	ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person) \$		
	HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident) \$		
	NON-OWNED ACTOS				PROPERTY DAMAGE (Per accident) \$	i	
	CARACE HARMITY						
	GARAGE LIABILITY  ANY AUTO				AUTO ONLY - EA ACCIDENT \$		
	ANY AUTO				OTHER THAN AUTO ONLY:  AGG \$		
	EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE \$		
	OCCUR CLAIMS MADE				AGGREGATE \$		
					\$	i	
	DEDUCTIBLE				\$	i	
	RETENTION \$				\$		
	DRKERS COMPENSATION D EMPLOYERS' LIABILITY				WC STATU- OTH- TORY LIMITS ER		
ANY	Y PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT \$		
(Ma	FICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE \$		
	es, describe under ECIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT \$	i e	
A OTI	HER Crime	SUA60798-2411	11/1/2024	11/1/2025	Each Claim:	\$1,000,000	
					Aggregate:	\$1,000,000	
					Retention:	\$100,000	
	NON OF OPERATIONS /LOCATIONS /VEHICL ys Notice of Cancellation for		EMENT /SPECIAL PROVI	SIONS			
CERTIFICATE HOLDER CANCELLATION							
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION			
			DATE THEREOF,	DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL $10$ DAYS WRITTEN			
			NOTICE TO THE	NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL			
Name Insured			IMPOSE NO OBL	IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR			
			REPRESENTATIV	REPRESENTATIVES.			
			AUTHORIZED REF	AUTHORIZED REPRESENTATIVE			
	l		_	Bobby Truong/BOBBY			
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## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

## **DISCLAIMER**

This Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.