

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/23/2021

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 Donna Moats					
Insurance Partners								PHONE (A/C, No, Ext): FAX (A/C, No): (866) 500-7650						
26865 Center Ridge Rd									E-MAIL dmoats@inspartners.com					
									INSURER(S) AFFORDING COVERAGE NAIC					
Westlake OH 44145									INSURER A: Philadelphia Indemnity Ins Co				18058	
INSURED								INSURER B: Western Surety Company						
Goldilocks Solutions, LLC								INSURER C:						
5448 Painted Acres Dr.								INSURER D:						
								INSURER E :						
Cedar Hill							MO 63016	INSURER F:						
COVERAGES CER					TIFIC	ATE I	NUMBER: CL201016321	89 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. INST POLICY EFF POLICY EXP														
LTR				INSD		POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT				
	×	CLAIMS-MADE CCUR					1				EACH OCCURRENCE	\$ 1,00	0,000	
							1				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,0	000	
						1				MED EXP (Any one person)	\$ 15,000			
Α							PHBOP018350		10/21/2020	10/21/2021	PERSONAL & ADV INJURY	\$ 1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- PECT LOC OTHER:					1	ļ			GENERAL AGGREGATE	\$ 3,000,000			
										PRODUCTS - COMP/OP AGG	\$ 1,000,000			
						1				Professional Liability	\$ 1,000,000			
	AUT	AUTOMOBILE LIABILITY									COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000		
Α	ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS									BODILY INJURY (Per person)	\$			
						PHBOP018350		10/21/2020	10/21/2021	BODILY INJURY (Per accident)	\$			
	×	HIRED NON-OWNED AUTOS ONLY								PROPERTY DAMAGE (Per accident)	\$			
		AUTOS ONLY	Ť	AUTOS ONLY			1				(i ei accident)	\$		
		UMBRELLA LIAB	┰	OCCUR							EACH OCCURRENCE	\$		
		EXCESS LIAB		CLAIMS-MADE			1				AGGREGATE	\$		
		DED RETENTION \$									AGGREGATE	- \$ \$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below										PER STATUTE OTH-	Ψ		
										E.L. EACH ACCIDENT	\$ 1,00	0,000		
В					N/A		45WBCBZ9049		08/17/2020	08/17/2021	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000		
							1				E.L. DISEASE - POLICY LIMIT	\$ 1,00		
											E.L. DISEASE - POLICY LIMIT	\$10.		
С	Dishonesty Bond					62984283		10/21/2020	10/21/2021					
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)														
CEF	RTIF	ICATE HOLDER						CANC	CANCELLATION					
Goldilocks Solutions LLC 5448 Painted Acres Dr.									SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
		5 14 0 F dillil	.cu A	iores Di.				AUTHORIZED REPRESENTATIVE						
Cedar Hill							MO 63016	Donna Moats						