

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/2/2024

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 fieu of such endorsement(s).						
PRODUCER		CONTACT NAME:				
Hylant - Cleveland 6000 Freedom Sq Dr. Ste 400		PHONE (A/C, No, Ext): 216-447-1050	<b>-</b> 4088			
Independence OH 44131		E-MAIL ADDRESS: Cleveland-office@hylant.com				
		INSURER(S) AFFORDING COVERAGE	NAIC#			
	License#: 23894	INSURER A: Motorists Commercial Mutual Insurance	13331			
INSURED	STATINT-0	INSURER B: Tokio Marine Specialty Insurance Co	23850			
Stat Integrated Technologies, Inc Management	a dba AQUA DOC Lake & Pond	INSURER c : Endurance American Specialty Ins Co	41718			
PO Box 625		INSURER D:				
Chesterland OH 44026		INSURER E :				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 1521546280	REVISION NUI	MBER:			
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		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
Α	Х	COMMERCIAL GENERAL LIABILITY			5001375606	4/1/2024	4/1/2025	EACH OCCURRENCE	\$ 1,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
								MED EXP (Any one person)	\$ 5,000
								PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	Х	POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		OTHER:							\$
Α	AUT	OMOBILE LIABILITY			5001375606	4/1/2024	4/1/2025	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	Х	ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
С	Х	UMBRELLA LIAB X OCCUR			ELD30057140400	4/1/2024	4/1/2025	EACH OCCURRENCE	\$ 1,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 1,000,000
		DED RETENTION \$							\$
Α		KERS COMPENSATION EMPLOYERS' LIABILITY			5001375606	4/1/2024	4/1/2025	PER OTH- STATUTE ER	OH Stop Gap
	ANYI	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$ 1,000,000
	(Man	datory in NH)						E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	DES	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$1,000,000
B A		ution Professional Liability owed/Leased Equipment			RS1490051 5001375606	2/19/2024 4/1/2024	2/19/2025 4/1/2025	\$5,000 Retention \$500 Deductible	2,000,000 100,000
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)								

CERTIFICATE HOLDER	CANCELLATION		
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		
For Informational Purposes Only	AUTHORIZED REPRESENTATIVE		
	Nicholas & Mylant		