

CERTIFICATE OF LIABILITY INSURANCE

JONEDA1 OP ID: MFO

DATE (MM/DD/YYYY)

02/06/2014

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 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).

INSURED SAMPLE CERTIFICATE SAMPL	SUITAICE, INC. (A) Suite 310 0144 PHONE		ertificate holder in lieu of such endors	sement(s).	CONTACT				
1301 Shiloh Road, Suite 310 Kennesaw, GA 30144 Insurer SAMPLE CERTIFICATE SAMPLE CERTI	AG Suite 310 0144 CAC, No. Ext: CAC, No. Ext: (AC, No.)	Inde	pendence Insurance, Inc.			NAME: PHONE FAX				
INSURER S: INSURER A : ABC Insurance Company INSURER A : ABC Insurance Company INSURER B : AYZ Insurance Company INSURER B : ANZ Insurance Company INSURER B : INSURER B	ADDRESS: INSURER (S) AFFORDING COVERAGE NAIC # MPLE CERTIFICATE INSURER 0: INSURER 1: INSURER 1: INSURER 1: INSURER 1: INSURER 1: INSURER 2: INSURER 1: INSURER 1: INSURER 2: INSURER 1: INSURER 2: INSURER 3: INSURER 5: INSURER 5: INSURER 6: INSURER 6: INSURER 6: INSURER 6: INSURER 7: INSURER 7: INSURER 7: INSURER 7: INSURER 8: INSURER 7: INSURER 7: INSURER 8: INSURER 7: INSURER 8: INSURER 1: INSURER 2: INSURER 1: INSURER 1: INSURER 2: INSURER 1: INSURER 1: INSURER 1: INSURER 2: INSURER 1: INSURER 3: INSURER 1: INSURER 6: INSURER 2: INSURER 1: INSURER 6: INSURER 6: INSURER 6: INSURER 6: INSURER 1: INSURER 6: INSURER 6					(A/C, No, Ext):		(A/C, No):		
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B RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE N/A N/A TBD O9/15/2013 O9/15/2014 EL. EACH ACCIDENT \$	RETENTION \$ RETENTION \$ S		UCCUR					EACH OCCURRENCE	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE N/A OFFICER/MEMBER EXCLUDED? TBD WC STATU- TORY LIMITS OTH- TORY LIMITS ER O9/15/2013 O9/15/2014 E.L. EACH ACCIDENT S	MPENSATION RS' LIABILITY OR/PARTNER/EXECUTIVE OR/PA		EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$	
B AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE N/A NYA OPFICER/MEMBER EXCLUDED? TBD OP/15/2013 OP/15/2014 L. EACH ACCIDENT S OP/15/2014	RS' LIABILITY OR/PARTNER/EXECUTIVE OR/PARTNER/EXECU							TANO OTATILI TOTAL	\$	
B ANY PROPRIETOR/PARTNER/EXECUTIVE N/A IBD 09/15/2013 09/15/2014 E.L. EACH ACCIDENT \$ OFFICER/MEMBER EXCLUDED?	OR/PARTNER/EXECUTIVE N/A		AND EMPLOYERS' LIABILITY Y/N					X WC STATU- TORY LIMITS ER		
	under	B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	IBD	09/15/2013	09/15/2014	E.L. EACH ACCIDENT	\$	
(Mandatory in NH) If yes, describe under			(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$	
		<u> </u>	DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	500,000
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							<u> </u>			
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) RE: Any work performed for the certificate holder shown below. JMJ Builders, LLC is an Additional Insured on the General Liability coverage.	performed for the certificate holder shown below.	RE : JMJ	Any work performed for the Builders, LLC is an Additional transfer of the Builders, LLC is an Additional transfer of the Builders, LLC is an Additional transfer of the Builders of the Builde	e cert:	ificate holder sho	own below.				
		CEF	RTIFICATE HOLDER			CANCELLATION				
CERTIFICATE HOLDER CANCELLATION	IOI DER	<u> </u>	THI ION LIIOLDLIK		IM IRIL4	CAROLLLATION			11.77	
			JMJ Builders, LLC 123 Lee St		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
JMJBU-1 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVED ACCORDANCE WITH THE POLICY PROVISIONS.	JMJBU-1 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		Carollton, GA 30116			AUTHORIZED REPRESE	NTATIVE			