

<b>ACORD</b>	<b>CERTIFICATE OF LIABILITY INSURANCE</b>	DATE (MM/DD/YY) 05/21/19
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PRODUCER  Drawbridge Insurance Services, LLC dba TechRisks.com 1514 Mulberry Warminster, PA 18974	THIS CERTIFICATE 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.
INSURED  ARCHIS INC. 350 E. Crown Point Road, Suite 1100 Winter Garden, FL 34787	<b>INSURERS AFFORDING COVERAGE</b>  INSURER A: Lloyd's of London INSURER B: INSURER C: INSURER D: INSURER E:

**COVERAGES**  
THE POLICES 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.

INS LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXP DATE (MM/DD/YY)	LIMITS	
a.	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	ESH011160714	05/17/19	05/17/20	EACH OCCURRENCE	\$2,000,000
					GENERAL AGGREGATE	\$3,000,000
					PRODUCTS COMPLETED OPS	\$2,000,000
					PERSONAL INJURY	\$2,000,000
					ADVERTISING INJURY	\$2,000,000
					PREMISES DAMAGE LIMIT	\$250,000
					MEDICAL EXPENSES LIMIT	\$5,000
a.	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS  <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> _____	ESH011160714	05/17/19	05/17/20	COMBINED SINGLE LIMIT (Ea Accident)	
					BODILY INJURY (per person)	\$2,000,000
					BODILY INJURY (per accident)	\$3,000,000
					PROPERTY DAMAGE (Per accident)	\$50,000
a.	<b>PROFESSIONAL LIABILITY</b> <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE \$ 10,000 <input type="checkbox"/> RETENTION \$ _____	ESH011160714	05/17/19	05/17/20	EACH OCCURRENCE	\$2,000,000
					AGGREGATE	\$2,000,000
	<b>WORKERS COMPENSATION / EMPLOYERS LIABILITY</b>				<input type="checkbox"/> WC Statutory Limits <input type="checkbox"/> Other	
					E.L. EACH ACCIDENT	
					E.L. DISEASE –EA EMPLOYEE	
					E.L. DISEASE –POLICY LIMIT	
b.	<b>UMBRELLA / EXCESS LIABILITY</b>	ESH001160715	05/17/19	05/17/20	EACH OCCURRENCE	\$5,000,000
					AGGREGATE	\$5,000,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:  
  
The Lloyd's policy has blanket additional insured status.

<b>CERTIFICATE HOLDER [N]</b> ADDITIONAL INSURED; INSURER LETTER: <u>  V  </u> CANCELLATION	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE TERMINATED OR CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>  30  </u> 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.
Monroe County District School Board 241 Trumbo Road Key West, FL 33040	AUTHORIZED REPRESENTATIVE <i>Michael N. Kihm</i>