

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2012	2013	2014	2015	2016
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	<u>\$48,669.</u>	<u>\$47,124.</u>	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u><u>\$48,669.</u></u>	<u><u>\$47,124.</u></u>	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget: Yes X No

Budget Account No: Fund 0001 Dept 164 Unit 1604 Object 4410
 Program n/a

B. Recommended Sources of Funds/Summary of Fiscal Impact:

Operating Costs funded from the General Fund, PBSO Lease account.

C. Departmental Fiscal Review: _____ *W 2-6-12*

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development Comments:

OFMB *[Signature]* 2/22/12
2/24/12 *2/16/12* *2/16/12*

[Signature] 2/23/12
 Contract Development and Control
2-23-12 P. Wheeler

B. Legal Sufficiency:

[Signature] 2/24/12
 Assistant County Attorney

This amendment complies with our review requirements.

C. Other Department Review:

 Department Director

This summary is not to be used as a basis for payment.

THIRD AMENDMENT TO LEASE AGREEMENT

between

TALLMAN, LLC

A FLORIDA LIMITED LIABILITY COMPANY

(Landlord)

and

PALM BEACH COUNTY,

A POLITICAL SUBDIVISION OF THE

STATE OF FLORIDA

(County)

THIRD AMENDMENT TO LEASE AGREEMENT

THIS THIRD AMENDMENT TO LEASE AGREEMENT (the "Third Amendment"), made and entered into _____, by and between **TALLMAN, LLC**, a Florida limited liability company, hereinafter referred to as "Landlord" and **PALM BEACH COUNTY**, a political subdivision of the State of Florida, hereinafter referred to as "County", on behalf of the Palm Beach County Sheriff's Office (the "PBSO").

WITNESSETH:

WHEREAS, Landlord and County entered into that certain Lease Agreement dated March 13, 2007 (R2007-0395) (the "Lease") for the use of the Premises as defined in the Lease, which Lease commenced on March 29, 2007, for a term of two (2) years with four (4) successive one (1) year extension options; and

WHEREAS, County wishes to exercise its fourth option to extend the Lease from March 29, 2012, through March 28, 2013, and modify certain provisions; and

WHEREAS, Landlord has agreed to delete the scheduled rental rate increase; and

WHEREAS, Landlord hereby acknowledges that County is not delinquent in the payment of rent and is not in default of any of the terms and conditions of the Lease.

NOW THEREFORE, in consideration of the rents, mutual covenants, and agreements hereinafter set forth, and various other good and valuable considerations, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. The foregoing recitals are true and correct and incorporated herein by reference. Terms not defined herein shall have the same meaning ascribed to them in the Lease.

2. Pursuant to Section 1.04 of the Lease, County hereby exercises its option to extend the Term for a period of one (1) year from March 29, 2012, through March 28, 2013 (the "Fourth Renewal Term").

3. The scheduled rental rate increase is hereby deleted. The annual gross rental rate for the Fourth Renewal Term shall be Ninety-Five Thousand Seven Hundred Ninety-Three and 22/100 Dollars (\$95,793.22).

4. Landlord represents that simultaneously with Landlord's execution of this Third Amendment, Landlord has executed and delivered to County, the Landlord's Disclosure of Beneficial Interests attached hereto as Exhibit "A" and made a part hereof, (the "Disclosure") disclosing the name and address of every person or entity having a 5% or greater beneficial interest in the ownership of the Property as required by Section 286.23 of the Florida Statutes unless Landlord is exempt under the statute. Landlord warrants that in the event there are any changes to the names and addresses of the persons or entities having a 5% or greater beneficial interest in the ownership of the Property after the date of execution of the Disclosure until the Effective Date of the Third Amendment, Landlord shall immediately, and in every instance, provide written notification of such change to the County pursuant to this section.

5. Section 16.17, Non-Discrimination, is modified to include a prohibition against discrimination based on familial status.

6. This Third Amendment is expressly contingent upon the approval of the Palm Beach County Board of County Commissioners, and shall become effective only when signed by all parties and approved by the Palm Beach County Board of County Commissioners (the "Effective Date").

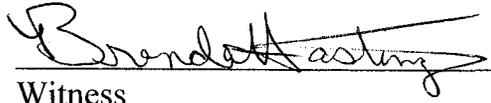
7. Except as set forth herein, the Lease, as amended, remains unmodified and in full force and effect and the parties hereby ratify, confirm, and adopt the Lease, as amended, in accordance with the terms thereof.

IN WITNESS WHEREOF, Landlord and County have executed this Third Amendment, or have caused the same to be executed, as of the day and year first above written.

WITNESS:

LANDLORD:

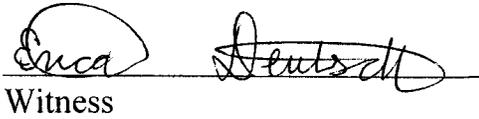
TALLMAN, LLC, a Florida limited liability company


Witness

By: 
Harold G. Murphy

Brenda Hastings
Print Name

Title: Managing Member


Witness

Erica Deutsch
Print Name

ATTEST:

SHARON R. BOCK
CLERK & COMPTROLLER

COUNTY:

PALM BEACH COUNTY, a political subdivision of the State of Florida

By: _____
Deputy Clerk

By: _____
Shelley Vana, Chair

WITNESS:

Witness

Print Name

Witness

Print Name

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS AND CONDITIONS

By: 
Assistant County Attorney

By: 
Department Director

EXHIBIT "A"

**LANDLORD'S DISCLOSURE OF BENEFICIAL INTERESTS
(REQUIRED BY FLORIDA STATUTES 286.23)**

TO: PALM BEACH COUNTY CHIEF OFFICER, OR HIS OR HER OFFICIALLY
DESIGNATED REPRESENTATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, this day personally appeared, Harold G. Murphy, hereinafter referred to as "Affiant", who being by me first duly sworn, under oath, deposes and states as follows:

1. Affiant is the Managing Member (position - i.e. president, partner, trustee) of Tallman, LLC, a Florida limited liability company, (the "Landlord") which entity is the owner of the real property legally described on the attached Exhibit "A" (the "Property").

2. Affiant's address is: 6907 Southern Blvd., West Palm Beach, FL 33413 (mailing address is 13245 Compton Road, Loxahatchee, FL 33470).

3. Attached hereto, and made a part hereof, as Exhibit "B" is a complete listing of the names and addresses of every person or entity having a five percent (5%) or greater beneficial interest in the Landlord and the percentage interest of each such person or entity.

4. Affiant acknowledges that this Affidavit is given to comply with Florida Statutes 286.23, and will be relied upon by Palm Beach County in its lease of the Property.

5. Affiant further states that Affiant is familiar with the nature of an oath and with the penalties provided by the laws of the State of Florida for falsely swearing to statements under oath.

6. Under penalty of perjury, Affiant declares that Affiant has examined this Affidavit and to the best of Affiant's knowledge and belief it is true, correct, and complete.

FURTHER AFFIANT SAYETH NAUGHT.

Harold G. Murphy, Affiant
Print Affiant Name: HAROLD G. MURPHY

The foregoing instrument was sworn to, subscribed and acknowledged before me this 19 day of January, 2012, by Harold G. Murphy [X] who is personally known to me or [] who has produced _____ as identification and who did take an oath.

Linda L. Murphy
Notary Public

LINDA L. MURPHY
(Print Notary Name)

NOTARY PUBLIC

State of Florida at Large
My Commission Expires Linda L. Murphy

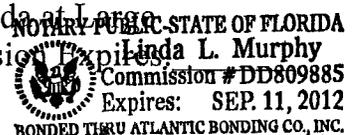


EXHIBIT "A"

PROPERTY

LEGAL DESCRIPTION (As furnished by client)

THE EAST HALF (E 1/2) OF TRACT 70, BLOCK 5, PALM BEACH FARMS CO., PLAT NO. 3, ACCORDING TO THE PLAT THEREOF, ON FILE IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR PALM BEACH COUNTY, FLORIDA, RECORDED IN PLAT BOOK 2, PAGE 45 TO 54, INCLUSIVE, LESS THE NORTHERLY 15 FEET THEREOF, LESS THE FOLLOWING DESCRIBED PARCEL:

BEGINNING AT THE SOUTHEAST CORNER OF TRACT 70; THENCE N01°22'25"W, ALONG THE EAST LINE OF SAID TRACT 70, A DISTANCE OF 69.13 FEET TO A POINT; THENCE N88°29'03"W, A DISTANCE OF 330.49 FEET TO A POINT; THENCE S01°00'12"E, A DISTANCE OF 73.53 FEET TO A POINT ON THE SOUTH LINE OF SAID TRACT 70; THENCE N89°01'07"E, A DISTANCE OF 330.21 FEET, MORE OR LESS, TO THE POINT OF BEGINNING.

TRACT CONTAINS 190,871.6 SQUARE FEET, MORE OR LESS AND 4.38 ACRES, MORE OR LESS

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: 1/23/2012

REQUESTED BY: Steven K. Schlamp
Property Specialist, PREM

PHONE: 233-0239
FAX: 233-0210

PROJECT TITLE: PBSO Impound Lot Amendment Three

PROJECT NO.: 2011-5.020

Fiscal Years	2012	2013	2014	2015	2016
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	\$48,669.15	\$47,124.13	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>\$48,669.15</u>	<u>\$47,124.13</u>	<u>\$-0-</u>	<u>\$-0-</u>	<u>\$-0-</u>
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

*** By signing this BAS your department agrees to these staff costs and your account will be charged upon receipt of this BAS by FD&O. Unless there is a change in the scope of work, no additional staff charges will be billed.*

BUDGET ACCOUNT NUMBER

FUND: 0001

DEPT: 164

UNIT: 1604

OBJ: 4410

SUB OBJ:

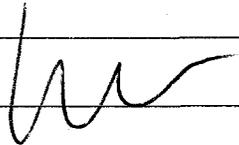
IS ITEM INCLUDED IN CURRENT BUDGET: YES NO

IDENTIFY FUNDING SOURCE FOR EACH ACCOUNT: (check all that apply)

- Ad Valorem (source/type: _____)
- Non-Ad Valorem (source/type: _____)
- Grant (source/type: _____)
- Park Improvement Fund (source/type: _____)
- General Fund Operating Budget Federal/Davis Bacon
- _____ _____ _____

SUBJECT TO IG FEE? YES NO

Department: FD&O

BAS APPROVED BY:  DATE: 1-23-12

ENCUMBRANCE NUMBER:

Below is information for rent only justifying the figures listed on the attached BAS for the PBSO Impound Lot Amendment Number Three to Lease Agreement with Tallman, LLC:

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Fiscal Years	2012	2013	2014	2015	2016
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	<u>\$48,669.15</u>	<u>\$47,124.13</u>	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>\$48,669.15</u>	<u>\$47,124.13</u>	<u>\$-0-</u>	<u>\$-0-</u>	<u>\$-0-</u>

FY2012:

- As the Lease expires on 3/28/2012, rent has already been budgeted for 10/1/2011 – 3/28/2012.
- The current rent is \$95,793.22 per year (\$7,982.77 per month).
- Per Amendment Number Three, the term is being extended from 3/29/2012 – 3/28/2013.
- Rent for the extension period is to remain at \$95,793.22 per year (\$7,982.77 per month).
- 3/29/2012 – 3/31/2012 = 3 days.
- \$7,982.77 per month ÷ 31 days for March 2012 = \$257.51 per day x 3 days = \$772.53.
- 4/1/2012 – 9/30/2012 = 6 months.
- \$7,982.77 per month x 6 months = \$47,896.62.
- \$772.53 + \$47,896.62 = \$48,669.15.

FY2012 TOTAL = \$48,669.15

FY2013:

- 10/1/2012 – 2/28/2013 = 5 months.
- \$7,982.77 per month x 5 months = \$39,913.85.
- 3/1/2013 – 3/28/2013 = 28 days.
- \$7,982.77 per month ÷ 31 days for March 2013 = \$257.51 per day x 28 days = \$7,210.28.
- \$39,913.85 + \$7,210.28 = \$47,124.13.

FY2013 TOTAL = \$47,124.13

FY2014 – FY 2016:

- \$-0-

LANDLORD'S DISCLOSURE OF BENEFICIAL INTERESTS
(REQUIRED BY FLORIDA STATUTES 286.23)

TO: PALM BEACH COUNTY CHIEF OFFICER, OR HIS OR HER OFFICIALLY
DESIGNATED REPRESENTATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, this day personally appeared, Harold G. Murphy, hereinafter referred to as "Affiant", who being by me first duly sworn, under oath, deposes and states as follows:

1. Affiant is the Managing Member (position - i.e. president, partner, trustee) of Tallman, LLC, a Florida limited liability company, (the "Landlord") which entity is the owner of the real property legally described on the attached Exhibit "A" (the "Property").

2. Affiant's address is: 6907 Southern Blvd., West Palm Beach, FL 33413 (mailing address is 13245 Compton Road, Loxahatchee, FL 33470).

3. Attached hereto, and made a part hereof, as Exhibit "B" is a complete listing of the names and addresses of every person or entity having a five percent (5%) or greater beneficial interest in the Landlord and the percentage interest of each such person or entity.

4. Affiant acknowledges that this Affidavit is given to comply with Florida Statutes 286.23, and will be relied upon by Palm Beach County in its lease of the Property.

5. Affiant further states that Affiant is familiar with the nature of an oath and with the penalties provided by the laws of the State of Florida for falsely swearing to statements under oath.

6. Under penalty of perjury, Affiant declares that Affiant has examined this Affidavit and to the best of Affiant's knowledge and belief it is true, correct, and complete.

FURTHER AFFIANT SAYETH NAUGHT.

Harold G. Murphy, Affiant
Print Affiant Name: Harold G. Murphy

The foregoing instrument was sworn to, subscribed and acknowledged before me this 19 day of January, 2018, by Harold G. Murphy who is personally known to me or who has produced — as identification and who did take an oath.

Linda L. Murphy
Notary Public

Linda L. Murphy
(Print Notary Name)

NOTARY PUBLIC
State of Florida at Large
My Commission Expires SEP 11, 2012
Commission # DD809885
BONDED THRU ATLANTIC BONDING CO., INC.



ALEX SINK
CHIEF FINANCIAL OFFICER
STATE OF FLORIDA

March 23, 2007

**VERIFICATION OF AUTOMATIC EXEMPT STATUS FROM WORKERS' COMPENSATION
COVERAGE REQUIREMENTS**

This letter verifies that the individual listed below is AUTOMATICALLY EXEMPT from Florida workers' compensation coverage requirements within the scope of the non-construction business or trade listed below and is not required to obtain an exemption issued by the Division of Workers' Compensation in order to achieve exempt status.

PERSON: Harold Murphy
BUSINESS NAME: Tallman, LLC
ADDRESS: 6907 Southern Blvd, Building 1
CITY: West Palm Beach, FL 33413
TYPE OF NON-CONSTRUCTION BUSINESS OR TRADE: Building Operations by Owner
CLASS CODE OF BUSINESS: 9012 & 9015

This verification of automatic exempt status applies ONLY within the scope of the non-construction business or trade listed above, and applies ONLY to the individual listed above. However, if Tallman, LLC employs four or more full or part-time employees, it must obtain workers' compensation coverage. A member of a limited liability company engaged in the non-construction industry is considered an employee if the member meets the definition of employee as defined in Section 440.02(15)(a), Florida Statutes.

If Harold Murphy engages in a construction-related activity as defined in section 440.02(8), Florida Statutes, or in Rule 69L-6.021, Florida Administrative Code, the automatic exempt status for Harold Murphy shall not apply, and Harold Murphy must comply with workers' compensation coverage requirements for the construction industry.

If Harold Murphy is a corporate officer as defined in Section 440.02(9), Florida Statutes, this Verification of Automatic Exempt Status from Workers' Compensation Coverage Requirements for Harold Murphy does not apply. In order to become exempt, Harold Murphy is required to complete an exemption application and submit the application to the Division of Workers' Compensation. If the Division of Workers' Compensation determines that Harold Murphy meets the eligibility requirements for the issuance of an exemption, the Division of Workers' Compensation will issue an exemption to Harold Murphy.

If you have any questions, please call (850) 413-1609.

Sincerely,

A handwritten signature in black ink that reads "Andrew Sabolic". The signature is written in a cursive style with a large, sweeping initial "A".

Andrew Sabolic
Chief, Bureau of Compliance

ANDREW SABOLIC • BUREAU CHIEF
DIVISION OF WORKERS' COMPENSATION • BUREAU OF COMPLIANCE
200 EAST GAINES STREET • TALLAHASSEE, FLORIDA 32399-4228 TEL. 850-413-1609 • FAX 850-922-1028 • SC293-1609
EMAIL • ANDREW.SABOLIC@FLDFS.COM

AFFIDAVIT OF LIMITED LIABILITY COMPANY

STATE OF Florida

COUNTY OF Palm Beach

BEFORE ME, the undersigned authority, personally appeared, the undersigned who by me being first duly sworn, depose(s) and say(s) that:

1. The undersigned is the Managing Member of Tallman, LLC, a limited liability company organized and existing under the laws of the State of Florida (the "Company").
2. Articles of Organization of the Company have been filed, and are on-file with, the Florida Department of State and such articles are incorporated herein by reference.
3. The Company is in good standing and is authorized to transact business in the State of Florida as of the date hereof.
4. The company is a [select (a) or (b)] (a) member managed or (b) manager managed limited liability company.
5. The undersigned is the sole managing member of the Company or has been authorized by majority vote of the managing members to act on behalf of the Company and legally bind the Company and execute contracts and other instruments relating to the transaction of business of the Company.
6. The undersigned has the right and authority to enter into that certain Third Amendment to Lease Agreement between Palm Beach County, a political subdivision of the State of Florida and the Company (the "Third Amendment", which is incorporated herein by reference and made a part hereof, and such other instruments as may be necessary and appropriate for the Company to fulfill its obligations under such Third Amendment.
7. Upon execution, delivery and recordation of the Third Amendment and documents by the undersigned, all of the aforesaid shall be valid agreements of and be binding upon the Company.

8. The transactions contemplated herein will not violate any of the terms and conditions of the Company's member agreement, operating agreement certificate of organization or of any other agreement and amendments thereto of whatever kind between the Company and any third person.

9. The undersigned acknowledges that affiant is familiar with the nature of an oath and the penalties provided by the laws of the State of Florida and that this Affidavit is being given to induce Palm Beach County to enter into the Agreement.

FURTHER AFFIANT SAYETH NAUGHT,

Harold Murphy
Print Name:

Harold G. Murphy
as [select one: Manager or Member]

SWORN TO AND SUBSCRIBED before me on this 19 day of JAN, 2012,
by Harold G. Murphy, Manager/Member of Tallman, LLC on
behalf of the Company who is personally known to me OR who produced -
-, as identification and who did take an oath.

Linda L. Murphy
Notary Signature

LINDA L. MURPHY
Print Notary Name

NOTARY PUBLIC

State of FLORIDA at large

My Commission Expires:

AFFIDAVIT OF LIMITED LIABILITY COMPANY

STATE OF Florida

COUNTY OF Palm Beach

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Print Name:

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as [select one: Manager or Member]

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by Harold G. Murphy, Manager/Member of Tallman, LLC on
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Linda L. Murphy

Notary Signature

Linda L. Murphy

Print Notary Name

NOTARY PUBLIC

State of FLORIDA at large

My Commission Expires:



CERTIFICATE OF LIABILITY INSURANCE

OP ID: WN

DATE (MM/DD/YYYY)
06/15/11

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).

PRODUCER Chase Insurance Agency Inc PO Box 17497 Plantation, FL 33318-7497 MIKE CHASE	954-792-4300 954-791-9344	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: MURPH-1	FAX (A/C, No):
INSURED Murphy's Paint & Body Shop LLC & Tallman LLC 6907 Southern Blvd West Palm Beach, FL 33413	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: The Charter Oak Fire Ins Co		25615
	INSURER B: Travelers Indemnity Co Of Amer		25658
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** **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.

SR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	X		6601A309198	06/16/11	06/16/12	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> Personal Injury			BA-1A30952A	06/17/11	06/17/12	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000
B	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N if yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	GKPR Legal Liab			6601A309198	06/16/11	06/16/12	\$500 Ded 300,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Additional Insured in favor of Certificate Holder with respects to work performed by the Insured in their behalf.

CERTIFICATE HOLDER	CANCELLATION
PALMC04 Palm Beach County BOCC Property & Real Estate Mgmt Attn: Director 2633 Vista Pkwy West Palm Beach, FL 33411	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 

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