



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/25/2018

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 Hiscox Inc. 520 Madison Avenue 32nd Floor New York, NY 10022	CONTACT NAME: PHONE (A/C No, Ext): (888) 202-3007		FAX (A/C, No):
	E-MAIL ADDRESS: contact@hiscox.com		
INSURED All King Pro Inc dba Master's Cleaning Services 636 W New York Ave Deland FL 32720	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Hiscox Insurance Company Inc		10200
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	UDC-2393286-CGL-18	10/22/2018	10/22/2019	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 \$ S/T Gen. Agg. \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Daytona Beach is named additional insured. A waiver of subrogation applies in favor of the additional insured, subject to policy terms and conditions.

CERTIFICATE HOLDER

City of Daytona Beach
 P.O Box 2451
 Daytona Beach, FL 32115-2451

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.

AUTHORIZED REPRESENTATIVE

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Tel: 1-800-841-3000

GEICO INDEMNITY COMPANY
One GEICO Center
Macon, GA 31295-0001

Declarations Page

This is a description of your coverage.
Please retain for your records.

Policy Number: 4405-85-67-84

Coverage Period:

08-11-18 through 02-11-19

12:01 a.m. local time at the address of the named insured.

Date Issued: July 8, 2018

TARA DANNETTE KING
PO BOX 2324
DELAND FL 32721-2324

Email Address: tarakingis@icloud.com

Table with 2 columns: Named Insured (Tara D King) and Additional Driver (Jordan M Padgett)

Table with 4 columns: Vehicles, VIN, Vehicle Location, Finance Company/Lienholder. Lists 2007 M Benz and 2010 Dodge Charger.

Table with 4 columns: Coverages*, Limits and/or Deductibles, Vehicle 1, Vehicle 2. Lists Property Damage Liability, Personal Injury Protection, Comprehensive, Collision, and Six Month Premium Per Vehicle.

*Coverage applies where a premium or \$0.00 is shown for a vehicle.

If you elect to pay your premium in installments, you may be subject to an additional fee for each installment. The fee amount will be shown on your billing statements and is subject to change.

Discounts

Table showing discounts: The total value of your discounts is \$735.00. Includes Seatbelt, Multi-Car, Good Student, Renewal, and Anti-Lock Brakes.

000001440585678409062019713

Discounts continued

Anti-Theft Device (All Vehicles)\$13.50
Passive Restraint/Air Bag (All Vehicles).....\$15.20

Contract Type: A30FL, FAMILY AUTO INSURANCE POLICY

Contract Amendments: ALL VEHICLES - A30FL(03-11) A54ED(03-14) A54FL(12-15) CRA131(03-11) FLPIP(07-15)

Unit Endorsements: UE316F (02-15)(VEH 1,2)

Countersigned by Authorized Representative



Important Policy Information

-If you have any questions about this policy, about the insurance services we offer, or if you need assistance resolving a complaint please contact GEICO at 1-800-841-3000. We can assist you with your personal insurance needs.

-Please review the front and/or back of this page for your coverage and discount information.

-Reminder - Physical damage coverage will not cover loss for custom options on an owned automobile, including equipment, furnishings or finishings including paint, if the existence of those options has not been previously reported to us. This reminder does NOT apply in VIRGINIA, however, in Virginia coverage is limited for custom furnishings or equipment on pick-up trucks or vans but you may purchase coverage for this equipment. Please call us at 1-800-841-3000 or visit us at geico.com if you have any questions.

-Claims incurred while an insured vehicle is being used to carry passengers for hire may not be covered by this contract. Please review the contract for a full list of exclusions and contact us if you plan to use any of your insured vehicles for this purpose.

-Any person who knowingly and with intent to injure, defraud or deceive any insured, files a statement of claim or an application containing any false, incomplete or misleading information is guilty of a felony in the third degree. GEICO asks that you support us in the battle against insurance fraud by reporting any suspicious activities to GEICO at (800) 824-5404 x3313 or the National Insurance Crime Bureau (NICB) (800) TEL-NICB or www.nicb.org. Your call is free. Your call can be anonymous. You could be eligible for a reward.

-Confirmation of coverage has been sent to your lienholder and/or additional insured.

-This policy does not provide Bodily Injury Liability Insurance or any other coverage for which a specific premium charge is not shown on this Declarations page.



JIMMY PATRONIS
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

**** CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW ****

NON-CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 7/25/2017

EXPIRATION DATE: 7/25/2019

PERSON: TARA KING

EMAIL: TARA.KING@KINGPROINC.COM

FEIN: 821743579

BUSINESS NAME AND ADDRESS:

ALL KING PRO INC

530 S SPRING GARDEN AVE UNIT 04, 3

DELAND, FL 32724

SCOPE OF BUSINESS OR TRADE:

Janitorial Services By
Contractors-No Window
Cleaning Above Ground Level
& Drivers

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

Thanks

Tara

On Mon, Oct 22, 2018 at 7:17 PM Tara King <tara.king@kingproinc.com> wrote:

Kirk

I will contact insurance company and get what you need.

Masters Cleaning is dba under All king pro inc. All King Pro is registered under sunbiz and doc number is P170005116. Masters cleaning registration number is G13000120020.

Will research work comp issue. Need to change address anyway since I have moved.

As for auto I don't drive any city vehicles nor do I transport any city employees in my vehicle. I use my vehicle to get to facilities I clean.

Thanks

Tara

On Mon, Oct 22, 2018 at 4:50 PM Zimmerman, Kirk <ZimmermanKirk@codb.us> wrote:

From: Jones, Mark E.

Sent: Monday, October 22, 2018 4:45 PM

To: Zimmerman, Kirk <ZimmermanKirk@CODB.US>

Subject: Re: Peabody Custodial Services: COI's, CONTRACT Ksigned - 0118-2390



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All King Pro

No Events No Name History

Detail by Entity Name

Florida Profit Corporation
ALL KING PRO INC.

Filing Information

Document Number	P17000051116
FEI/EIN Number	82-1743579
Date Filed	06/09/2017
State	FL
Status	ACTIVE

Principal Address

636 W New York AVE
DELAND, FL 32720

Changed: 05/01/2018

Mailing Address

PO BOX 2324
DELAND, FL 32721

Registered Agent Name & Address

KING, TARA D
4074 PARK AVE
DELAND, FL 32720

Officer/Director Detail

Name & Address

Title P

KING, TARA D
4074 PARK AVE
DELAND, FL 32721

Title S

KING, JODY R
4074 PARK AVE
DEALND, FL 32720

Annual Reports

Report Year	Filed Date
2018	05/01/2018

Document Images

05/01/2018 -- ANNUAL REPORT	View image in PDF format
06/09/2017 -- Domestic Profit	View image in PDF format

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All King Pro

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No Events No Name History



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Fictitious Name Search

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Fictitious Name

MASTER'S CLEANING SERVICES

Filing Information

Registration Number G13000120020
Status ACTIVE
Filed Date 12/09/2013
Expiration Date 12/31/2023
Current Owners 1
County VOLUSIA
Total Pages 2
Events Filed 1
FEI/EIN Number 82-1743579

Mailing Address

636 W NEW YORK AVE
DELAND, FL 32720

Owner Information

ALL KING PRO INC
636 NEW YORK AVE
DELAND, FL 32720
FEI/EIN Number: 82-1743579
Document Number: P17000051116

Document Images

[12/09/2013 -- Fictitious Name Filing](#)

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[05/01/2018 -- Fictitious Name Renewal Filing](#)

[View image in PDF format](#)

APPLICATION FOR RENEWAL OF FICTITIOUS NAME

REGISTRATION# G13000120020

Fictitious Name: MASTER'S CLEANING SERVICES

FILED
May 01, 2018
Secretary of State
G18000054348

Current Mailing Address:

4074 PARK AVE
DELAND, FL 32720

New Mailing Address:

636 W NEW YORK AVE
DELAND, FL 32720

Current County of Principal Place of Business:

VOLUSIA

New County of Principal Place of Business:

Current FEI Number:

New FEI Number:

82-1743579

Current Owner(s):

Document #: () Delete
FEI #:
Name: KING, TARA DANNETTE
Address: 4074 PARK AVE
City-St-Zip: DELAND, FL 32720

Additions/Changes to Owner(s):

Document #: P17000051116 (X) Change () Addition
FEI #: 82-1743579
Name: ALL KING PRO INC
Address: 636 NEW YORK AVE
City-St-Zip: DELAND, FL 32720

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I understand that the electronic signature below shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

TARA KING

05/01/2018

Electronic Signature(s)

Date

Certificate of Status Requested ()

Certified Copy Requested ()

Zimmerman, Kirk

From: Jones, Mark E.
Sent: Thursday, October 25, 2018 1:48 PM
To: Zimmerman, Kirk
Cc: Smith, Chad
Subject: Re: Peabody Janitorial: CONTRACT Ksigned - 0118-2390, COI's
Attachments: 70889327.pdf; sunbiz.org - Florida Department of State.pdf

She will need to update you with the WC exemption from the State when it is received.

The Commercial General Liability insurance is now o.k. As long as she will not be using any vehicles in the course and scope of these services I am o.k. with the auto liability as well.

I found the documents tying in the Mater's Cleaning to All King Pro on Sunbiz. Please see attached for your file.

Mark Jones, CPCU, ARM, AIC
Risk Manager
City of Daytona Beach
301 S. Ridgewood Ave
Daytona Beach, FL 32115
P:(386)671-8231
F:(386)671-3261

From: Zimmerman, Kirk
Sent: Thursday, October 25, 2018 1:03 PM
To: Jones, Mark E.
Cc: Smith, Chad
Subject: Peabody Janitorial: CONTRACT Ksigned - 0118-2390, COI's

Mark,

Attached is the contract and COI's (GL has been updated since first attempt) as well as Sunbiz report and answers to previous questions.
Please review.

Kirk

Your message is ready to be sent with the following file or link attachments:

CONTRACT Ksigned - 0118-2390
COI's

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.