

Policy Number: **FLBSIC-1611-00663**Date Entered: **2/7/2024****CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)
2/6/2025

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 lieu of such endorsement(s).

PRODUCER Royalty Insurance Services, Inc. 14545 Victory Blvd Suite 303 Van Nuys, CA 91411	CONTACT NAME: PHONE (A/C, No, Ext): (818)989-0206 FAX (A/C, No): (818)330-4540 E-MAIL ADDRESS: CERT@ROYALTYFINANCIAL.COM	
	INSURER(S) AFFORDING COVERAGE INSURER A: Benchmark Insurance Company NAIC # 41394 INSURER B: Great American Insurance Co 16691 INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED TJK AUTO TRANSPORTATION INC 9101 OLD BUSTLETON AVE APT B9 PHILADELPHIA, PA 19115		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

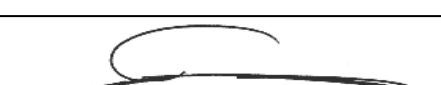
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$	
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☒ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY			FLBSIC-1611-00663	02/07/2025	02/07/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ 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 \$	
B	CARGO			IMP F156578 01	02/07/2025	02/07/2026	\$250,000	\$2,500 DED.
A	PHYSICAL DAMAGE			FLBSIC-1611-00663	02/07/2025	02/07/2026	STATED VALUE	\$1,000 DED.

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

2023 VOLVO VIN:4V4NC9EHXPN307645 S.V.\$80,000 / 2018 COTTRELL VIN:5E0AU1745JG041501 S.V.\$50,000
2016 COTTRELL VIN:5E0AU174XGG716901 S.V.\$50,000 / 2017 COTTRELL VIN:5E0AU1746HG902601 S.V.\$50,000
2022 VOLVO VIN:4V4NC9EH0NN299357 S.V.\$90,000 2019 VOLVO VIN:4V4WC9EH3KN219985 S.V.\$62,000
2023 FREIGHTLINER VIN:3AKJHHR7PSUG5476 S.V.\$90,000 2016 COTTRELL VIN:5E0AU1742GG704001 S.V.\$42,000
SHAVKAT TOSHEV (OWNER), FAYZULLO FAYZULLOEY ADD:09/20/24,
FURKAT UZBEKOV ADD:09/20/24, ULUGBEK AZAMOV ADD:01/07/25

CERTIFICATE HOLDER**CANCELLATION**

Autosled Inc 6010 Executive Blvd, Suite 1010 Rockville, MD 20852	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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