

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/08/2024

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).											
PRO	DUCER			CONTACT NAME: NEXT STEP GROUP							
Next Step Group						PHONE (A/C, No, Ext): 224-520-8333 FAX (A/C, No): 224-634-2093					
1750 E Golf Rd Suite 238						E-MAIL ADDRESS: Tatiana@nextstepins.com					
						INS	SURER(S) AFFOR	DING COVERAGE		NAIC #	
Schaumburg IL 60173						INSURER A: GEICO					
INSURED						INSURER B:					
ILK HAULERS INC						INSURER C:					
836 S Arlington Heights Rd ste 346						INSURER D :					
						INSURER E :					
	Elk Grove Village			IL 60007-3667	INSURER F:						
				NUMBER:	DEENL	REVISION NUMBER: EEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD					
IN C E	IDICATED. NOTWITHSTANDING ANY REQ ERTIFICATE MAY BE ISSUED OR MAY PEF XCLUSIONS AND CONDITIONS OF SUCH F	UIRE RTAII POLIC	MEN' N, THE CIES.	T, TERM OR CONDITION OF E INSURANCE AFFORDED F	F ANY C BY THE	CONTRACT OR POLICIES DE REDUCED BY	R OTHER DOC SCRIBED HER PAID CLAIMS	UMENT WITH RESPE	ECT TO WHIC	CH THIS	
INSR LTR		INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	X COMMERCIAL GENERAL LIABILITY			1				EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,0	00,000	
	X CLAIMS-MADE X OCCUR			1				PREMISES (Ea occurren	100)	0,000	
				1				MED EXP (Any one person			
Α				9300062056		08/15/2024	08/15/2025	PERSONAL & ADV INJU		00,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:			1				GENERAL AGGREGATE		00,000	
	POLICY JECT LOC			1				PRODUCTS - COMP/OP		00,000	
	OTHER: AUTOMOBILE LIABILITY							COMBINED SINGLE LIM	\$ //IT		
				1		00/15/2024	00/15/2025	(Ea accident) BODILY INJURY (Per per	₹ 1,0	00,000	
	ANY AUTO ALL OWNED SCHEDULED			02000/205/				BODILY INJURY (Per acc			
Α	AUTOS AUTOS NON-OWNED			9300062056		08/15/2024	08/15/2025	PROPERTY DAMAGE	\$		
	HIRED AUTOS AUTOS			1				(Per accident)	\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE			1				AGGREGATE	\$		
	DED RETENTION \$			1				AGGILGATE	\$		
	WORKERS COMPENSATION			<u> </u>				PER C	OTH-		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE			1				E.L. EACH ACCIDENT	\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A		1				E.L. DISEASE - EA EMPI			
	If yes, describe under DESCRIPTION OF OPERATIONS below			1				E.L. DISEASE - POLICY			
Α	Motor Truck Cargo	9300062056			08/15/2024	08/15/2025	Limit: \$250,000, Deductible: \$2,500		00		
A Trailer InterchangePer Trailer Ded: \$2,00 9300062056					08/15/2024 08/15/2025 Limit per Trailer: \$80,000						
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101, Additional Remarks Schedu	ıle, may b	e attached if mor	re space is requir	ed)			
Additionally insured: Bluestar Corporate Relocation Services, 5101 Darmstadt Rd, Hillside, IL 60162											

CERTIFICATE HOLDER		CANCELLATION				
Super Dispatch	St #210	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
905 McGree Street, #2	et, #210	AUTHORIZED REPRESENTATIVE				
Kansas City	MO 64106	Tatiana Canatui				