



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/01/2026

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).

<b>PRODUCER</b> DOVBENKO INSURANCE AGENCY INC 855 E GOLF RD STE 1123 ARLINGTON HEIGHTS, IL 60005	<b>CONTACT NAME:</b> IRYNA M DOVBENKO <b>PHONE (A/C, No, Ext):</b> +1(224)-544-9959 <b>E-MAIL ADDRESS:</b> certificate@dovbenko.com	<b>FAX (A/C, No):</b>	
	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURED</b> IMAN FREIGHT LLC 3205 N WILKE ROAD SUITE 123, ARLINGTON HEIGHTS, IL, 60004	<b>INSURER A:</b> Lloyds of London (258394)		15792
	<b>INSURER B:</b> THE TRAILBLAZER INSURANCE COMPANY, F		16994
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b> MSIG Specialty Insurance USA Inc		34886
<b>INSURER F:</b>			

**COVERAGES**

CERTIFICATE NUMBER: 94781

REVISION NUMBER: 1

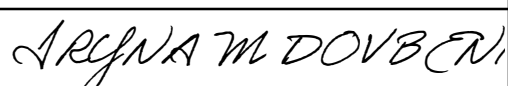
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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	
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <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 OTHER:			BINDER	05/29/2026	05/29/2027	EACH OCCURRENCE	\$ 1,000,000.00
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 0.00
							MED EXP (Any one person)	\$ 0.00
							PERSONAL & ADV INJURY	\$ 0.00
							GENERAL AGGREGATE	\$ 2,000,000.00
							PRODUCTS - COMP/OP AGG	\$ 0.00
								\$ 0.00
B	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			TB00000311-01	05/28/2026	05/28/2027	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000.00
							BODILY INJURY (Per person)	\$ 0.00
							BODILY INJURY (Per accident)	\$ 0.00
							PROPERTY DAMAGE (Per accident)	\$ 0.00
								\$ 0.00
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE	\$ 0.00
							AGGREGATE	\$ 0.00
								\$ 0.00
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE	
							OTH-ER	
							E.L. EACH ACCIDENT	\$ 0.00
							E.L. DISEASE - EA EMPLOYEE	\$ 0.00
							E.L. DISEASE - POLICY LIMIT	\$ 0.00
E	Motor Truck Cargo (Cargo Type: A)			BINDER	05/29/2026	05/29/2027	\$5,000 DED	150,000.00
								0.00

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

DOT: 3731889; ANTONY M HELFERTY; FRANCIS EUGENE CHAMBERLIN; MYKHAILO MIRONENKO; ERIC KARABUT ; VAZGEN KIRAKOSIAN;  
 2024 Freightliner Cascadia 3AKJHHDR5RSVB7495; 2024 Ford F-350 Super Duty 1FT8W3DM1REE85944; 2024 RAM 3500 3C63RRGL7RG393535;  
 2024 Ford F-350 Super Duty 1FT8W3DT6REF86677; 2024 Ford F-350 Super Duty 1FT8W3DTXREF88917;

**CERTIFICATE HOLDER****CANCELLATION**

Super Dispatch  905 McGee St. #210 Kansas City, MO  64106	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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## **IMPORTANT**

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

## **DISCLAIMER**

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.