

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/10/2026

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).

PRODUCER Cavallino Risk Management, Inc. 675 W Jericho Turnpike Huntington NY 11743		CONTACT NAME: Alyssa De la Garza PHONE (A/C, No, Ext): (631) 385-5980 FAX (A/C, No): (631) 385-5984 E-MAIL ADDRESS: Alyssa@cavallinorisk.com	
INSURED EXPRESS LINE LLC 814 KENDRICK STREET PHILADELPHIA, PA 19111 Philadelphia PA 19111		INSURER(S) AFFORDING COVERAGE INSURER A: Universal Casualty Risk Retention Group, Inc INSURER B: Lloyds of London INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 16286 10736	

COVERAGES

CERTIFICATE NUMBER: CL268730254

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. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. *Not Applicable in WY

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 ☐ PRO-JECT ☐ 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			URG-06253	08/11/2026	08/11/2027	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) \$ \$ \$ \$ \$
	UMBRELLA LIAB EXCESS LIAB ☐ OCCUR ☐ 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	Motor Truck Cargo			MTC0012426	08/11/2026	08/11/2027	limit deductible \$250,000 \$2,500

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

2021 Freightliner 3AKJHHR8MSMD0229
2021 Freightliner 1FUJGLDR5HLHF1865
2017 Freightliner 3AKJGLDR1HSHX5279
2024 Volvo 4V4NC9EH3RN315847
2016 Volvo 4V4NC9EG3GN946313
2022 Freightliner 3AKJHHRONSNG2001

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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AGENCY CUSTOMER ID: 00035631

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Cavallino Risk Management, Inc.		NAMED INSURED EXPRESS LINE LLC	
POLICY NUMBER			
CARRIER	NAIC CODE		
		EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance

2026 Freightliner 3AKJJHDR2TSWV1025
 2020 Volvo 4V4NC9EH3LN200494
 2023 Volvo 4V4NC9EH6PN309330
 2025 Volvo 4V4BC9EHXSN695519
 2019 Volvo 4V4NC9EH8KN219797
 2020 Western Star 5KKHAEDV6LPKY4179
 2018 Freightliner 1FUJGLDR8JLHF2546
 2024 Freightliner 3AKJHHDR5RSVA9896
 2019 Freightliner 3AKJHHDRXMSMU3519
 2023 Freightliner 3AKJHHDR9PSNL1918
 Goga Aphriamashvili
 Gagi Aphriamashvili
 Shalva Khatiasvili
 Azat Sadyrbayev
 Rezo Giorgadze
 Mikheil Merkvilishvili
 Archili Shashurashvili
 Aleks Tetrade
 Dato Minadze
 Mindia Shamatava
 Giorgi Williams
 David Kolhelly
 Givi Katsitadze
 Irakli Uturgaidze
 Giorgi Sulashvili
 Nikoloz Kipiani