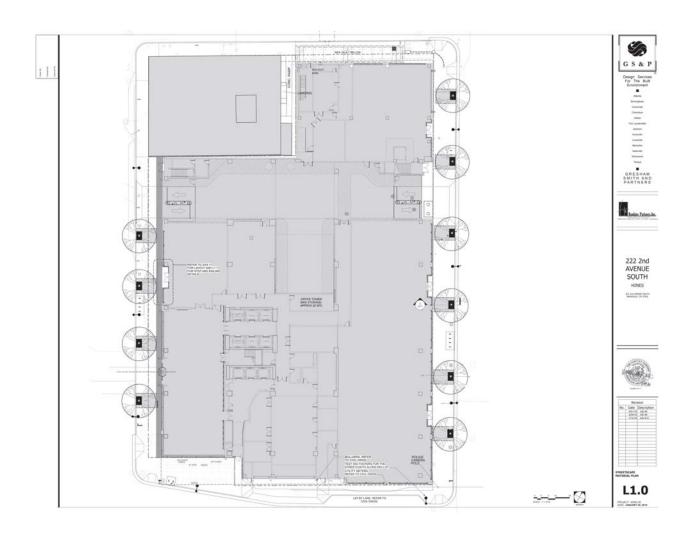
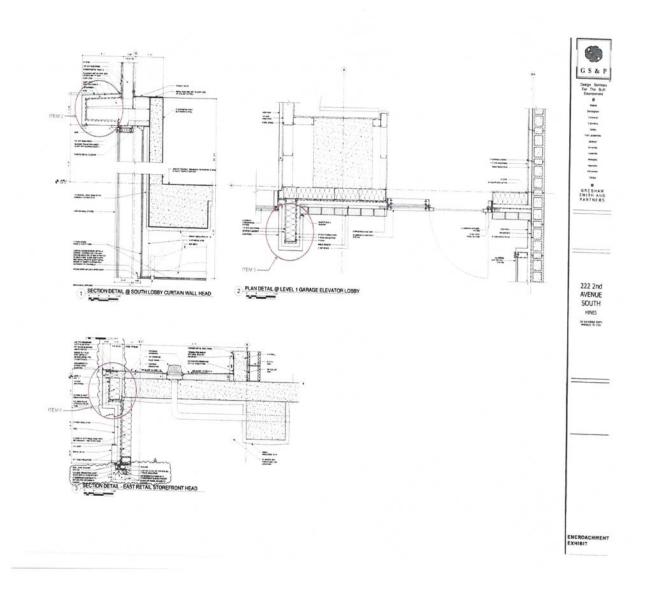
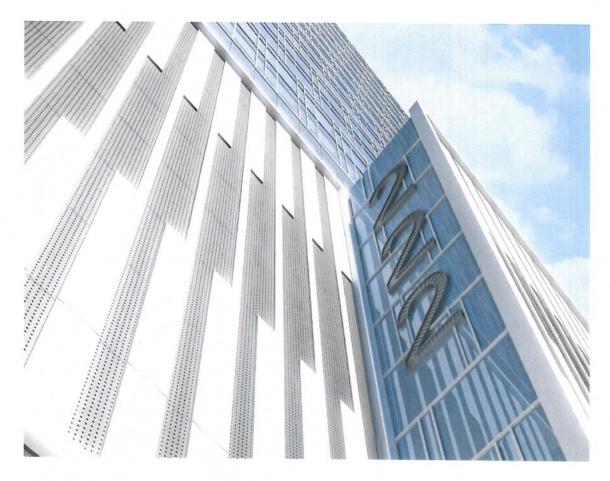
Proposal No. 2017M-012EN-001

AC	CORD [®]	CERT	TIFICATE OF L	IABILITY IN	SURANG	CE		E (MM/DD/YYYY) /04/2016
BEI	IS CERTIFICATE IS ISSUED AS A RTIFICATE DOES NOT AFFIRMA LOW. THIS CERTIFICATE OF II PRESENTATIVE OR PRODUCER,	NSURA! AND TH	OR NEGATIVELY AME NCE DOES NOT CONST HE CERTIFICATE HOLDE	ND, EXTEND OR AL TUTE A CONTRACT R.	TER THE CO	OVERAGE AFFORDED THE ISSUING INSUR	BY THER(S),	OLDER. THIS HE POLICIES AUTHORIZED
rue	PORTANT: If the certificate holds terms and conditions of the polic tificate holder in lieu of such endo	су, сепа	an policies may require a	the policy(ies) must an endorsement. A st	be endorsed. atement on t	If SUBROGATION IS his certificate does no	WAIVE t confer	D, subject to rights to the
RODU	ICER			CONTACT				
	sh USA Inc.* Dallas Street, Suite 1500-			NAME: PHONE (A/G, No, Ext): (A/G, No, Ext): (A/G, No, Ext):				
Hous	ston, TX 77002∢			(A/C, No, Ext): E-MAIL ADDRESS:		(A/C, N	0):	
Attn:	Houston Certs@marsh.com						-	T
				INSURER(S) AFFORDING COVERAGE INSURER A : Zurich American Insurance Company				NAIC #
SURE				INSURER B : N/A				16535
	Second Avenue LLC fines Interests Limited Partnership							N/A
2800	Post Oak Blvd.			INSURER C : N/A				N/A
Hous	ston, TX 77056			INSURER D :				-
				INSURER E :				-
OVE	RAGES CE	RTIFIC	ATE NUMBER:	INSURER F :		DEL MAIA I I I I I I I I I I I I I I I I I		
THIS	IS TO CERTIFY THAT THE POLICIE	S OF IN	SUPANCE LISTED BELOW	HOU-002837266-01	O THE	REVISION NUMBER:		
CER	CATED. NOTWITHSTANDING ANY F TIFICATE MAY BE ISSUED OR MAY LUSIONS AND CONDITIONS OF SUCH	PERTA POLICI	IN, THE INSURANCE AFFO ES. LIMITS SHOWN MAY HA	ON OF ANY CONTRACT	T OR OTHER	DOCUMENT WITH RESP		
R	TYPE OF INSURANCE	ADDL S		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIM	ITS	
X	COMMERCIAL GENERAL LIABILITY		GL O5087526-12	10/01/2016	10/01/2017	EACH OCCURRENCE	s	1,000,0
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	5	250,0
						MED EXP (Any one person)	\$	200,0
						PERSONAL & ADV INJURY	s	1,000,0
GE	EN'L AGGREGATE LIMIT APPLIES PER					GENERAL AGGREGATE	\$	2,000,0
	POLICY PRO- X LOC	1				PRODUCTS - COMP/OP AGG	-	2,000,0
	OTHER					PRODUCTS - COMPTOP AGG	\$	2,000,0
AU	JTOMOBILE LIABILITY					COMBINED SINGLE LIMIT	s	
	ANY AUTO					(Ea accident) BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS	-				BODILY INJURY (Per accident		
	HIRED AUTOS NON-OWNED					PROPERTY DAMAGE	\$	
	Auros				l 1	(Per accident)	5	
	UMBRELLA LIAB OCCUR						-	
	EXCESS LIAB CLAIMS-MADE			- 1		EACH OCCURRENCE	\$	
	DED RETENTIONS				-	AGGREGATE	S	
	RKERS COMPENSATION					PER OTH-	\$	
ANY	PROPRIETOR/PARTNER/EXECUTIVE				-	PER OTH- STATUTE ER		
OFFICERMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT	S	
						E.L. DISEASE - EA EMPLOYEE		
DESCRIPTION OF OPERATIONS DROW						E.L. DISEASE - POLICY LIMIT	\$	
CRIPT	TION OF OPERATIONS / LOCATIONS / VEHICL	LES (ACO	RD 101, Additional Remarks Sche	dule, may be attached if more	space is require	d)		
	pachment Permit at 222 2nd Avenue South, Nasi Holder is included as Additional Insured where r			with respect to Consent Link We				
	The state of the s	equired by	whiten contract and allowed by law	with respect to General Liabilit	у.			
DTIE	FICATE HOLDER			CANCELLATION				
KHE	tropolitan Government of Nashville-	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
he Mel nd Dav ttn: Ins 22 3rd	vidson County Metro Legal & Claims surance and Safety Division A TX 27204			AGGORDANGE WIT				
he Mel nd Dav ttn: Ins 22 3rd	surance and Safety Division*			AUTHORIZED REPRESENT of Marsh USA Inc.				
he Mel nd Dav ttn: Ins 22 3rd	surance and Safety Division« Avenue North, Ste #501«			AUTHORIZED REPRESENT		*		

D-17-07593







 $\begin{array}{c} 222 \\ {2^{nd}} \ \mathrm{Avenue} \ \mathrm{Monument} \ \mathrm{Sign} \end{array}$



4



222

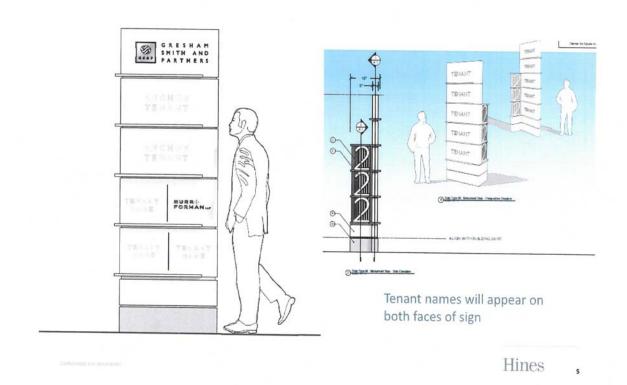


2nd Avenue Monument Sign

Hines

222

2nd Avenue Monument Sign



D-17-07593