			,		4		MAT	ER <u>-2</u>	OP ID: AI
AČŐRĎ		TITI		- - -			E	DATE	(MM/DD/YYYY)
	UER	41171	ICATE OF LIAE	기니	11 11/20	UKANG		07	7/10/2018
THIS CERTIFICATE IS ISSUE CERTIFICATE DOES NOT AI BELOW. THIS CERTIFICATE REPRESENTATIVE OR PROD	FIRMATIVEL	Y OR	NEGATIVELY AMEND, DOES NOT CONSTITUT	EXTE	ND OR ALTE	ER THE CO	VERAGE AFFORD	ed by th	E POLICIES
IMPORTANT: If the certificat the terms and conditions of the certificate holder in lieu of su	he policy, cert	tain po	olicies may require an en	policy(Idorse	ies) must be ment. A stat	e endorsed. Tement on th	If SUBROGATION is certificate does	IS WAIVEI not confer	D, subject to rights to the
PRODUCER			·	CONTA NAME:	^{ct} Barbara	Vierck, CIC	CISR	-	
Brown & Brown of Louisiana,LLC Brown & Brown of Baton Rouge				PHONE [AIC, No, Ext): 225-763-5600 [AIC, No]: 225-763-5650					
6300 Corporate Blvd, Ste 250	,			E-MAIL ADDRE		•			
BATON ROUGE, LA 70809 Barbara Vierck, CIC, CISR				INSURER(S) AFFORDING COVERAGE NAIC #					NAIC #
	-			INSURE			I Casualty Co		21415
INSURED Material Resource				INSURE	RB: *TEXAS	MUTUAL	NS CO		22945
Attn: Ryan Casto								22350	
P. O. Box 1183 Port Allen, LA 70	767			INSURE	RD:				
For Alleli, LA 10/0/				INSURE	RE:				
				INSURE	RF:				
COVERAGES			NUMBER:				REVISION NUMBE		
THIS IS TO CERTIFY THAT THE INDICATED, NOTWITHSTANDIN CERTIFICATE MAY BE ISSUED EXCLUSIONS AND CONDITIONS	G ANY REQUIN OR MAY PERT OF SUCH POLI	REMEN FAIN, T CIES. 1	IT. TERM OR CONDITION (THE INSURANCE AFFORDE	of an' Ed by	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH RE	ESPECT TO	WHICH THIS
INSR LTR TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS	
A X COMMERCIAL GENERAL LIAE	ILITY	ŀ					EACH OCCURRENCE	\$	1,000,000
	CUR		5X85838		06/01/2018	06/01/2019	DAMAGE TO RENTED PREMISES (Ea occurrent	ce) S	500,000
	[·		۰.				MED EXP (Any one perso		10,000
X EBL Claims Made		1					PERSONAL & ADV INJU		1,000,000
GEN'L AGGREGATE LIMIT APPLIES	PER:						GENERAL AGGREGATE		2,000,000
POLICY PRO- JECT	LOC	í l					PRODUCTS - COMP/OP		2,000,000
OTHER:							Emp Ben. COMBINED SINGLE LIM	5	1,000,000
					00104/0040	0010410040	(Ea_accident)		1,000,000
A X ANY AUTO ALL OWNED SCHEI	JULED		5X85838		06/01/2018	06/01/2019	BODILY INJURY (Per pe		
	S DWNED				•		BODILY INJURY (Per ac PROPERTY DAMAGE	s s	
HIRED AUTOS	S						(Per accident)	s	
							EACH OCCURRENCE	s	3,000,000
	CUR AIMS-MADE		5X85838		06/01/2018	06/01/2019	AGGREGATE	5	3,000,000
DED X RETENTIONS	10000						AboncoAre	s	
WORKERS COMPENSATION						· · · ·		DTH-	
C AND EMPLOYERS' LIABILITY			157136- LA	,	07/15/2018	07/15/2019	E.L. EACH ACCIDENT	s	1,000,000
B (Mandatory in NH)		`	0001309553- TX		07/15/2018	07/15/2019	E.L. DISEASE - EA EMPI	LOYEE S	1,000,000
 If yes, describe under DESCRIPTION OF OPERATIONS bei 			-				E.L. DISEASE - POLICY	LIMITS	1,000,000
A Leased/Rented Equi	-		5X85838		06/01/2018	06/01/2019	L/R Item		250,000
							L/R Max		500,000
DESCRIPTION OF OPERATIONS / LOCATI	ONS / VEHICLES (ACORD	101, Additional Remarks Schedul	le, may b	e attached if mor	e space is requir	ed) B	UPSHU	(**) :
See Attached.			а , т.				X		
	*		-	_			周てく	<u>x, m</u>	жоп
CERTIFICATE HOLDER				CAN	CELLATION			<u>≺ ≓</u>	TTC/
			UPSHU-1		• • • • • • • •				
Upshur County P O Box 730					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANDELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BEODELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
Gilmer, TX 75644	<u>ا</u>			AUTHO	RIZED REPRESE	NTATIVE			
1			、			R	Jone Vierche		
		•			-	Bar	me vurce		

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OP ID: AI

NOTEPAD:	INSURED'S NAME Mat	SHU-1, erial Resources, Inc.	MATER-2 OP ID: Al	Date 0	PAGE 2 7/10/2018
Louisiana Work C Texas Work Comp: are excluded off.	omp: Darren Moore Ryan Castro, Ste ičers;	and Cass Moore are eve, Castro, Darren	e excluded officers Moore and Cass More		, i
Certificate hold Liability and gr Liability and Wo	er is an Additiona anted a Waiver of rkers Comp if requ	l Insured for Gener Subrogation for Gen ured by written cor	cal Liability and Auto Meral Liability, Auto Miract.) * 1 1	
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