Federated Service Insurance Company

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMITED AMENDMENT OF CANCELLATION PROVISIONS

All Coverage Parts included in this policy are subject to the following conditions:

If we cancel this policy, we will mail advance notice to the person(s) or organization(s) as shown in the Schedule.

SCHEDULE

Name and Address of Person(s) Or Organization(s):
The County of Upshur Texas 150 E Jefferson St Ste 301 Po Box 790 Gilmer, TX 75644-2223
Number of days advance notice for any reason other than non-payment of premium: 45

Number of days advanced notice for non-payment of premium: See Common Policy Conditions

Insured: Offen Petroleum, LLC

5100 E 78th Ave

Commerce City, CO 80022-1458

Includes copyrighted material of Insurance Services Office, Inc., with its permission.

Policy Number: 6102254

Transaction Effective Date: 11/01/2025

IL-F-50 (04-13)

-li

POLICY NUMBER: 6102254

COMMERCIAL AUTO CA 20 48 10 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED INSURED FOR COVERED AUTOS LIABILITY COVERAGE

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM BUSINESS AUTO COVERAGE FORM MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the <u>Coverage Form apply unless</u> modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" for Covered Auto Liability Coverage under the Who Is An Insured provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Offen Petroleum, LLC Endorsement Effective: 11/01/2025

SCHEDULE

Name of Person(s) Or Organization(s):

The County of Upshur Texas 150 E Jefferson St Ste 301 Gilmer, TX 75644-2223

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Each person or organization shown in the Schedule is an "insured" for Covered Autos Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured provision contained in Paragraph A.1. of Section II - Covered Autos Liability Coverage in the Business Auto and Motor Carrier Coverage Forms and Paragraph D.2. of Section I - Covered Autos Coverages of the Auto Dealers Coverage Form.