



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/24/2022

PRODUCER Insurance Plus Arthur J. Gallagher Risk Management Services, Inc. 8430 Enterprise Circle, Suite 200 Lakewood Ranch, FL 34202 866-791-1930		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Shani Ojukwu Mantenso 9234 Kingston Pk. Suite 1122 Knoxville, TN 37922 Ins. # 259340		INSURERS AFFORDING COVERAGE INSURER A: Arch Specialty Insurance Company- Surplus Lines Insurance Report all claims via e-mail at sarasota.bsd.operations@ajg.com INSURER B: INSURER C:	NAIC # 21199

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS			
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	#PLP0066026-01	07/24/2022	07/24/2024	EACH OCCURRENCE \$ 2,000,000			
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000							
	MED EXP (Any one person) \$ N/A							
	PERSONAL & ADV INJURY \$ 2,000,000							
	GENERAL AGGREGATE \$ 3,000,000							
	PRODUCTS - COMP/OP AGG \$ 2,000,000							
	BUS. PERS. PROP. AGG / DED \$ 1,000/ \$250							
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS							COMBINED SINGLE LIMIT (Ea accident) \$
								BODILY INJURY (Per person) \$
				BODILY INJURY (Per accident) \$				
				PROPERTY DAMAGE (Per accident) \$				
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$			
					OTHER THAN EA ACC \$			
					AUTO ONLY: AGG \$			
	EXCESS / UMBRELLA LIABILITY OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$			
					AGGREGATE \$			
					\$			
					\$			
					\$			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below Y / N <input type="checkbox"/>				WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>			
					E.L. EACH ACCIDENT \$			
					E.L. DISEASE - EA EMPLOYEE \$			
					E.L. DISEASE - POLICY LIMIT \$			
A	OTHER Professional Liability	#PLP0066026-01	07/24/2022	07/24/2024	2,000,000 per occurrence / \$3,000,000 annual aggregate			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Not Applicable

CERTIFICATE HOLDER

Not Applicable

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE