

## CERTIFICATE OF LIABILITY INSURANCE

3/3/2022

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 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).

RODUCER Ryder Rosacker McCue & Huston (MG	D hv	Hull & C	omnany)	NAME:	Kristy Wolf	fe		****			
Ryder Rosacker McCue & Huston (MGD by Hull & Company) 509 W Koenig St Grand Island NE 68801					PHONE (A/C, No. Ext): 308-382-2330 FAX (A/C, No):						
					ADDRESS: kwolfe@ryderinsurance.com						
					INSURER(S) AFFORDING COVERAGE					NAIC #	
					INSURER A : SCOTTSDALE INS CO					41297	
NSURED Contracted Pyrotechnics 133 Hywood Rd Casar NC 28020					INSURER B :						
					INSURER C :						
					INSURER D :						
				INSURE	330.20				$\rightarrow$		
	T.E.O.			INSURE	RF:				_		
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RECERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	OF IN	SURANCE MENT, TE IN, THE II	ERM OR CONDITION NSURANCE AFFORE	OF AN	Y CONTRACT THE POLICIE	THE INSURE OR OTHER I	DOCUMENT WITH	FOR TH	T TO V	WHICH TH	
R TYPE OF INSURANCE	ADDL S	UBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMITS			
GENERAL LIABILITY		11.0	CPS3994161		8/20/2021	8/20/2022	EACH OCCURRENC	e I	\$ 1,000.0	00	
X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR							DAMAGE TO RENTE	D	\$ 100,000		
							PREMISES (Ea occur	770007-1			
							MED EXP (Any one p	V2/12/0	MANUAL PROPERTY.		
							PERSONAL & ADV III	1,1200,000		9.27	
							GENERAL AGGREGA			977	
GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP	/OP AGG	\$ 2,000,0	00	
X POLICY PRO- JECT LOC	-						COMBINED SINGLE	LIKEY .	5		
AUTOMOBILE LIABILITY						1	(Ea accident)	LIMIT	\$		
ANY AUTO						1	BODILY INJURY (Per	r person)	5		
ALL OWNED SCHEDULED AUTOS						l l	BODILY INJURY (Per	r accident)	\$		
HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	E	\$		
						1			\$		
UMBRELLA LIAB OCCUR							EACH OCCURRENC		s		
EXCESS LIAB CLAIMS-MADE						- 6	AGGREGATE	_			
							HOGHEGATE		-		
DED RETENTION \$ WORKERS COMPENSATION	-	-					WC STATU-	ОТН-	-		
AND EMPLOYERS' LIABILITY Y / N						9	TORY LIMITS I	ER	22		
OTTIGETOMEROLIN ENGLODED!	N/A					3	E.L. EACH ACCIDEN		8		
(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA E	MPLOYEE	\$		
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLI	CYLIMIT	\$		
SCRIPTION OF OPERATIONS / LOCATIONS / VEHICL garding the General Liability coverage, E							ed form GLS-150	s when re	equired	by writte	
reement. garding the General Liability coverage, Verement. dditional Insured: Bella Collina Mansion; Section: 9500 Mt Carmel Rd., Stokesdale,	Vaiver Stokes	of Subrog	gation applies to the						A Company	534	
ERTIFICATE HOLDER					CANCELLATION						
Bella Collina Mansion 9500 Mt Carmel Rd. Stokesdale SC 27537					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						
					Samisana						