

Form 1 – Informal Quote Response Form

V09/12/2016


**LEE COUNTY PROCUREMENT MANAGEMENT
INFORMAL QUOTE RESPONSE FORM**
Date Submitted: 3/14/2017Deadline Date: 3/20/2017QUOTE IDENTIFICATION: Q170232KLCQUOTE NAME: Landscape Maintenance and Mowing for DOTCOMPANY NAME: Superior Landscaping & Lawn Service, Inc.NAME & TITLE: (TYPED OR PRINTED) Orlando Otero, PresidentBUSINESS ADDRESS: (PHYSICAL) 2200 NW 23 Avenue Miami, FL 33142

CORPORATE OR MAILING ADDRESS:

☐ SAME AS PHYSICAL PO Box 35-0095 Miami, FL 33135
ADDRESS MUST MATCH SUNBIZ.ORGE-MAIL ADDRESS: superlandscape@bellsouth.netPHONE NUMBER: 305-634-0717 FAX 305-634-0744

NOTE REQUIREMENT: IT IS THE SOLE RESPONSIBILITY OF THE VENDOR TO CHECK LEE COUNTY PROCUREMENT MANAGEMENT WEB SITE FOR ANY ADDENDA ISSUED FOR THIS PROJECT. THE COUNTY WILL POST ADDENDA TO THIS WEB PAGE, BUT WILL NOT NOTIFY.

By responding to this Informal Quote, the vendor makes all representations required by the instructions and further warrants and represents that: the vendor has examined copies of all the Informal Quote documents and of the following addenda:

No. _____	Dated: _____	No. _____	Dated: _____	No. _____	Dated: _____
No. _____	Dated: _____	No. _____	Dated: _____	No. _____	Dated: _____

Tax Payer Identification Number: 65-0838100

(1) Employer Identification Number -Or- (2) Social Security Number:

**** Lee County collects your social security number for tax reporting purposes only**

Please submit a copy of your registration from the website www.sunbiz.org establishing your firm as authorized (including authorized representatives) to conduct business in the State of Florida, as provided by the *Florida Department of State, Division of Corporations. (a sample is attached for your reference)*

1 **Collusion Statement:** Lee County, Fort Myers, Florida The undersigned, as vendor, hereby declares that no person or other persons, other than the undersigned, are interested in this solicitation as Principal, and that this solicitation is submitted without collusion with others; and that we have carefully read and examined the specifications or scope of work, and with full knowledge of all conditions under which the services herein is contemplated must be furnished, hereby agree to furnish this service according to the requirements set out in the solicitation documents, specifications or scope of work for said service for the prices as listed on the county provided price sheet or (CCNA) agree to negotiate prices in good faith if a contract is awarded.

2 **Scrutinized Companies Certification:**

Section 287.135, FL §, "Prohibition against contracting with scrutinized companies." Prohibits agencies from contracting with companies, for goods or services over \$1,000,000, that are on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, Scrutinized Companies that Boycott Israel List, have been engaged in a boycott of Israel, or been engaged in business operations in Cuba or Syria. The County reserves the right to review, on a case-by-case basis, and waive this stipulation if it is deemed to advantageous to the County.

As the person authorized to sign on behalf of Respondent, I hereby certify that the company identified above is in compliance with Section 287.135, FL §. I understand that submission of a false certification may subject company to contract termination, civil penalties, attorney's fees, and/or costs.

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- 3 **Business Relationship Disclosure Requirement:** Sections 112.313(3) and 112.313(7), FL §, prohibit certain business relationships on the part of public officers and employees, their spouses, and their children. See Part III, Chapter 112, FL §, and/or the brochure entitled "A Guide to the Sunshine Amendment and Code of Ethics for Public Officers, Candidates and Employees" for more details on these prohibitions. However, Section 112.313(12), FL § (1983), provides certain limited exemptions to the above-referenced prohibitions, including one where the business is awarded under a system of sealed, competitive bidding; the public official has exerted no influence on bid negotiations or specifications; and where disclosure is made, prior to or at the time of the submission of the bid, of the official's or his spouse's or child's interest and the nature of the intended business. The Commission on Ethics has promulgated this form for such disclosure, if and when applicable to a public officer or employee.

If this **disclosure is applicable request form** **"INTEREST IN COMPETITIVE BID FOR PUBLIC BUSINESS"** (Required by 112.313(12)(b), FL § (1983)) to be completed and **returned with solicitation response**. It is the vendor's responsibility to disclose this relationship, failure to do so could result in being declared non-responsive.

☐ Business Relationship Applicable (request form)

☒ Business Relationship NOT Applicable

- 4 Disadvantaged Business Enterprise (DBE) vendor? If yes, please attach a current certificate. Yes ☐ No ☒

ALL SUBMISSIONS MUST BE EXECUTED BY AN AUTHORIZED AUTHORITY OF THE VENDOR, WITNESSED AND SEALED (AS APPLICABLE)

Superior Landscaping & Lawn Service, Inc.

Company Name (Name printed or typed)

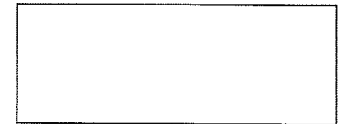
Orlando Otero

Authorized Representative Name (printed or typed)

President

Authorized Representative's Title (printed or typed)

Authorized Representative's Signature



(Affix Corporate Seal, as applicable)

Witnessed/Attested by:

Witness/Secretary Signature

Any blank spaces on the form(s), qualifying notes or exceptions, counter offers, lack of required submittals, or signatures, on County's Form may result in the submission being declared non-responsive by the County.



LEE COUNTY
SOUTHWEST FLORIDA

Lee County Procurement Management
INFORMAL QUOTE FORM

Company

Name: Superior Landscaping & Lawn Service, Inc.

Quote # Q170230KLC **Quote Name** Landscape Maintenance and Mowing for DOT

Having carefully examined the "Terms and Conditions", and the "Detailed Scope of Work", all of which are contained herein, propose to furnish the following which meet these specifications.

The successful vendor shall be responsible for furnishing and delivering to the Lee County requesting Department(s) the commodity or services on an "as needed basis" for a six month period.

Choose an item.

<i>Item #</i>	<i>Description</i>	<i>Unit of Measure</i>	<i>Quantity</i>	<i>Unit Cost</i>	<i>Total Cost</i>
SECTION 1	SANIBEL ISLAND - SEXANT TO CAUSEWAY BRIDGE				
1.	EDGING	EACH	11	\$36.00	\$396.00
2.	PRUNING	LS	1	\$200.00	\$200.00
3.	MOWING	EACH	11	\$69.00	\$759.00
4.	LITTER PICK UP AND CLEAN- UP GRASS CLIPPINGS: CURBS, GUTTERS, SIDEWALKS, ETC.	EACH	11	\$36.00	\$396.00
5.	WEEDING & WEED CONTROL	EACH	11	\$36.00	\$396.00
6.	DISEASE AND INSECT CONTROL, INCLUDING ANT CONTROL	LS	1	\$120.00	\$120.00
7.	TREE STAKING AND TREE RING MAINTENANCE	LS	1	\$180.00	\$180.00
8.	FERTILIZATION	EACH	1	\$490.00	\$490.00
	TOTAL PER YEAR			\$1,167.00	\$2,937.00
SECTION 2	CAUSEWAY ISLANDS A & B				
1.	EDGING	EACH	11	\$36.00	\$396.00
2.	PRUNING	LS	1	\$200.00	\$200.00
3.	MOWING	EACH	11	\$290.00	\$3,190.00
4.	LITTER PICK UP AND CLEAN- UP GRASS CLIPPINGS: CURBS, GUTTERS, SIDEWALKS, ETC.	EACH	11	\$36.00	\$396.00
5.	WEEDING & WEED CONTROL	EACH	11	\$36.00	\$396.00
6.	DISEASE AND INSECT CONTROL, INCLUDING ANT CONTROL	LS	1	\$120.00	\$120.00
7.	TREE STAKING AND TREE RING MAINTENANCE	LS	1	\$180.00	\$180.00
8.	FERTILIZATION	EACH	1	\$800.00	\$800.00
	TOTAL PER YEAR			\$1,698.00	\$5,678.00

SECTION 3	SUMMERLIN/MCGREGOR- PUNTA RASSA RD TO PINE RIDGE RD				
1.	EDGING	EACH	11	\$110.00	\$1,210.00
2.	PRUNING	LS	1	\$580.00	\$580.00
3.	MOWING	EACH	11	\$580.00	\$6,380.00
4.	LITTER PICK UP AND CLEAN- UP GRASS CLIPPINGS: CURBS, GUTTERS, SIDEWALKS, ETC.	EACH	11	\$70.00	\$770.00
5.	WEEDING & WEED CONTROL	EACH	11	\$110.00	\$1,210.00
6.	DISEASE AND INSECT CONTROL, INCLUDING ANT CONTROL	LS	1	\$250.00	\$250.00
7.	TREE STAKING AND TREE RING MAINTENANCE	LS	1	\$175.00	\$175.00
8.	FERTILIZATION	EACH	1	\$1,796.00	\$1,796.00
	TOTAL PER YEAR			\$3,671.00	\$12,371.00
SECTION 4	SUMMERLIN - PINE RIDGE TO GLADIOLUS				
1.	EDGING	EACH	11	\$120.00	\$1,320.00
2.	PRUNING	LS	1	\$600.00	\$600.00
3.	MOWING	EACH	11	\$680.00	\$7,480.00
4.	LITTER PICK UP AND CLEAN- UP GRASS CLIPPINGS: CURBS, GUTTERS, SIDEWALKS, ETC.	EACH	11	\$85.00	\$935.00
5.	WEEDING & WEED CONTROL	EACH	11	\$110.00	\$1,210.00
6.	DISEASE AND INSECT CONTROL, INCLUDING ANT CONTROL	LS	1	\$300.00	\$300.00
7.	TREE STAKING AND TREE RING MAINTENANCE	LS	1	\$200.00	\$200.00
8.	FERTILIZATION	EACH	1	\$1,800.00	\$1,800.00
	TOTAL PER YEAR			\$3,895.00	\$13,845.00
	Grand Total (SECTIONS 1 - 4)				\$34,831.00

Amount Written Thirty-four thousand, eight hundred thirty-one dollars and 0/100 cents



LEE COUNTY

SOUTHWEST FLORIDA

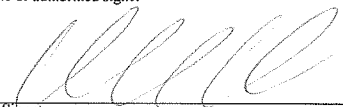
AFFIDAVIT PRINCIPAL PLACE OF BUSINESS

Local Vendor Preference (Non-CCNA)

(Lee County Ordinance No. 08-26)

Location Identification (CCNA)

Instructions: Please complete all information that is applicable to your firm

Company Name: Superior Landscaping & Lawn Service, Inc.Orlando Otero
Printed name of authorized signerPresident
Title

 Authorized Signature
3/14/2017
Date

The signee of this Affidavit guarantee, as evidenced by the sworn affidavit required herein, the truth and accuracy of this affidavit to interrogatories hereinafter made. **LEE COUNTY RESERVES THE RIGHT TO REQUEST SUPPORTING DOCUMENTATION, AS EVIDENCE OF SERVICES PROVIDED, AT ANY TIME.**

Notary:

State of FloridaCounty of Miami-Dade

The foregoing instrument was signed and acknowledged before me this

14 day of March

20

17

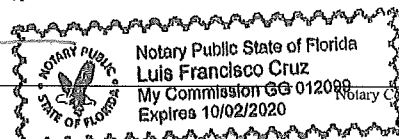
Orlando Otero, President

who has produced

as identification (or personally known)


 Notary Public Signature

Type of ID and number



Notary Commission Number and expiration

66012099 / 10/2/2020

1. Principal place of business is located within the boundaries of:

Lee CountyCollier CountyX Non-Local

Local Business Tax License #

1201802

2. Address of Principal Place of Business:

2200 NW 23 AvenueMiami, FL 33142

3. Number of years at this location

15 years

4. Have you provided goods or services to Lee County on a regular basis within the past 3 consecutive years

X Yes* No

*If yes, attach contractual history for past 3 consecutive years

5. Number of available employees for this contract

30

6. Does your company have a Drug Free Workplace Policy

X Yes No

Projects completed in Lee County over the last consecutive three (3) years:

US41 Landscape Installation Began in 2015 Completed in 2017FDOT Rdwt Maint Areas 4,5,6 Began in 2015 Completed in 2017Business 41 Began in 2014 Completed in 2016Greenscape Median Maintenance Began in 2014 Completed in 2014Old Terry Street N. To Rosemary DR Began in 2015 Completed in 2016Imperial Parkway Mowing Project Began in 2015 Completed in 2016

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

Date May 11, 2016 File No. JB169995 Expires April 30, 2017

THE PEST CONTROL FIRM NAMED BELOW HAS REGISTERED UNDER THE PROVISIONS OF CHAPTER 482 FOR THE PERIOD EXPIRING: April 30, 2017 AT

6620 TOPAZ CT
FORT MYERS, FL 33966
SUPERIOR LANDSCAPING & LAWN SERVICE INC
PO BOX 35-0095
MIAMI, FL 33135

Lawn and Ornamental

ADAM H. PUTNAM, COMMISSIONER

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

SUPERIOR LANDSCAPING & LAWN SERVICE INC
6620 TOPAZ CT
PEST CONTROL FIRM

JB169995

HAS PAID THE FEE REQUIRED BY CHAPTER 482 FOR THE PERIOD EXPIRING April 30, 2017

Signature

COMMISSIONER

Wallet Card - Fold Here

BUREAU OF LICENSING & ENFORCEMENT
3125 CONNER BLVD, BLDG. 8
TALLAHASSEE, FLORIDA 32399-1650

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

Date May 11, 2016 File No. JE194803 Expires April 30, 2017

THE ID CARD HOLDER NAMED BELOW HAS REGISTERED UNDER THE PROVISIONS OF CHAPTER 482 FOR THE PERIOD EXPIRING: April 30, 2017 AT

SUPERIOR LANDSCAPING & LAWN SERVICE INC
FORT MYERS, FL 33966
RICARDO SOSA
SUPERIOR LANDSCAPING & LAWN SERVICE INC
PO BOX 35-0095
MIAMI, FL 33135

Regular

ADAM H. PUTNAM, COMMISSIONER

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

RICARDO SOSA
SUPERIOR LANDSCAPING & LAWN SERVICE INC
ID CARD HOLDER

JE194803

HAS PAID THE FEE REQUIRED BY CHAPTER 482 FOR THE PERIOD EXPIRING April 30, 2017

Signature

COMMISSIONER

ATTACH PHOTO ON REVERSE

Wallet Card - Fold Here

BUREAU OF LICENSING & ENFORCEMENT
3125 CONNER BLVD, BLDG. 8
TALLAHASSEE, FLORIDA 32399-1650

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

Date May 11, 2016 File No. JE43349 Expires April 30, 2017

THE ID CARD HOLDER NAMED BELOW HAS REGISTERED UNDER THE PROVISIONS OF CHAPTER 482 FOR THE PERIOD EXPIRING: April 30, 2017 AT

SUPERIOR LANDSCAPING & LAWN SERVICE INC
FORT MYERS, FL 33966
THOMAS ANTHONY BROWN
SUPERIOR LANDSCAPING & LAWN SERVICE INC
PO BOX 35-0095
MIAMI, FL 33135

Certified Operator

ADAM H. PUTNAM, COMMISSIONER

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

THOMAS ANTHONY BROWN
SUPERIOR LANDSCAPING & LAWN SERVICE INC
ID CARD HOLDER

JE43349 Certified Operator

HAS PAID THE FEE REQUIRED BY CHAPTER 482 FOR THE PERIOD EXPIRING April 30, 2017

Signature

COMMISSIONER

ATTACH PHOTO ON REVERSE

Wallet Card - Fold Here

BUREAU OF LICENSING & ENFORCEMENT
3125 CONNER BLVD, BLDG. 8
TALLAHASSEE, FLORIDA 32399-1650



Metro Florida Safety Council



Rolando Sanchez

MOT Workzone Traffic Control: Intermediate Level

[FDOT Provider #140]

3/11/2018

Wallace McCleod

Expiration Date

Instructor Signature

www.metrofloridasafetycouncil.com

(888) 687-6372

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

Date	File No.	Expires
October 4, 2016	LF251295	October 4, 2020

THE LTD COMMERCIAL FERTILIZER APPLICATOR HOLDER
NAMED BELOW HAS REGISTERED UNDER THE PROVISIONS OF
CHAPTER 482 FOR THE PERIOD EXPIRING: October 4, 2020

MARCO ANTONIO MANZO
1434 SE 14 ST
CAPE CORAL, FL 33990


ADAM H. PUTNAM, COMMISSIONER

STATE OF FLORIDA
Department of Agriculture and Consumer Services
BUREAU OF LICENSING AND ENFORCEMENT

MARCO ANTONIO MANZO
LTD COMMERCIAL FERTILIZER APPLICATOR HOLDER

LF251295

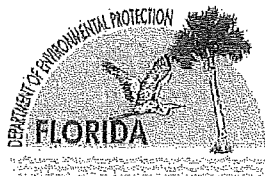
HAS PAID THE FEE REQUIRED BY CHAPTER 482 FOR THE PERIOD
EXPIRING October 4, 2020


COMMISSIONER

Signature

Wallet Card - Fold Here

BUREAU OF LICENSING & ENFORCEMENT
3125 CONNER BLVD, BLDG. 8
TALLAHASSEE, FLORIDA 32399-1650



Department of Environmental Protection

2600 Blair Stone Road, M.S. 3570
Tallahassee, Florida 32399-2400

UF|IFAS

UNIVERSITY of FLORIDA

GI-BMP Trainee ID: GV399887
Certification date: 9/28/2016

Congratulations on successfully completing the Florida Green Industries Best Management Practices Training Program. Your certificate of completion and wallet card are attached. If there are errors in the certificate, or if we can be of further assistance, please contact the GI-BMP Office of the Florida-Friendly Landscaping™ Program at gi.bmp@ifas.ufl.edu or (352) 273-4517.

Please note that this training certificate alone does not authorize you to apply fertilizer commercially after January 1, 2014. You must take additional steps to become licensed for commercial fertilizer application in the state of Florida. The Limited Urban Commercial Fertilizer Applicator Certification (state "fertilizer license") is issued by the Florida Department of Agriculture and Consumer Services (FDACS).

Apply online: <https://aesecomm.freshfromflorida.com>. The certificate number from this document is required to apply for Fertilizer Applicator Certification. For assistance contact: The Bureau of Entomology and Pest Control, (850) 617-7997

If your test score is 90% or greater, you may be eligible to become a GI-BMP Instructor:
http://fyn.ifas.ufl.edu/professionals/instructor_program.html

Test Score: 78%

Marco A. Manzo
Superior Landscaping & Lawn Services
6220 Topaz Ct
Fort Myers, FL 33966

State of Florida
DEPARTMENT OF
ENVIRONMENTAL PROTECTION

Marco A. Manzo

GV399887-1 GV399887
Certificate # Trainee ID #
GREEN INDUSTRIES BEST MANAGEMENT PRACTICES
TRAINING PROGRAM



GV399887-1

Certificate #

GV399887

Trainee ID #

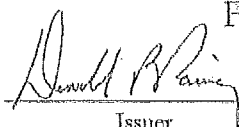
Certificate of Training Best Management Practices Florida Green Industries

UF|IFAS
UNIVERSITY of FLORIDA

The undersigned hereby acknowledges that

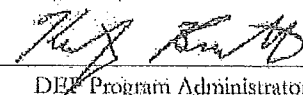
Marco A. Manzo

has successfully met all requirements necessary to be fully trained through the Green Industries Best Management Practices Program developed by the Florida Department of Environmental Protection with the University of Florida Institute of Food and Agricultural Sciences.


Issuer

D. Rainey
Instructor

9/28/2016
Date of Class


DFP Program Administrator

Not valid without seal



This Certifies that
Ricardo Sosa

Has Completed a Florida Department of Transportation
Approved Maintenance of Traffic (MOT) Intermediate Course.

Date Expires 10/16/2020

Certificate # 21920

Instructor Bhushan Sukhrum

FDOT Provider # 15

United Safety Council

Phone: 407-897-4456

1505 E. Colonial Drive

Orlando, FL

unitedsafetycouncil.com

gvictor@floridasafety.org



This Certifies that
Marco A. Manzo

Has Completed a Florida Department of Transportation
Approved Maintenance of Traffic (MOT) Intermediate Course.

Date Expires 10/16/2020

Certificate # 21922

Instructor Bhushan Sukhrum

FDOT Provider # 15

United Safety Council

Phone: 407-897-4456

1505 E. Colonial Drive

Orlando, FL

unitedsafetycouncil.com

gvictor@floridasafety.org



Client#: 71430

SUPLA

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/30/2016

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).

PRODUCER Gulfshore Insurance - SFL 1560 Sawgrass Corporate Pkwy Fort Lauderdale, FL 33323 239 261-3646	CONTACT NAME: Elizabeth Rodriguez	
	PHONE (A/C, No, Ext): 954-248-2723	FAX (A/C, No): 239-213-2803
INSURED Superior Landscaping & Lawn Service, Inc 2200 NW 23rd Ave Miami, FL 33142	E-MAIL ADDRESS: Erodriguez@gulfshoreinsurance.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Amerisure Insurance Company	
	INSURER B: Amerisure Mutual Insurance Comp	
	INSURER C: Amerisure Partners Insurance Co	
	INSURER D:	
INSURER E:		
INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	X	X	GL2090122	12/01/2016	12/01/2017	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
C	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	X	X	CA2090120	12/01/2016	12/01/2017	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$0			CU2090123	12/01/2016	12/01/2017	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		X	WC2090344	12/01/2016	12/01/2017	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

kwiktag®

214 806 143



DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are included as Additional Insureds on a primary and noncontributory basis with regards to General Liability only as required by written contract per form CG7048 0913, includes ongoing and completed operations, Waiver of Subrogation in favor of Additional Insureds per form CG7049 1109. Additional Insured in regards to Auto Liability only as required by written (See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

Lee County
Board of County Commissioners
Attn: Procurement
P.O. Box 398
Fort Myers, FL 33902

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

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DESCRIPTIONS (Continued from Page 1)

contract per form CA7171 0508, including Waiver of Subrogation. Waiver of Subrogation in regards to Workers Compensation only as required by written contract per form WC000313 0484.

[Florida Department of State](#)

DIVISION OF CORPORATIONS

[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /**Detail by Entity Name**

Florida Profit Corporation
SUPERIOR LANDSCAPING & LAWN SERVICE INC.

Filing Information

Document Number P98000044604
FEI/EIN Number 65-0838100
Date Filed 05/18/1998
State FL
Status ACTIVE
Last Event AMENDMENT
Event Date Filed 02/16/2017
Event Effective Date NONE

Principal Address

2200 NW 23RD AVE
MIAMI, FL 33142

Changed: 01/12/2005

Mailing Address

PO BOX 35-0095
MIAMI, FL 33135

Changed: 03/22/2012

Registered Agent Name & Address

OTERO, ORLANDO
2200 N.W. 23 AVENUE
MIAMI, FL 33142-6551

Address Changed: 01/04/2005

Officer/Director Detail**Name & Address**

Title PD

OTERO, ORLANDO
2200 N.W. 23 AVENUE
MIAMI, FL 33142

Title TD

VALDES, MARIA
2200 N.W. 23 AVENUE
MIAMI, FL 33142

Title QCO

MOREL, MICHAEL
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