



City of Hollywood
Procurement Services

Otis Thomas, Interim Director/Chief Procurement Officer
2600 Hollywood Boulevard, Hollywood, FL 33020

[ARAZOZA BROTHERS CORP] RESPONSE DOCUMENT REPORT

IFB No. IFB-283-25-WV

Bike Lane Tree Planting - Washington and 72nd Ave.

RESPONSE DEADLINE: March 18, 2025 at 3:00 pm

Report Generated: Wednesday, March 19, 2025

Arazoza Brothers Corp Response

CONTACT INFORMATION

Company:

Arazoza Brothers Corp

Email:

vygualada@arazozabrothers.com

Contact:

Vanessa Ygualada-Rivera

Address:

7027 SW 87th Court
Miami, FL 33173

Phone:

(305) 246-3223

Website:

www.arazozabrothers.com

Submission Date:

Mar 18, 2025 9:15 AM (Eastern Time)

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. Bike Lane Tree Planting Submission*

Please upload all specifications/licenses for your submittal here per requirements on the Scope of Work section.

AB_Company_Package.pdf

2. VENDOR REFERENCE FORM*

Please download the below documents, complete, and upload for each vendor reference. Reference forms are to be completed by your vendor reference. They must be sent back to you to be uploaded with your bid response. A minimum of three (3) references are required.

- [Vendor Reference Form.pdf](#)

Reference_Forms_-_AB.pdf

3. Trench Safety Form*

Please download the below documents, complete, and upload.

- [Form 12 - Trench Safety For...](#)

Trench_Safety_-_AB.pdf

4. BID BOND FORM*

Please download the below documents, complete, and upload.

- [Bid Form MASTER.docx](#)

Bid_Bond_-_AB.pdf

5. HOLD HARMLESS AND INDEMNITY CLAUSE*

I, an authorized representative, the contractor, shall indemnify, defend and hold harmless the City of Hollywood, its elected and appointed officials, employees and agents for any and all suits, actions, legal or administrative proceedings, claims, damage, liabilities, interest, attorney's fees, costs of any kind whether arising prior to the start of activities or following the completion or acceptance and in any manner directly or indirectly caused, occasioned or contributed to in whole or in part by reason of any act, error or omission, fault or negligence whether active or passive by the contractor, or anyone acting under its direction, control, or on its behalf in connection with or incident to its performance of the contract.

Confirmed

6. NON-COLLUSION STATEMENT*

I, being first duly sworn, depose that:

- A. He/she is an authorized representative of the Company, the Proposer that has submitted the attached Proposal.
- B. He/she has been fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;
- C. Such Proposal is genuine and is not a collusion or sham Proposal;
- D. Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Proposer, firm or person to submit a collusive or sham Proposal in connection with the contractor for which the attached Proposal has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices, profit or cost element of the Proposal price or the Proposal price of any other Proposer, or to secure an advantage against the City of Hollywood or any person interested in the proposed Contract; and
- E. The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

Confirmed

7. CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS*

The applicant certifies that it and its principals:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- B. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction, violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- D. Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.

Confirmed

8. DRUG-FREE WORKPLACE PROGRAM*

- A. IDENTICAL TIE PROPOSALS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie proposals will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:
 - 1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.

2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program (if such is available in the employee's community) by, any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of these requirements.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Confirmed

9. SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY *

Florida Statute 112.313 prohibits the solicitation or acceptance of Gifts. "No Public officer, employee of an agency, local government attorney, or candidate for nomination or election shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the public officer, employee, local government attorney, or candidate would be influenced thereby." The term "public officer" includes "any person elected or appointed to hold office in any agency, including any person serving on an advisory body."

The City of Hollywood/Hollywood CRA policy prohibits all public officers, elected or appointed, all employees, and their families from accepting any gifts of any value, either directly or indirectly, from any contractor, vendor, consultant, or business with whom the City/CRA does business.

The State of Florida definition of "gifts" includes the following:

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate or terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,
- Transportation, lodging, or parking,
- Food or beverage,
- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements
- Services provided by persons pursuant to a professional license or certificate.
- Other personal services for which a fee is normally charged by the person providing the services.
- Any other similar service or thing having an attributable value not already provided for in this section.

Any contractor, vendor, consultant, or business found to have given a gift to a public officer or employee, or his/her family, will be subject to dismissal or revocation of contract.

As the person authorized to sign the statement, I certify that this firm will comply fully with this policy.

Confirmed

10. Certificate of Insurance*

See requirements in the [#SPECIAL TERM AND CONDITIONS](#) section.

COI-_Arazoza_Brothers-_SAMPLE.pdf

11. PROOF OF SUNBIZ REGISTRATION*

Enter company FEIN to be verified in Sunbiz

650031332

[Click to Verify](#) *Value will be copied to clipboard*

12. ACKNOWLEDGMENT AND SIGNATURE PAGE

IF CORPORATION - DATE INCORPORATED/ORGANIZED:*

02/22/1988

STATE INCORPORATED/ORGANIZED:*

Florida

REMITTANCE ADDRESS*

7027 SW 87th Court Miami, Florida 33173

BIDDER/PROPOSER'S AUTHORIZED REPRESENTATIVE'S TYPED FULL NAME*

Alberto Arazoza

IT IS HEREBY CERTIFIED AND AFFIRMED THAT THE BIDDER/PROPOSER CERTIFIES ACCEPTANCE OF THE TERMS, CONDITIONS, SPECIFICATIONS, ATTACHMENTS AND ANY ADDENDA. THE BIDDER/PROPOSER SHALL ACCEPT ANY AWARDS MADE AS A RESULT OF THIS SOLICITATION. BIDDER/PROPOSER FURTHER AGREES THAT PRICES QUOTED WILL REMAIN FIXED FOR THE PERIOD OF TIME STATED IN THE SOLICITATION.*

Confirmed

THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF BIDDER/PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE BID/PROPOSAL NON-RESPONSIVE. THE CITY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY BID/PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER/PROPOSER TO THE TERMS OF ITS OFFER.*

Confirmed

13. SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a) FLORIDA STATUTES ON PUBLIC ENTITY CRIMES

THIS FORM STATEMENT IS SUBMITTED TO THE CITY OF HOLLYWOOD BY:*

(Print individual's name and title) (Print name of entity submitting sworn statement)

Alberto Arazoza, President

SWORN STATEMENT CONTINUATION:*

Enter business address:

7027 SW 87th Court Miami, Florida 33173

SWORN STATEMENT CONTINUATION:*

Enter Federal Employer Identification Number (FEIN) is:

If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement.

650031332

SWORN STATEMENT CONTINUATION:*

I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in an federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.

Confirmed

SWORN STATEMENT CONTINUATION:*

I understand that "Affiliate," as defined in paragraph 287.133(1)(a), Florida Statutes, means:

1. A predecessor or successor of a person convicted of a public entity crime, or
2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

Confirmed

SWORN STATEMENT CONTINUATION:*

I understand that "person," as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity.

The term "person" includes those officers, executives, partners, shareholders, employees, members, and agents who are active in management of an entity

Confirmed

SWORN STATEMENT CONTINUATION:*

Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

Division of Administrative Hearings, determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (attach a copy of the Final Order).

Neither the entity submitting sworn statement, nor any of its officers, director, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

SWORN STATEMENT CONFIRMATION*

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THAT PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017 FLORIDA STATUTES FOR A CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

Confirmed

PRICE TABLES

BASE BID

UNIT PRICE PREVAILS OVER TOTAL PRICE. Quantities provided are for information purposes.

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
1	General Conditions	1	LS	\$10,000.00	\$10,000.00
2	Mobilization	1	LS	\$40,000.00	\$40,000.00
3	Maintenance of Traffic	1	LS	\$40,000.00	\$40,000.00
Landscaping					
4	Sabal Palmetto (15' – 20' C.T.)	5	EA	\$400.00	\$2,000.00
5	Bursera simaruba (14' X 5', 3" caliper)	70	EA	\$1,000.00	\$70,000.00
6	Conocarpus erectus 'sericeus' (12' X 4', 2" caliper)	35	EA	\$900.00	\$31,500.00
7	Veitchia Montgomeryana (10' GW)	23	EA	\$900.00	\$20,700.00
8	Delonix regia (16' X 5', 3" caliper)	5	EA	\$1,200.00	\$6,000.00
9	Lagerstroemia fauriei (12' X 4', 2" caliper)	78	EA	\$650.00	\$50,700.00
10	Piscidia piscipula (12' x 4', 2" caliper)	20	EA	\$1,200.00	\$24,000.00
11	Simarouba glauca (12' x 4', 2" caliper)	33	EA	\$1,100.00	\$36,300.00
12	Tabebuia heterophylla (12' X 4', 2" caliper)	4	EA	\$950.00	\$3,800.00
13	Tabebuia impetiginosa (12' X 4', 2" caliper)	16	EA	\$950.00	\$15,200.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
14	24" deep Root Barrier	2,030	LF	\$20.00	\$40,600.00
15	St. Augustine sod (allowance)	10,000	SY	\$4.50	\$45,000.00
TOTAL					\$435,800.00



Arazoza Bros., Corp.

7027 SW 87th Court Miami, Florida 33173 Phone: 305-246-3223 Fax: 305-246-0481

To Whom It May Concern

Arazoza Brothers Corporation is a fully bonded and insured Landscape, Irrigation and Maintenance Contracting Company founded in February 1988. It is a family run operation priding itself on superior workmanship and plant selection, as well as timely and satisfactory completion of landscape contracts.

In the past thirty-five years Arazoza Brothers Corporation has grown steadily on the strength of our improving reputation and respect for our client's needs and concerns. During this time we have completed many landscape construction projects of a variety of scopes. These projects range from residential homes and developments to government parks, roads and state highways. We have completed jobs from Key West to as far north as Jacksonville.

Arazoza Brothers also operates 300 acres of field and container grown plant material under the name Agri Brothers Corporation. Agri Brothers is a wholesale nursery servicing other landscape companies, as well as growing plant material for upcoming Arazoza Brothers landscaping projects.

All this helps to make Arazoza Brothers a complete package for our customers.

Enclosed you will find other pertinent company information.

Cordially

Alberto Arazoza
President



Arazoza Bros., Corp.

7027 SW 87th Court Miami, Florida 33173 Phone: 305-246-3223 Fax: 305-246-0481

COMPANY INFORMATION

Arazoza Brothers Corporation
7027 SW 87 Court
Miami, FL 33173
Ph: (305) 246-3223
Fax: (305) 246-0481
www.arazozabrothers.com

Date Established:	February 22, 1988
Federal Id No.:	65-0031332
President:	Albert Arazoza
Vice President:	Eduardo Arazoza
Purchasing Manager:	Clarence Chamorro
Project Managers:	Omar Escauriza Raul Robayna Pedro Morales Jonathan Hernandez Frank Chamorro- Irrigation
Estimating Department:	Vanessa Ygualada-Rivera Eduardo Arazoza Jr Patrick Bravo Sergio Ferreira
Contracts Admin & EEO Officer:	Rosey Asensio
Insurance Agency:	Brown & Brown Insurance Company 5900 N Andrews Avenue Ft. Lauderdale, FL 33309 Contact: James Murphy Ph: (888) 267-4379
Bonding Agency:	Acrisure 15050 NW 79 th Court. Suite 200 Miami Lakes, FL 33016 Contact: Charles Nielson Ph: (305) 722-2663 ext.110



Arazoza Bros., Corp.

7027 SW 87th Court Miami, Florida 33173 Phone: 305-246-3223 Fax: 305-246-0481

REFERENCES

Halley Engineering Contractors, Inc.
10750 NW 127th Street
Medley, Fl. 33178
Phone: (305)883-0055
Fax: (305) 883-0085
Contact: Daniel Halley
Email: dhalley@halleyeng.com

Russell Engineering Corporation
2530 SW 36 Street
Ft. Lauderdale, FL 33312
Ph#: (954)321-9336
Fax: (954) 321-0621
Contact: Brian Gibbs
Email: brian.g@russellengineering.com

The de Moya Group, Inc.
14600 SW 136th Street
Miami, Florida 33186
Ph#: (305) 255-5713
Fax: (305) 255-1935
Contact: AJ deMoya
Email: AJ.Demoya@demoya.com

Burkhardt Construction Inc.
1400 Alabama Avenue, Ste. 20
West Palm Beach, FL 33401
Ph#: (561) 659-1400
Fax: (561) 659-1402
Contact: Tony Sabatino
Email: tony@burkhardtconstruction.com

Miami-Dade Expressway Authority
3790 NW 21 Street
Miami, Florida 33142
Ph#: (305) 683-8601
Fax: (305) 683-0121
Contact: Rick Johnson
Email: rjohnson@mdxway.com

Central Florida Expressway Authority
4974 ORL Tower Rd
Orlando, FL 32807
Phone: 407-690-5000
Contact: Christopher Bloodwell/Ben Baker
Email: bbaker@dewberry.com



Arazoza Bros., Corp.

7027 SW 87th Court Miami, Florida 33173 Phone: 305-246-3223 Fax: 305-246-0481

CONTRACTS COMPLETED

<u>Class of Work</u>	<u>Contract Amt.</u>	<u>D.O.C.</u>	<u>Completed</u>	<u>% By Us</u>	<u>Name/Address of Owner</u>
Prime-Contractor FIN#190778-5-52-26 E8U50 SR 429, SR 417, SR 91 Interchange at SR 429/SR 50, and SR 91 Interchange at SR 408 Orange, Osceola, Seminole AB1534	\$ 2,445,128	6/9/23	Aug-24	100%	FDOT Turnpike Dist. PO Box 613069 Ocoee, FL 34761 Contact: Todd Reich Phone: 954.218.9203 Todd.Reich@KCI.com
Sub-Contractor Salerno Reserve/Residence AB1478	\$ 3,195,351	4/4/23	Aug-25	100%	Tamarack Land Development 712 VISTA BLVD STE 303 WACONIA, MN 55387 Contact: Brian Theis Phone: 952-215-2008 Brian@tamarackland.com
Prime-Contractor World Drive North Phase II Area Development AB1408	\$ 5,110,161	11/17/21	Nov-23	90%	Reedy Creek Improvement Dist. 1900 Hotel Lake Buena Vista Lake Buena Vista, FL 32830 Contact: Alex Forth Phone: 407-828-1573 aforth@rcid.org
Sub-Contractor The Cottages at Port St Lucie AB1457	\$ 1,912,877	1/12/23	Feb-24	100%	CBI Construction Services 431 Office Park Drive Birmingham, AL 35223 Contact: James Young Phone: 205-414-6400 JYoung@capstonemail.com
Sub-Contractor Narccoossee Road Widening 241-0-001 AB1300	\$ 932,307	4/30/20	Oct-23	100%	Felix Associates of Florida, Inc 8526 SW Kansas Avenue Stuart, FL 34997 Contact: John Graf Phone: 407-601-4003 JGraf@felixassociates.net
Prime-Contractor Avenir Drive- Spine Rd 5B AB1384	\$ 2,454,626	8/27/21	Jul-23	100%	Avenir Development LLC 550 Biltmore Way #110 Coral Gables, FL 33134 Contact: Manny Mato Phone: 561-689-2910 mmato@waterstonebuilders.com



Arazoza Bros., Corp.

7027 SW 87th Court Miami, Florida 33173 Phone: 305-246-3223 Fax: 305-246-0481

CONTRACTS IN PROGRESS

<u>Class of Work</u>	<u>Contract Amt.</u>	<u>DOC</u>	<u>Completion</u>	<u>% Complete</u>	<u>Name/Address of Owner</u>
Prime-Contractor FIN#190778-5-52-34 E8V08 SR821 HEFT at Kendall AB1597	\$ 1,170,999	4/11/24	Nov-25	27%	FDOT Turnpike Dist. PO Box 613069 Ocoee, FL 34761 Contact: Todd Reich Phone: 954.218.9203 Todd.Reich@KCI.com
Prime-Contractor FIN#190778-5-52-31 E8V07 SR821 HEFT at Eureka AB1596	\$ 1,352,348	4/11/24	Nov-25	25%	FDOT Turnpike Dist. PO Box 613069 Ocoee, FL 34761 Contact: Todd Reich Phone: 954.218.9203 Todd.Reich@KCI.com
Prime-Contractor FIN#190778-5-52-33 E8V17 SR589 Suncoast Parkway and US98 Interchnage AB1603	\$ 3,069,545.0	4/30/24	Apr-25	25%	FDOT- Turnpike Mile Post 263, Bldg 5315 Turkey Lake Service Plaza Ocoee, FL 34761 Contact: Dalton Lefebvre Phone: 863-899-8096 Dalton.Lefebvre@kci.com
Sub-Contractor Underline Phase 3-9 CIP235-DTPW20-DB AB1618	\$ 6,071,089	5/3/24	Sep-25	15%	NV2A Central JV 9100 South Dadeland Blvd #600 Miami, Florida 33156 Contact: Leo Neves Phone: 786-233-5060 Ineves@nv2agroup.com
Sub-Contractor Pier66 - Hotel, Condos & Villas 2301 SE 17 Street 1508-1511	\$ 3,950,432	1/5/23	Mar-25	95%	Americaribe- Moriarty JV 1942 Tyler Street Hollywood, FL 33020 Contact: Manny Guzman Phone: 954.920.8550
Prime-Contractor Pather National Golf Course Various	\$ 7,594,313	2/27/23	Mar-25	84%	Centaur Palm Beach Owner, LLC 7108 Fairway Drive #340 Palm Beach Gardens, FL 33418 Contact: Scott Hedge Phone: 561-346 0102 hedge@panthernational.com
Prime-Contractor Avenir Drive- Spine Rd PH5 Avenir Drive- Spine Rd PH6	\$ 1,907,264 \$ 910,933	1/31/23 1/31/23	Mar-25 Mar-25	90% 90%	Avenir Development LLC 550 Biltmore Way #110 Coral Gables, FL 33134 Contact: Manny Mato Phone: 561-689-2910 mmato@waterstonebuilders.com
Sub-Contractor 29N Wynwood AB1489	\$ 1,897,760	7/3/23	Apr-25	90%	Moss and Associates LLC 2101 North Andrews Ave #200 Ft. Lauderdale, FL 33311 Contact: Jorge Powell Phone: 954-524-5678



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/20/2024

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 have ADDITIONAL INSURED provisions or 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 Brown & Brown Insurance Services, Inc. 1201 W Cypress Creek Rd Suite 130 Fort Lauderdale FL 33309		CONTACT NAME: Jim Murphy PHONE (A/C, No, Ext): (954) 776-2222 E-MAIL ADDRESS: 053.Certs@bbrown.com FAX (A/C, No): (954) 776-4446	
INSURED Araozza Brothers Corporation 7027 SW 87 Court Miami FL 33173		INSURER(S) AFFORDING COVERAGE INSURER A: FCCI Insurance Company INSURER B: Bridgefield Employers Insurance Company INSURER C: Westchester Surplus Lines Insurance Company INSURER D: INSURER E: INSURER F:	
		NAIC # 10178 10701 10172	

COVERAGES **CERTIFICATE NUMBER:** CL2431507379 **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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<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 OTHER:	Y	Y	GL10006771203	04/01/2024	04/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 Employee Benefit Liab \$ 1,000,000
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	CA10006771303	04/01/2024	04/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			UMB10008352501	04/01/2024	04/01/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	Y	083056744	04/01/2024	04/01/2025
C	Contractors Pollution Liability w/Professional Liability			G74464646001	04/01/2024	04/01/2025	Each Claim \$2,000,000 Aggregate \$2,000,000

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

SAMPLE

CERTIFICATE HOLDER

CANCELLATION

SAMPLE

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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Additional Named Insureds

Other Named Insureds

ABO Property, LLC	Limited Liability Company, Additional Named Insured
AGRI Brothers Corp.	Corporation, Additional Named Insured
Arazoza Investments LLC DBA Arazoza Brothers Mainte	Limited Liability Company, Additional Named Insured
Arazoza Investments, LLC. dba Dedicated Property Se	Limited Liability Company, Additional Named Insured
Lushlife Commercial, LLC	Limited Liability Company, Additional Named Insured



Arazoza Bros., Corp.

7027 SW 87th Court Miami, Florida 33173 - Phone (305) 246-3223 - Fax (305) 246-0481

Certifications, Licenses and Qualifications

MBE Certifications	Exp Date
City of Orlando	6/30/2025
State of Florida Dept of Supplier Diversity "Florida Statewide"	2/15/2025
Lee County	2/15/2025
Miami-Dade County Public Schools	11/2/2026

Contractor Licenses	Exp Date
State of Florida Registered Contractor CGC#1506166	8/31/2026
State of Florida Registered Irrigation Contractor SCC131151972	8/31/2026
Miami Dade County GC #7394521	9/30/2025

Landscape Licenses	Exp Date
Dade County Occupational #222152-1	9/30/2025
Broward Tree Trimming #189C-129	9/30/2025
Broward County Occupational #324-0224739	9/30/2025
Palm Beach County #1996-09852	9/30/2025
DEP Stormwater Mgt Instructor DEP#221	

Irrigation Licenses	Exp Date
Dade County Occupational #407669-1	9/30/2025
Dade County CC #04P000960	9/30/2025
Broward County Occupational #182-000125	9/30/2025
Broward County CC#04-CLS-741-R	9/30/2025
Palm Beach County Occupational #2005-01572	9/30/2025

Qualifications	Exp Date
Florida Certified Landscape Contractor (FNGLA) #C360148	3/31/2025
FDOT Landscape Contractor Prequalification	6/30/2025



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

ARAZOZA, ALBERTO JOSE

ARAZOZA BROTHERS CORPORATION
7027 SW 87 COURT
MIAMI FL 33173

LICENSE NUMBER: CGC1506166

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/07/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE IRRIGATION SPECIALTY CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

ARAZOZA, ALBERTO JOSE

ARAZOZA BROTHERS CORPORATION
7027 SW 87 COURT
MIAMI FL 33173

LICENSE NUMBER: SCC131151972

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/07/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY

7116957

BUSINESS NAME/LOCATION
ARAZOZA BROTHERS CORP
7027 SW 87TH CT
MIAMI, FL 33173-2509

RECEIPT NO.
RENEWAL
7394521



OWNER
ARAZOZA BROTHERS CORP
C/O ALBERTO J ARAZOZA
OLIAI IFIFR
Worker(s) 3

SEC. TYPE OF BUSINESS
196 GENERAL BUILDING
CONTRACTOR
CGC1506166

EXPIRES

SEPTEMBER 30, 2025

Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

**PAYMENT RECEIVED
BY TAX COLLECTOR**
75.00 07/17/2024
INT-24-436313

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector



Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY

5524237

BUSINESS NAME/LOCATION
ARAZOZA BROTHERS CORP
7027 SW 87TH CT
MIAMI, FL 33173-2509

RECEIPT NO.
RENEWAL
4076691



OWNER
ARAZOZA BROTHERS CORP
ALBERTO J ARAZOZA, QUALIFIER
Worker(s) 3

SEC. TYPE OF BUSINESS
196 SPECIALTY PLUMBING
CONTRACTOR
SCC131151972

**PAYMENT RECEIVED
BY TAX COLLECTOR**
75.00 07/17/2024
INT-24-436313

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector



Local Business Tax Receipt

Miami-Dade County, State of Florida

-THIS IS NOT A BILL - DO NOT PAY

7037096

BUSINESS NAME/LOCATION
ARAZOZA BROTHERS
CORPORATION
7027 SW 87TH CT
MIAMI, FL 33173-2509

RECEIPT NO.
RENEWAL
2221521



OWNER
ARAZOZA BROTHERS
CORPORATION
C/O ALBERTO ARAZOZA PRES
Employee(s) 50

SEC. TYPE OF BUSINESS
213 SERVICE BUSINESS
LF289508

EXPIRES

SEPTEMBER 30, 2025

Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

**PAYMENT RECEIVED
BY TAX COLLECTOR**
375.00 07/17/2024
INT-24-436154

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector



LBT

EXPIRES

SEPTEMBER 30, 2025

Must be displayed at place of business
Pursuant to County Code
Chapter 8A - Art. 9 & 10

**PAYMENT RECEIVED
BY TAX COLLECTOR**
75.00 07/17/2024
INT-24-436313

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025**Business Name:** ARAZOZA BROTHERS CORPORATION**Receipt #:** 180-278088
Business Type: GENERAL CONTRACTOR**Owner Name:** ALBERTO JOSE ARAZOZA
Business Location: 7027 SW 87TH CT
MIAMI DADE COUNTY
Business Phone: 305-246-3223**Business Opened:** 07/07/2016
State/County/Cert/Reg: CGC1506166
Exemption Code:**Rooms** **Seats** **Employees** **Machines** **Professionals**
5

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
27.00	0.00	0.00	0.00	0.00	0.00	27.00

Receipt Fee 27.00
Packing/Processing/Canning Employees 0.00**THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS****THIS BECOMES A TAX RECEIPT****WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:ALBERTO JOSE ARAZOZA
7027 SW 87TH CT
MIAMI, FL 33173-2509**Receipt #** WWW-23-00280207
Paid 08/13/2024 27.00**BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT**

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025**Business Name:** ARAZOZA BROTHERS CORPORATION**Receipt #:** 324-224739
Business Type: LAWN MAINTENANCE/LANDSCAPE
(LAWN MAINTENANCE/LANDSCAPE)**Owner Name:** ALBERTO ARAZOZA
Business Location: 7027 SW 87TH CT
MIAMI DADE COUNTY
Business Phone: 305-246-3223**Business Opened:** 02/01/1988
State/County/Cert/Reg:
Exemption Code:**Rooms** **Seats** **Employees** **Machines** **Professionals**
3

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
33.00	0.00	0.00	0.00	0.00	0.00	33.00

Receipt Fee 33.00
Packing/Processing/Canning Employees 0.00**THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS****THIS BECOMES A TAX RECEIPT****WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:ARAZOZA BROTHERS CORPORATION
7027 SW 87TH CT
MIAMI, FL 33173-2509**Receipt #** WWW-23-00279045
Paid 08/08/2024 33.00

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025**Business Name:** ARAZOZA BROTHERS CORPORATION**Receipt #:** 189C-129
Business Type: TREE TRIMMING/TREE MAINTENANCE
(TREE TRIMMER - CLASS A)**Owner Name:** RAUL ROBAYNA
Business Location: 7027 SW 87TH CT
MIAMI DADE COUNTY
Business Phone: 3052463223**Business Opened:** 06/25/2002
State/County/Cert/Reg: A1832
Exemption Code:**Rooms** **Seats** **Employees** **Machines** **Professionals**
10

	For Vending Business Only					
	Number of Machines:			Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
27.00	0.00	0.00	0.00	0.00	0.00	27.00

Receipt Fee 27.00
Packing/Processing/Canning Employees 0.00**THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS****THIS BECOMES A TAX RECEIPT****WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:ARAZOZA BROTHERS CORP.
7027 SW 87TH CT
MIAMI, FL 33173-2509**Receipt #** WWW-23-00281477
Paid 08/19/2024 27.00**BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT**

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025**Business Name:** ARAZOZA BROTHERS CORPORATION**Receipt #:** 182-1253
Business Type: PLUMBING/LWN SPRNKL/CONTRACTOR
(IRRIGATION SPECIALTY CONTRACTOR)**Owner Name:** ALBERTO ARAZOZA
Business Location: 7027 SW 87TH CT
MIAMI DADE COUNTY
Business Phone: 305-246-3223**Business Opened:** 11/04/2004
State/County/Cert/Reg: SCC131151972
Exemption Code:**Rooms** **Seats** **Employees** **Machines** **Professionals**
10

For Vending Business Only						
Number of Machines:			Vending Type:			
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
27.00	0.00	0.00	0.00	0.00	0.00	27.00

Receipt Fee 27.00
Packing/Processing/Canning Employees 0.00**THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS****THIS BECOMES A TAX RECEIPT****WHEN VALIDATED**

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:ARAZOZA BROTHERS CORPORATION
7027 SW 87TH CT
MIAMI, FL 33173-2509**Receipt #** WWW-23-00281263
Paid 08/19/2024 27.00



ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County
Serving you.

P.O. Box 3353, West Palm Beach, FL 33402-3353
www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****
7027 SW 87 COURT
MIAMI, FL 33173

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
LANDSCAPING	ARAZOZA ALBERTO		B24.614559 07/02/2024	\$189.00	B40129994

This document is valid only when receipted by the Tax Collector's Office.



ARAZOZA BROTHERS CORPORATION
ARAZOZA BROTHERS CORPORATION
7027 SW 87 COURT
MIAMI FL 33173

RECEIVED

JUL 19 2024

**STATE OF FLORIDA
PALM BEACH COUNTY
2024 / 2025 LOCAL BUSINESS TAX RECEIPT
LBTR Number: 199609852
EXPIRES: 09/30/2025**

This receipt MUST be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County
Serving you.

P.O. Box 3353, West Palm Beach, FL 33402-3353
www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****
7027 SW 87 COURT
MIAMI, FL 33173

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
IRRIGATION SPRINKLER CONTRACTOR	ARAZOZA BROTHERS CORPORATION	SCC131151972	B24.614417 07/02/2024	\$99.00	B40110912

This document is valid only when receipted by the Tax Collector's Office.



2 - 216

ARAZOZA BROTHERS CORPORATION
ARAZOZA BROTHERS CORPORATION
7027 SW 87TH CT
MIAMI FL 33173-2509

**STATE OF FLORIDA
PALM BEACH COUNTY
2024 / 2025 LOCAL BUSINESS TAX RECEIPT
LBTR Number: 200501572
EXPIRES: 09/30/2025**

This receipt MUST be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.



The Florida Nursery, Growers & Landscape Association
Confers on

Eduardo Arazoza
C00148

The Title of
FNGLA Certified Landscape Contractor (FCLC)

Expiration Date: 03/31/2025
Certified Since: 11/8/1996


Martin Hackney, FNGLA President
Merry Mott, FNGLA Certification Director

State of Florida

**Minority Business
Certification**

Arazoza Brothers Corporation

Is certified under the provisions of
287 and 295.187, Florida Statutes, for a period from:
12/17/2024 *to* 12/17/2026



Pedro Allende
Florida Department of Management Services



Office of Supplier Development
4050 Esplanade Way, Suite 380
Tallahassee, Florida 32399
850-487-0915
www.dms.myflorida.com/osd



Florida Department of Transportation

RON DESANTIS
GOVERNOR

605 Suwannee Street
Tallahassee, FL 32399-0450

JARED W. PERDUE, P.E.
SECRETARY

April 25, 2024

ARAZOZA BROTHERS CORPORATION
7027 SW 87 COURT
MIAMI, FLORIDA 33173

RE: CERTIFICATE OF QUALIFICATION

The Department of Transportation has qualified your company for the type of work indicated below.

FDOT APPROVED WORK CLASSES:

GRADING, GRASSING, SEEDING AND SODDING, LANDSCAPING, .

Unless notified otherwise, this Certificate of Qualification will expire **6/30/2025**.

In accordance with Section 337.14(4), Florida Statutes, changes to Ability Factor or Maximum Capacity Rating will not take effect until after the expiration of the current certificate of prequalification (if applicable).

In accordance with Section 337.14(1), Florida Statutes, an application for qualification must be filed within (4) months of the ending date of the applicant's audited annual financial statements.

If the company's maximum capacity has been revised, it may be accessed by logging into the Contractor Prequalification Application System via the following link:

[HTTPS://fdotwp1.dot.state.fl.us/ContractorPreQualification](https://fdotwp1.dot.state.fl.us/ContractorPreQualification)

Once logged in, select "View" for the most recently approved application, and then click the "Manage" and "Application Summary" tabs.

The company may apply for a Revised Certificate of Qualification at any time prior to the expiration date of this certificate according to Section 14-22.0041(3), Florida Administrative Code (F.A.C.), by accessing the most recently approved application as shown above and choosing "Update" instead of "View." If certification in additional classes of work is desired, documentation is needed to show that the company has performed such work.

All prequalified contractors are required by Section 14-22.006(3), F.A.C., to certify their work underway monthly in order to adjust maximum bidding capacity to available bidding capacity. You can find the link to this report at the website shown above.

Sincerely,

James E. Taylor II, Prequalification Supervisor
Contracts Administration Office

JTII

Improve Safety, Enhance Mobility, Inspire Innovation

www.fdot.gov

State of Florida

Department of State

I certify from the records of this office that ARAZOZA BROTHERS CORPORATION is a corporation organized under the laws of the State of Florida, filed on February 22, 1988.

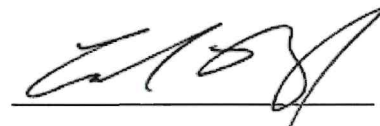
The document number of this corporation is K15656.

I further certify that said corporation has paid all fees due this office through December 31, 2025, that its most recent annual report/uniform business report was filed on January 8, 2025, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Eighth day of January, 2025*




Secretary of State

Tracking Number: 5049874480CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>



Alberto Arazoza
President

Education

University of Florida, Gainesville,
Bachelor of Science in Business
Administration 1984-87.

Florida International University
Master of Landscape Architect
Completed 2 of 3 years of
program.

Areas of Specialization

Florida Licensed General
Contractor. Licensed Irrigation
Contractor for Dade, Broward,
Palm Beach Counties.

Professional Affiliations

Engineering Contractors
Association Member
Board Member 2004-06
Vice President 2005-06

Florida Farm Bureau Board
Member

Political Action Committee Chair

University of Florida IFAS
Chair Advisory Committee
Member

FNGLA Member

Latin Business Association
Member-
Awarded LBA Landscape
Contractor of the Year-2014, 2017

Riviera Country Club Member
1998-Current

Certifications

State of Florida Certified
Contractor CGC1506166 Exp 8/18
State of Florida Certified Irrigation
Contractor SCC131151972
Exp 08/18

Arazoza Brothers Corporation

(February 1988 to Present)

President

My responsibilities include, but are not limited to: Managing the daily in-house operation, project sales, project design, preparing and finalizing all project bids, securing financial sources, overseeing collections, and supervising employees and office staff. Responsible for sales, marketing, advertising, and daily contact with general public. Responsible for budgeting projects to secure the financial needs of the operation.

Agri Brothers Corp.,

(Oct 1995 to Present)

President

My responsibilities include, but are not limited to: managing and overseeing the operations of over 30 acres of wholesale nursery materials, securing financial sources, overseeing collections, and supervising employees and office staff.



Eduardo Arazoza
Vice President

Education

Valley Forge Military Academy

Areas of Specialization

Florida Certified Landscape
Contractor License.

Professional Affiliations

FNGLA Member
FNGLA Board Member

Engineering Contractors
Association Member

Riviera Country Club Member

Certifications

FNGLA Florida Certified
Landscape Contractor

Arazoza Brothers Corporation

(February 1988 to Present)

Vice President

My responsibilities include, but not limited to: Managing the daily field operations, supervising 65 employees in the field and superintendents, project management, layout, landscape design, purchasing of plants, equipment, and materials. Responsible for continuous research in the plant industry, ensured up-to-date techniques and procedures in the maintenance and installation of new material.

Agri Brothers Corp.

(October 1995 to Present)

Vice- President

My responsibilities include, but are not limited to: managing and overseeing the operations and production of over 30 acres of wholesale nursery materials, project inventory requirements, analyze plant production, and supervising employees.

Costa Nursery Farms

(July 1982 to January 1988)

Sales Manager

Solicited new accounts, ensured customer satisfaction, and secured prompt delivery of orders.

Production Manager

Analyzed plant production, inspected plants for diseases and growth schedules, and projected all inventory requirements.

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: 283-25-WV

Reference for: Bike Lane Tree Planting - Washington and 72nd Ave.

Organization/Firm Name providing
reference:

KCI Technologies

Organization/Firm Contact

Name:

Todd Reich

Title:

Project Administrator

Email:

Todd.Reich@kci.com

Phone: 954-218-9203

Name of Referenced Project:

SR-528, Beachline at

Contract No: E8U43

Date Services were provided:

Industry Road Interchange

Project

July 2023 to November 2025

Amount: \$ 3,851,839.00

Referenced Vendor's role in
Project:

☒ Prime Vendor

☐ Subcontractor/
Subconsultant

Would you use the Vendor
again?

☒ Yes

☐ No. Please specify in additional
comments

Description of services provided by Vendor (provide additional sheet if necessary): The project included providing landscape installation (1,506 trees, 115 palms, 4,459 shrubs & 8 acres of wildflower seeding), site preparation, clearing and grubbing, electrical components, mulching, mowing and litter removal, irrigation system and two (2) year Landscape Establishment Period.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary): Arazoza Brother Corp provided Florida

Number One and Florida Fancy plant material. The installation crews utilized "Best Management

Practices" while performing their tasks. The installation phase was completed within the allotted contract time.

******THIS SECTION FOR CITY USE ONLY******

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:				Title:	
	Department:				Date:	

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: 283-25-WV

Reference for: Bike Lane Tree Planting - Washington and 72nd Ave.

Organization/Firm Name providing
reference:

Halley Engineering Contractors, Inc.

Daniel I
Halley

Digitally signed by
Daniel I Halley
Date: 2025.03.17
20:45:19 -04'00'

Organization/Firm Contact

Title:

Name:

Daniel Halley

President

Email:

dhalley@halleyeng.com

Phone: (305) 883-0055

Name of Referenced Project:

FIN#405575-9-52-01 T6424

Contract No: T6424

Date Services were provided:

August 2019 thru May 2021

Project

Amount: \$342,033.00

Referenced Vendor's role in
Project:

☐ Prime Vendor

☒ Subcontractor/
Subconsultant

Would you use the Vendor
again?

☒ Yes

☐ No. Please specify in additional
comments

Description of services provided by Vendor (provide additional sheet if necessary):

Heavy landscape installation and maintenance.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

Arazoza is the premiere heavy landscape installer and maintenance company in Florida. It specializes in roadside installations servicing State DOT, County, and Municipal projects. I unequivocally recommend Arazoza for your landscape needs.

****THIS SECTION FOR CITY USE ONLY****

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:				Title:	
	Department:				Date:	

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: 283-25-WV

Reference for: Bike Lane Tree Planting - Washington and 72nd Ave.

Organization/Firm Name providing
reference:

Burkhardt Construction, Inc. - Adam Rossmell

Organization/Firm Contact

Title:

Name: Adam Rossmell

Project Manager

Email: adam@burkhardtconstruction.com

Phone: 772-321-4438

Name of Referenced Project:

Hollywood Blvd. Streetscape

Contract No:

Date Services were provided:

May 2023 - Oct. 2024

Project

Amount: 1,496,856.00

Referenced Vendor's role in
Project:

☐ Prime Vendor

☒ Subcontractor/
Subconsultant

Would you use the Vendor
again?

☒ Yes

☐ No. Please specify in additional
comments

Description of services provided by Vendor (provide additional sheet if necessary):

Installation of a new irrigation system and the modification of the existing City irrigation system.
Furnish and installation of all specified plants and trees on the project including 114 medjool date palms.

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

Arazoza did an outstanding job meeting our expectations and helping us complete the project on time.
Their superintendents and project managers were extremely responsive during the entire project.

******THIS SECTION FOR CITY USE ONLY******

Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail:	<input type="checkbox"/>
Verified by:	Name:				Title:	
	Department:				Date:	

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: 283-25-WV
 Reference for: Bike Lane Tree Planting - Washington and 72nd Ave.

Organization/Firm Name providing reference:

Organization/Firm Contact

Name:

Email:

Name of Referenced Project:

Date Services were provided:

Referenced Vendor's role in Project:

Would you use the Vendor again?

MOSS & ASSOCIATES

Title:

JORGE POWELL

PROJECT MANAGER

JPOWELL@MOSS.COM

Phone: 305 753 8877

29N

Contract No:

Project

Amount: \$1,700,000

2024 - 2025

☐ Prime Vendor

☒ Subcontractor/
Subconsultant

☒ Yes

☐ No. Please specify in additional comments

Description of services provided by Vendor (provide additional sheet if necessary):

ENTIRE LANDSCAPE AND IRRIGATION SCOPE

Please rate your experience with the Vendor	Need Improvement	Satisfactory	Excellent	Not Applicable
Vendor's Quality of Service				
a. Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Accuracy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vendor's Organization:				
a. Staff expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Staff turnover	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness/Cost Control of:				
a. Project	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Deliverables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Additional Comments (provide additional sheet if necessary):

****THIS SECTION FOR CITY USE ONLY****					
Verified via:	Email:	<input type="checkbox"/>	Verbal:	<input type="checkbox"/>	Mail: <input type="checkbox"/>
Verified by:	Name:				Title:
	Department:				Date:

FORM 12

TRENCH SAFETY

This form must be completed and signed by the Respondent.

Failure to complete this form may result in the solicitation being declared non-responsive.

Respondent acknowledges that the Florida Trench Safety Act, Section 553.60 et. seq., which became effective October 1, 1990, shall be in effect during the period of construction of the project. The respondent by signing and submitting the solicitation is, in writing, assuring that it will perform any trench excavation in accordance with applicable trench safety standards. The respondent further identifies the following separate item of cost of compliance with the applicable trench safety standards as well as the method of compliance:

Method of Compliance

Cost

n/a

Total \$ 0.00

Respondent acknowledges that this cost is included in the applicable items of their submittal and in the Grand Total Solicitation Price. Failure to complete the above will result in the solicitation being declared non-responsive.

The Respondent is, and the Owner and Engineer are not, responsible to review or assess Respondent's safety precautions, programs or costs, or the means, methods, techniques or technique adequacy, reasonableness of cost, sequences or procedures of any safety precaution, program or cost, including but not limited to, compliance with any and all requirements of Florida Statute Section 553.60 et. seq. cited as the "Trench Safety Act." Respondent is, and the owner and Engineer are not, responsible to determine if any safety related standards apply to the project, including but not limited to, the "Trench Safety Act."

WY.R.

Witness Signature

Vanessa Y. Rivera

Witness Printed Name

3414 SW 156 CT.
Miami, FL 33185

Witness Address

03/18/2025

Date

Alberto Arazoza

Contractor's Signature

Alberto Arazoza

Printed Name

President

Title

03/18/2025

Date

- END OF SECTION -

Form 13

Bond Form

(Construction)

STATE OF FLORIDA

KNOW ALL MEN BY THESE PRESENTS:

That we Arazoza Brothers Corporation, as Principal, and Great Midwest Insurance Company as Surety, are held and firmly bound unto the City of Hollywood in the sum of _____
_____ Five Percent of Amount Bid Dollars (\$ 5% of Amount Bid _____) lawful money of the United States, amounting to 5% of the total SOLICITATION Price, for the payment of said sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has submitted the accompanying SOLICITATION, dated _____ March 18, 20²⁵ for

Solicitation#: IFB-283-25-WV

Solicitation Title: BIKE LANE TREE PLANTING - WASHINGTON AND 72ND AVE.

NOW, THEREFORE, if the principal shall not withdraw said SOLICITATION within 90 days after date of the same and shall within ten days after the prescribed forms are presented to him for signature, enter into a written contract with the CITY, in accordance with the SOLICITATION as accepted, and give bond with good and sufficient surety or sureties, and provide the necessary Insurance Certificates as may be required for the faithful performance and proper fulfillment of such Contract, then this obligation shall be null and void.

Approved Solicitation Bond

In the event of the withdrawal of said SOLICITATION within the specified period, or the failure to enter into such contract and give such bond and insurance within the specified time, the principal and the surety shall pay to the City of Hollywood the difference between the amount specified in said SOLICITATION and such larger amount for which the City of Hollywood may in good faith contract with another party to perform the work and/or supply the materials covered by said SOLICITATION.

In accordance with Florida State Statute 255.05, Payment, Performance and Bid Bonds may be required for construction projects that are over \$200,000.00.

IN WITNESS WHEREOF, the above bound parties have executed this statement under their seal(s) this 18th
day of March, 2025, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

WHEN THE PRINCIPAL IS AN INDIVIDUAL: *n/a*

Signed, sealed and delivered in the presence of:

Witness

Signature of Individual

Address

Printed Name of Individual

Witness

Address

Approved Solicitation Bond

WHEN THE PRINCIPAL IS A CORPORATION:

Attest:

Secretary

Arazoza Brothers Corporation

Name of Corporation

7027 SW 87 Court, Miami, FL 33173

Business Address

By:

(Affix Corporate Seal)

Alberto Arazoza

Printed Name

President

Official Title

CERTIFICATE AS TO CORPORATE PRINCIPAL

I, Alberto Arazoza, certify that I am the secretary of the Corporation named as Principal in the attached bond; that Alberto Arazoza who signed the said bond on behalf of the Principal, was then President / Secretary of said Corporation; that I know his signature, and his signature thereto is genuine, and that said bond was duly signed, sealed and attested for and on behalf of said Corporation by authority of its governing body.

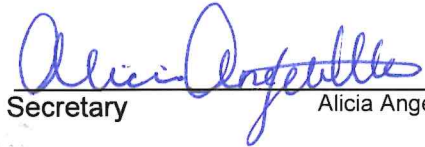
Secretary

(SEAL)

Approved Solicitation Bond

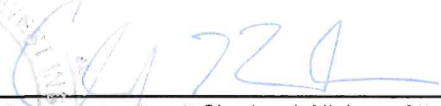
TO BE EXECUTED BY CORPORATE SURETY:

Attest: As per attached Power of Attorney


Secretary Alicia Angelillo

Great Midwest Insurance Company
Corporate Surety

Business Address
800 Gessner, Suite 600, Houston, TX 77024

BY: 
(Affix Corporate Seal) Charles J. Nielson, Attorney-in-Fact

Charles J. Nielson
Attorney-in-Fact

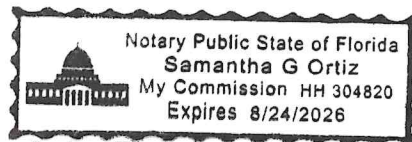
Name of Local Agency

Acrisure
Business Address
15050 NW 79 Court, Suite 200, Miami Lakes, FL 33016

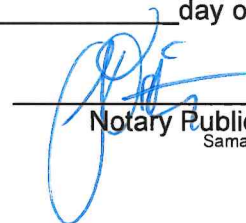
STATE OF FLORIDA

Before me, a Notary Public, duly commissioned, qualified and acting, personally appeared,

Charles J. Nielson to me well known, who being by me first duly sworn upon
oath says that he is the attorney-in-fact for the _____ Great Midwest Insurance Company _____ and
that the has been authorized by _____ Great Midwest Insurance Company _____ to execute the forgoing
bond on behalf of the CONTRACTOR named therein in favor of the City of Hollywood, Florida.
Subscribed and sworn to before me this _____ 18th _____ day of March, 2025



My Commission Expires: August 24, 2026



Notary Public, State of Florida
Samantha Ortiz

- END OF SECTION-

POWER OF ATTORNEY

Great Midwest Insurance Company

KNOW ALL MEN BY THESE PRESENTS, that **GREAT MIDWEST INSURANCE COMPANY**, a Texas Corporation, with its principal office in Houston, TX, does hereby constitute and appoint:

Dale A. Belis, Marilyn Ann Blome, Donald Bramlage, Edward M. Clark, Christian Collins, F. Danny Gann, David R. Hoover, Jarrett Merlucci, Laura D. Mosholder, Charles J. Nielson, Jessica P. Reno, Audria R. Ward, Edward T. Ward, Kevin Wojtowicz, Richard Zimmerman, Charles D. Nielson, Brett M. Rosenhaus

its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of **GREAT MIDWEST INSURANCE COMPANY**, on the 1st day of October, 2018 as follows:

Resolved, that the President, or any officer, be and hereby is, authorized to appoint and empower any representative of the Company or other person or persons as Attorney-In-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed Ten Million dollars (\$10,000,000.00), which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-In-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-In-Fact, so appointed, may be removed in the Company's sole discretion and the authority so granted may be revoked as specified in the Power of Attorney.

Resolved, that the signature of the President and the seal of the Company may be affixed by facsimile on any power of attorney granted, and the signature of the Secretary, and the seal of the Company may be affixed by facsimile to any certificate of any such power and any such power or certificate bearing such facsimile signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certificate so executed and sealed shall, with respect to any bond of undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS THEREOF, **GREAT MIDWEST INSURANCE COMPANY**, has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 11th day of February, 2021.



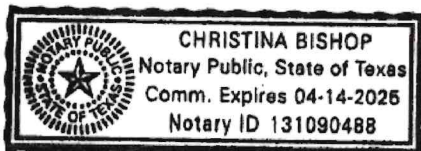
GREAT MIDWEST INSURANCE COMPANY

BY

Mark W. Haushill
President

ACKNOWLEDGEMENT

On this 11th day of February, 2021, before me, personally came Mark W. Haushill to me known, who being duly sworn, did depose and say that he is the President of **GREAT MIDWEST INSURANCE COMPANY**, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.



BY

Christina Bishop
Notary Public

CERTIFICATE

I, the undersigned, Secretary of **GREAT MIDWEST INSURANCE COMPANY**, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the foregoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Sealed at Houston, TX this 18th Day of March, 2025.



BY

Leslie K. Shaunty
Secretary

"WARNING: Any person who knowingly and with intent to defraud any insurance company or other person, files and application for insurance of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/20/2024

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 have **ADDITIONAL INSURED** provisions or 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 Brown & Brown Insurance Services, Inc. 1201 W Cypress Creek Rd Suite 130 Fort Lauderdale FL 33309	CONTACT NAME: Jim Murphy PHONE (A/C, No, Ext): (954) 776-2222 E-MAIL ADDRESS: 053.Certs@bbrown.com FAX (A/C, No): (954) 776-4446
INSURED Arazoza Brothers Corporation 7027 SW 87 Court Miami FL 33173	INSURER(S) AFFORDING COVERAGE INSURER A: FCCI Insurance Company INSURER B: Bridgefield Employers Insurance Company INSURER C: Westchester Surplus Lines Insurance Company INSURER D: INSURER E: INSURER F:
	NAIC # 10178 10701 10172

COVERAGES**CERTIFICATE NUMBER:** CL2431507379**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<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"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	GL10006771203	04/01/2024	04/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 Employee Benefit Liab \$ 1,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	CA10006771303	04/01/2024	04/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			UMB10008352501	04/01/2024	04/01/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N <input checked="" type="checkbox"/> N	N / A	Y	083056744	04/01/2024	04/01/2025 <input checked="" type="checkbox"/> PER STATUTE <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
C	Contractors Pollution Liability w/Professional Liability			G74464646001	04/01/2024	04/01/2025	Each Claim \$2,000,000 Aggregate \$2,000,000

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

SAMPLE

CERTIFICATE HOLDER

SAMPLE

CANCELLATION

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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Additional Named Insureds

Other Named Insureds

ABO Property, LLC	Limited Liability Company, Additional Named Insured
AGRI Brothers Corp.	Corporation, Additional Named Insured
Arazoza Investments LLC DBA Arazoza Brothers Mainte	Limited Liability Company, Additional Named Insured
Arazoza Investments, LLC. dba Dedicated Property Se	Limited Liability Company, Additional Named Insured
Lushlife Commercial, LLC	Limited Liability Company, Additional Named Insured