



TOWN OF GOLDEN BEACH

One Golden Beach Drive
Golden Beach, FL 33160

MEMORANDUM

Date: March 18, 2025

To: Honorable Mayor Glenn Singer &
Town Council Members

From: Alexander Diaz,
Town Manager *Alex B*

Item Number:

3

Subject: Resolution No. 2998.25- Awarding RFP 2024-002 Wellness Center Construction to John Bell Construction, Inc.

Recommendation:

It is recommended that the Town Council adopt the attached Resolution No. 2998.25 as presented.

Background:

On August 23, 2022, the Town of Golden Beach held a Special Election to approve a Bond Referendum regarding the issuance of \$7 million in General Obligation (G.O.) Bonds for the explicit purpose of building a Wellness Center. The Residents of the Town overwhelmingly approved the Bond Referendum with over 75% of the votes cast being in favor of the issuance of the bond.

On October 30, 2023, the Town issued a Request for Submittals (RFS) to select the Architect of Record for the Design of a Wellness Center. After a series of workshops and council meetings a final design was approved by Council, awarding Eric Dempsey Architecture, LLC. the project on June 18, 2024, via Resolution No. 2953.24.

On December 20, 2024, a Request for Proposals (RFP) was issued for the Construction of the Wellness Center.

The timeline of events is as follows:

- January 16, 2025, a Mandatory Pre-Bid Conference was held with 8 firms in attendance
- January 23, 2025, a Second Mandatory Pre-Bid Conference was held with 12 firms in attendance.

- The Town Council appointed members to the Wellness Center Construction Selection Committee comprised of both residents and staff.
- March 3, 2025, was the deadline for submissions – two firms submitted proposals, John Bell Construction, Inc. and Bosk Contracting, LLC.
- March 3, 2025, the Town held a bid opening, at which time it was announced that John Bell Construction, Inc. submitted a proposal for \$5,229,513.05, and Bosk Contracting, LLC. submitted a proposal for \$5,864,261.43.
- March 11, 2025, the Selection Committee members held workshops with the two qualifying firms, scoring them and making a recommendation to enter into an agreement with John Bell Construction, Inc.

I am requesting authorization to negotiate a contract for construction services with John Bell Construction, Inc., in an amount not to exceed \$5,229,513.05. Upon reaching an agreement, I am asking the Town Council to authorize the Mayor to execute the said agreement as drafted and accepted by the Town's Attorney.

Fiscal Impact:

An amount not to exceed \$5,229,513.05.

TOWN OF GOLDEN BEACH, FLORIDA

RESOLUTION NO. 2998.25

A RESOLUTION OF THE TOWN COUNCIL OF THE TOWN OF GOLDEN BEACH, FLORIDA, AWARDED REQUEST FOR PROPOSAL (“RFP”) 2024-002 WELLNESS CENTER CONSTRUCTION TO JOHN BELL CONSTRUCTION, INC.; PROVIDING FOR IMPLEMENTATION AND PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, on December 20, 2024 the Town of Golden Beach (the “Town”) issued a Request for Proposals (“RFP”) requesting qualified firms to submit their proposals for the Construction of the Town’s Wellness Center (the “Project”); and

WHEREAS, on January 16, 2025 and on January 23, 2025 the Town held mandatory pre-bid conferences at which it discussed the RFP; and

WHEREAS, on or before the submittal deadline of March 3, 2025, two qualified firms responded to the RFP; and

WHEREAS, on March 11, 2025, the Wellness Center Construction Selection Committee, appointed by Council, heard presentations from each of the qualified firms; and

WHEREAS, at the conclusion of the presentations, the committee provided the following scores for each of the two firms, in accordance with the scoring criteria published in the RFP:

John Bell Construction Inc.	<u>403 points out of a possible 500</u>
Bosk Contracting, LLC.	<u>230 points out of a possible 500</u>

WHEREAS, the Town Manager is in agreement with the recommendation of the Committee Members and is seeking authorization to begin negotiations with John Bell Construction, Inc. for a contract in an amount not to exceed \$5,229,513.05; and

WHEREAS, the Town Mayor is authorized to execute said contract as drafted and accepted by the Town Attorney; and

WHEREAS, the Town Council has determined that it is in the best interest of the Town of Golden Beach to award the project to John Bell Construction, Inc.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWM OF GOLDEN BEACH, FLORIDA, AS FOLLOWS:

Section 1. Recitals Adopted. Each of the above stated recitals are hereby adopted, confirmed and incorporated herein.

Section 2. Approval. The Town Council hereby awards RFP 2024-002, Construction of Wellness Center to John Bell Construction, Inc.

Section 3. Implementation. The Town Manager and Town Mayor are hereby authorized to negotiate a contract with John Bell Construction, Inc. for an amount not to exceed \$5,229,513.05. The Town Mayor is also authorized to execute the contract as drafted and accepted by the Town Attorney.

Section 4. Effective Date. This Resolution shall be effective immediately upon adoption.

Sponsored by **Town Administration.**

The Motion to adopt the foregoing resolution was offered by Vice Mayor Luskin, seconded by Councilmember Bernstein, and on roll call the following vote ensued:

Mayor Glenn Singer	<u>Aye</u>
Vice Mayor Judy Luskin	<u>Aye</u>
Councilmember Kenneth Bernstein	<u>Aye</u>
Councilmember Bernard Einstein	<u>Aye</u>
Councilmember Jessie Mendal	<u>Aye</u>


PASSED AND ADOPTED by the Town Council of the Town of Golden Beach,

Florida, this 18th day of March, 2025.



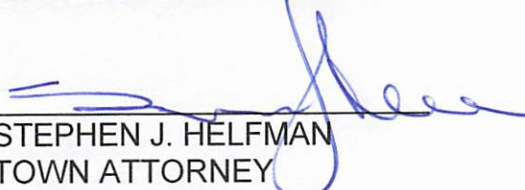
MAYOR GLENN SINGER

ATTEST:



LISSETTE PEREZ
TOWN CLERK

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY:



STEPHEN J. HELFMAN
TOWN ATTORNEY



WE STRIVE TO BE SET APART
JOHNBELLCONSTRUCTION.COM



RFP NO: 2024-002

RFP TITLE: CONSTRUCTION OF WELLNESS CENTER

FIRM NAME: JOHN BELL CONSTRUCTION, INC.

ADDRESS: 4000 SW 60TH COURT, MIAMI, FL 33155

PHONE: 305-458-5666

CONTACT: OSCAR MOREJON

EMAIL: OSCAR@JOHNBELLCONSTRUCTION.COM

DATE: MARCH 3RD, 2025

SET APART

TAB A

LETTER OF
TRANSMITTAL

JOHN BELL CONSTRUCTION INC.



March 3rd, 20205

John Bell Construction, Inc.
4000 SW 60th Court
Miami, FL 33155
Phone: 305-458-5666

Town of Golden Beach
100 Ocean Blvd
Golden Beach, FL 33160

Subject: Letter of Transmittal (Tab A) RFP No. 2024-002: Construction of Wellness Center

Dear Town of Golden Beach Council Members,

John Bell Construction is pleased to submit our Proposal in response to RFP No. 2024-002 for the Construction of the Town of Golden Beach Wellness Center. We appreciate the opportunity to be considered for this significant project and are excited about the potential to contribute to the Town's vision for this new facility.

As a leading commercial General Contractor specializing in new construction projects for Public and Private clients alike, we undoubtedly understand what goes into the construction of a two-story, approximately 10,670 square-foot Wellness Center. Our team has extensive experience delivering high-quality, timely, and cost-effective projects of similar scope. Two notable projects that immediately come to mind are the City of West Miami Recreational Center (New Construction, 3-story, 21,000 Sq. Ft. Building) and the Westchester Regional Library Health & Wellness Information Center (New Construction, 1-story, 5,000 Sq. Ft. Building). These projects along with the references provided in this Proposal demonstrate our ability to manage and execute complex, community-centered developments successfully. Specifically, early and proactive procurement will be paramount to staying on schedule, for a strong finish and smooth delivery. Once an Official Award Letter is provided and a Contract is in circulation, we'll begin our Subcontract Agreements Executions as well as Submittal process. The sooner we can have



Material and Equipment Submittals approved, the sooner we can release these items to ensure early and proactive delivery. For instance, Windows/Exterior Doors, Shell, Electrical, and Elevator will be critical scopes to push on the front end.

John Bell Construction is committed to the successful and timely completion of the Town of Golden Beach Wellness Center. To show the importance of this project not only for the Town and its constituents, but also for our company, I, myself, as President and Founder of John Bell Construction (Oscar Morejon) will serve as the primary liaison between John Bell Construction and the Town of Golden Beach throughout the duration of the project. It goes without saying, we will also assign an actual Project Manager to this project for all Project Management-related duties, but to satisfy the requirement stated in Section 2.5.1 of the RFP, I can be classified as "Project Manager" as well. Under my and my business partners' leadership, we are confident in our ability to provide the necessary resources, expertise, supervision and coordination required to bring this project to fruition. We recognize the importance of this project for the Town of Golden Beach and assure you that we have the knowledge, personnel, and dedication necessary to meet and exceed expectations. We look forward to the opportunity to collaborate and bring this vision to life. Should you require any further information, please do not hesitate to contact us.

Sincerely,

A handwritten signature in black ink, appearing to read "Oscar Morejon", is written over a horizontal dotted line.

Oscar Morejon
President & Founder
John Bell Construction, Inc.

TAB B

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SET APART

TAB C

QUALIFICATIONS
& EXPERIENCE

JOHN BELL CONSTRUCTION INC.

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000016299

Entity Name: JOHN BELL CONSTRUCTION, INC.

**FILED
Apr 01, 2024
Secretary of State
3344216419CC**

Current Principal Place of Business:

4000 SW 60TH CT.
MIAMI, FL 33155

Current Mailing Address:

4000 SW 60TH CT
MIAMI, FL 33155 US

FEI Number: 81-1551021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE BARTHET FIRM
200 S. BISCAYNE BLVD
SUITE 1650
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALEX BARTHET

04/01/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MOREJON, OSCAR
Address 1760 SW 64TH AVE
City-State-Zip: MIAMI FL 33155

Title VP
Name FAZ, ALBERT L
Address 4000 SW 60TH CT
City-State-Zip: MIAMI FL 33155

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT FAZ

VICE PRESIDENT

04/01/2024

Electronic Signature of Signing Officer/Director Detail

Date

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000016299

Entity Name: JOHN BELL CONSTRUCTION, INC.

Current Principal Place of Business:

4000 SW 60TH CT.
MIAMI, FL 33155

Current Mailing Address:

4000 SW 60TH CT
MIAMI, FL 33155 US

FEI Number: 81-1551021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE BARTHET FIRM
200 S. BISCAYNE BLVD
SUITE 1650
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALEX BARTHET 04/26/2023
Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	P	Title	VP
Name	MOREJON, OSCAR	Name	FAZ, ALBERT L
Address	1760 SW 64TH AVE	Address	260 PALERMO AVE
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	CORAL GABLES FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT FAZ 04/26/2023
Electronic Signature of Signing Officer/Director Detail Date

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000016299

**FILED
Apr 27, 2022
Secretary of State
4500643891CC**

Entity Name: JOHN BELL CONSTRUCTION, INC.

Current Principal Place of Business:

4000 SW 60TH CT.
MIAMI, FL 33155

Current Mailing Address:

4000 SW 60TH CT
MIAMI, FL 33155 US

FEI Number: 81-1551021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE BARTHET FIRM
200 S. BISCAYNE BLVD
SUITE 1650
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALEX BARTHET

04/27/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MOREJON, OSCAR
Address 1760 SW 64TH AVE
City-State-Zip: MIAMI FL 33155

Title VP
Name FAZ, ALBERT L
Address 260 PALERMO AVE
City-State-Zip: CORAL GABLES FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT FAZ

VICE PRESIDENT

04/27/2022

Electronic Signature of Signing Officer/Director Detail

Date

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000016299

Entity Name: JOHN BELL CONSTRUCTION, INC.

Current Principal Place of Business:

260 PALERMO AVENUE
#01
CORAL GABLES, FL 33134

Current Mailing Address:

260 PALERMO AVENUE
#01
CORAL GABLES, FL 33134 US

FEI Number: 81-1551021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE BARTHET FIRM
200 S. BISCAYNE BLVD
SUITE 1650
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALEX BARTHET 04/21/2021
Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	P	Title	VP
Name	MOREJON, OSCAR	Name	FAZ, ALBERT L
Address	1760 SW 64TH AVE	Address	260 PALERMO AVE
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	CORAL GABLES FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT FAZ VICE PRESIDENT 04/21/2021
Electronic Signature of Signing Officer/Director Detail Date

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000016299

Entity Name: JOHN BELL CONSTRUCTION, INC.

FILED
Jan 21, 2020
Secretary of State
9978514391CC

Current Principal Place of Business:

260 PALERMO AVENUE
#01
CORAL GABLES, FL 33134

Current Mailing Address:

260 PALERMO AVENUE
#01
CORAL GABLES, FL 33134 US

FEI Number: 81-1551021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOREJON, OSCAR
1760 SW 64 AVENUE
MIAMI, FL 33155 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	MOREJON, OSCAR	Name	FAZ, ALBERT L
Address	1760 SW 64 AVENUE	Address	260 PALERMO AVE
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	CORAL GABLES FL 33134

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SIGNATURE: ALBERT FAZ

VICE PRESIDENT

01/21/2020

Electronic Signature of Signing Officer/Director Detail

Date



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

MOREJON, OSCAR P

JOHN BELL CONSTRUCTION, INC.
4000 SW 60TH CT
MIAMI FL 33155

LICENSE NUMBER: CGC1524390

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 08/20/2024

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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

ARRIAGA, ANTONIO

AMEX CONSTRUCTION GROUP, INC.
17201 SW 285TH STREET
★ HOMESTEAD FL 33030 ★

LICENSE NUMBER: CGC1535639

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 09/12/2024

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/21/2024

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		CONTACT NAME: Alberto Rodriguez	
Insure Safe Inc		PHONE (A/C No., Ext): 305-303-7080	FAX (A/C No.): 305-267-4206
2300 SW 57th Ave		E-MAIL ADDRESS: Insuresafeinc@yahoo.com	
Miami FL 33155		INSURER(S) AFFORDING COVERAGE	
		INSURER A : Evanston Insurance Company	NAIC # 35378
INSURED		INSURER B : Berkshire Hathaway Direct Insurance Company	
Amex Construction Group Inc		INSURER C :	
17201 SW 285th St		INSURER D :	
Homestead FL 33030		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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y	3AA764355	03/09/2024	03/09/2025	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input checked="" type="checkbox"/> Primary and Non contributory					MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 2,000,000
	OTHER:					PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$ 10,000
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$ 20,000
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident) \$ 10,000
						\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N N	N9WC177594	02/10/2024	02/10/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)					E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
John Bell Construction is named as Additional Insured with regards to the General Liability Policy. A Waiver of subrogation applies in favor of the additional Insured for the General Liability and Workers Compensation Policy.

CERTIFICATE HOLDER	CANCELLATION
John Bell Construction 4000 SW 60th Ct Miami FL 33155	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 <i>Alberto Rodriguez</i>

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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

DOWNEY, JOHN T

THE COMPANIES OF R&S INC
8715 SW 129TH TERRACE
MIAMI FL 33176-5903

LICENSE NUMBER: CGC016750

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 09/03/2024

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/04/2024

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 NEA Insurance Group, LLC 8700 W. Flagler St., Suite 401 Miami FL 33174	CONTACT NAME: Joyce Corp PHONE (A/C, No, Ext): (305) 221-2400 E-MAIL ADDRESS: jcorp@avante-nea.com	FAX (A/C, No): (305) 221-2411
	INSURER(S) AFFORDING COVERAGE	
INSURED The Companies of R&S, Inc. 8715 SW 129th Terrace Miami FL 33176	INSURER A: Ohio Security Insurance Company	NAIC # 24082
	INSURER B: Travelers Casualty Insurance Company of America	19046
	INSURER C: StarStone National Insurance Co	25496
	INSURER D: Bridgefield Employers Insurance Co	10701
	INSURER E:	


COVERAGES **CERTIFICATE NUMBER:** CL2432512441 **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:			BLS2462998473	04/01/2024	04/01/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	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			BA3T4084052442G	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) \$ \$
C	<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 \$ 10,000			84149T242ALI	04/01/2024	02/01/2025	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	83044716	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

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

CERTIFICATE HOLDER **CANCELLATION**

John Bell Construction, Inc. 4000 SW 60th Court Miami FL 33155	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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Ron DeSantis, Governor

Melanie S. Griffin, Secretary

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
THE CLASS A AIR CONDITIONING CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

GONZALEZ, GREGORIO
ATLANTIC AIR CONDITIONING & REFRIGERATION INC
3450 WEST 84 ST
SUITE 202G
HIALEAH FL 33018

LICENSE NUMBER: CAC057704

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/04/2024

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FLORAIR-02

LCABANAS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/4/2025

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).

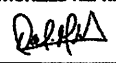
PRODUCER Acrisure Southeast Partners Insurance Services, LLC 1317 Citizens Blvd Leesburg, FL 34748	CONTACT NAME: PHONE (A/C, No, Ext): (800) 845-8437	FAX (A/C, No):
	E-MAIL ADDRESS:	
INSURED Atlantic Air Conditioning & Refrigeration Inc. 4555 East 9 Court Hialeah, FL 33013	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Evanston Insurance Company	
	INSURER B: BusinessFirst Insurance Company	
	INSURER C:	
	INSURER D:	
	INSURER E:	

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			3FN0094	12/29/2024	12/29/2025	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC							GENERAL AGGREGATE \$ 2,000,000
OTHER:							PRODUCTS - COMPI/OP AGG \$ 2,000,000
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY							COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$							EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A	52112267	12/29/2024	12/29/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$ 500,000
							E.L. DISEASE - EA EMPLOYEE \$ 500,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Air Conditioning Systems or Equipment- Dealers or Distributors and Installation, Servicing or Repair

CERTIFICATE HOLDER Miami Dade County Department Regulatory and Economic Resources 11805 SW 26 Street (Coral Way), Room 207 Miami, FL 33175-2474	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 



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

ELECTRICAL CONTRACTORS' LICENSING BOARD

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

Additional Business Qualification

MONIER SANCHEZ, OSVALDO

DLD ELECTRICAL CONTRACTOR LLC
10753 NE 3RD CT
MIAMI FL 33161

LICENSE NUMBER: EC13013062

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 08/15/2024

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/17/2024

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 Hiscox Inc. 5 Concourse Parkway Suite 2150 Atlanta GA, 30328	CONTACT NAME:	
	PHONE (A/C No, Ext): (888) 202-3007	FAX (A/C, No):
E-MAIL ADDRESS: contact@hiscox.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Hiscox Insurance Company Inc	10200	
INSURED DLD ELECTRICAL CONTRACTOR LLC 10753 NE 3rd Court Miami, FL 33161	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
	INSURER G:	

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 SUBR INSD 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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		P102.989.085.1	03/06/2024	03/06/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Electrical Contractor: Osvaldo Monier Contrarator License: EC13013062

CERTIFICATE HOLDER

John Bell Construction
 4000 Sw 60th Court
 Miami, FL 33155

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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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/17/2024

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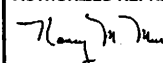
PRODUCER Automatic Data Processing Insurance Agency, Inc.		CONTACT NAME: Automatic Data Processing Insurance Agency, Inc.	
1 Adp Boulevard Roseland NJ 07068		PHONE (A/C, No., Ext): 1-800-524-7024	FAX (A/C, No):
INSURED DLD ELECTRICAL CONTRACTOR LLC		INSURER(S) AFFORDING COVERAGE	
10753 NE 3rd Court Miami FL 33161		INSURER A: Employers Assurance Company	NAIC # 25402
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 3904155 **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	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$	
A	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/A	N	EIG549963300	03/06/2024	03/06/2025	<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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Contractor License: EC13013062
Electrical Contractor: Osvaldo Monier

CERTIFICATE HOLDER	CANCELLATION
John Bell Construction Inc 4000 SW 60th Court Miami FL 33155	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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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

PORTELA, DAVID

A&C PORTELA PLUMBING, INC.
3430 SW 13TH STREET
MIAMI FL 33145

LICENSE NUMBER: CFC1428617

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 05/20/2024

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/09/2025

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PRODUCER MUTUAL INTEREST ASSURANCE 1295 CORAL WAY SUITE 3 MIAMI, FL 33145	CONTACT NAME: ESTHER VIDAL PHONE (A/C No. Ext): 305-860-2003 FAX (A/C No): 305-860-0907 E-MAIL ADDRESS: MUTUALAS@AOL.COM
	INSURER(S) AFFORDING COVERAGE INSURER A: BERKLEY ASSURANCE CO. INSURER B: AMTRUST NORTH AMERICA INSURER C: INFINITY INSURANCE CO. INSURER D: SCOTTSDALE INSURANCE CO. INSURER E: GUIDEONE NATIONAL INS. CO. INSURER F:
INSURED A & C PORTELA PLUMBING, INC 2655 SW 33RD AVENUE MIAMI, FL 33133	

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 SUBR INSR 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 <input checked="" type="checkbox"/> BI \$500 <input checked="" type="checkbox"/> PD \$500 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		CCP-1204678	01/20/2025	01/20/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 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 checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		509-82006-116-000	07/30/2024	07/23/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
D	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB OCCUR CLAIMS-MADE DED RETENTION \$		CXS4020772	03/25/2024	03/25/2025	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
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 N/A		WC-1203344	01/13/2025	01/13/2026	WC STATUTORY LIMITS 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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 PLUMBING CONTRACTOR DAVID PORTELA LIC. CFC1428617
 UNIT

CERTIFICATE HOLDER JOHN BELL CONSTRUCTION 4000 SW 60TH COURT MIAMI, FL. 33155	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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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

ELECTRICAL CONTRACTORS' LICENSING BOARD

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

Additional Business Qualification

TREGENT, GUIDO E

WISE BUILDING TECHNOLOGIES, LLC
1355 NW 93RD CT SUITE A105
DORAL FL 33172

LICENSE NUMBER: EC13010682

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 07/09/2024

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/02/2024

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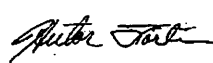
PRODUCER Fortun Insurance, LLC 365 Palermo Avenue Coral Gables FL 33134-6617	CONTACT NAME: Terri Manso PHONE (A/C, No, Ext): (305) 445-3535 E-MAIL ADDRESS: Terri.Manso@fortuninsurance.com FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE INSURER A: Hudson Specialty Insurance Company INSURER B: Bridgefield Casualty Insurance Company INSURER C: Lloyds of London INSURER D: ST. PAUL PROTECTIVE INSURANCE CO. INSURER E: Burlington Insurance Company INSURER F:
INSURED WISE BUILDING TECHNOLOGIES, LLC 1355 NW 93rd Court Suite A105 Suite A105 Doral FL 33172	

COVERAGES **CERTIFICATE NUMBER:** 2024-2025 **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	ESB-HS-GL-0001313-01	10/28/2024	10/28/2025	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 \$
D	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	BAA0890663-1	12/01/2024	12/01/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
E	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 0	Y	Y	163BE09178	11/09/2024	11/09/2025	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	N/A	196-59185	11/02/2024	11/02/2025	<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	Professional Liability			KAE0001677	11/03/2024	11/03/2025	Per Claim Limit 2,000,000 Aggregate Limit 2,000,000

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

CERTIFICATE HOLDER JOHN BELL CONSTRUCTION 4000 SW 60TH COURT MIAMI FL 33155	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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Jimmy Patronis
CHIEF FINANCIAL OFFICER
JoAnne Rice
DIVISION DIRECTOR



Bruce Gillingham
BUREAU CHIEF
Ronald Dilworth
SAFETY PROGRAM MANAGER

FLORIDA DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF STATE FIRE MARSHAL
200 EAST GAINES STREET - Tallahassee, Florida 32399-0342
Tel. 850-413-3644

CERTIFICATE OF COMPETENCY
OFFICIAL COPY

THIS CERTIFIES THAT: Giuseppe Villari
8290 NW 27th Street, Suite 605
Doral FL 33122

BUSINESS ORGANIZATION: Century Fire Inc.

Contractor II is limited to the execution of contracts requiring the ability to layout, fabricate, install, inspect, alter, repair, and service water sprinkler systems, water spray systems, foam-water sprinkler systems, foam-water spray systems, standpipes, combination standpipes and sprinkler risers, all piping that is an integral part of the system beginning at the point of service, sprinkler tank heaters, air lines, thermal systems used in connection with sprinklers, and tanks and pumps connected thereto, excluding pre-engineered systems.

Issue Date: 07/01/2024
Type: 07
Class: 12
County: Dade
License/Permit #: 851117-0001-1997
Expiration Date: 06/30/2026



Jimmy Patronis
Chief Financial Officer



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/7/2024

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 Acisure Southeast Partners Insurance Services, LLC Attn: SouthEast Platform, PO Box 1788 Grand Rapids MI 49501 License#: BR-1796553 CENTFIR-05	CONTACT NAME: _____	
	PHONE (A/C, No, Ext): 800-845-8437	FAX (A/C, No): _____
E-MAIL ADDRESS: _____		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Hudson Excess Insurance Company		14484
INSURER B: FCCI Insurance Company		10178
INSURER C: _____		_____
INSURER D: _____		_____
INSURER E: _____		_____
INSURER F: _____		_____

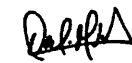
COVERAGES **CERTIFICATE NUMBER:** 220746377 **REVISION NUMBER:**

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: _____			FSL00106303	7/1/2024	7/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 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 Professional Liab. \$ Included
B	<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			CA10008583701	7/20/2024	7/20/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Florida Basic PIP \$ 10,000
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 \$ 10,000			FSLU00054803	7/1/2024	7/1/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC010008584001	7/1/2024	7/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER **CANCELLATION**

John Bell Construction 4000 SW 60th Court Miami FL 33155 USA	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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CURRENT & PAST MUNICIPAL/GOVERNMENT CLIENTS (TAB C.)

1. City of West Miami
 - a. Recreational Center
2. Miami-Dade County:
 - a. Westchester Library Health & Wellness Information Center
 - b. North Dade Library
 - c. Rhythm of the Train Relocation
3. City of Coral Gables:
 - a. Venetian Pool (2025 & 2020)
 - b. Granada Golf Course Diner
 - c. Pierce Park
 - d. Lamar Louise Curry Park
 - e. Monegro Street End Improvements
 - f. Public Meter Posts
4. Bal Harbour Village
 - a. New Operations Facility
5. City of Miami Beach
 - a. Neptune Apartments

PLEASE REFER TO FORMS 2 & 8 FOR MORE INFORMATION OF SOME OF THE PROJECTS LISTED ABOVE



OFFICIAL COMPLAINT HISTORY (TAB C.)

NOT APPLICABLE.

SUBCONTRACTED TASKS & SUBCONTRACTOR EXPERIENCE (TAB C.)

1. SHELL:

a. Amex Construction Group, Inc.

i. Antonio Arriaga, President and Director of Construction

1. Antonio Arriaga serves as the President and Director of Amex Construction Group, Inc., a Shell Contractor specializing in Concrete and Masonry Structural work for both Commercial and Large Residential projects. Arriaga has been the President of Amex Construction Group since January 2021. Prior to that, he was his father, Hector's right-hand man, assisting him run the business. It was then called Generation 2000. Antonio did this for roughly five (5) years before taking over the company and changing its name. His father, Hector Arriaga, ran Generation 2000 for over 25 years, bringing extensive new construction experience and completing numerous complex structures throughout Miami. Under Antonio Arriaga's leadership, Amex Construction Group has undertaken various notable projects, including work at the Venetian Pool in Coral Gables and the West Miami Recreational Center in West Miami, Florida, and the Health and Wellness Information Center in Westchester.

2. WINDOWS/STOREFRONT:

a. The Companies of R&S, Inc.

i. Jack and David Downey, President & Sales Manager

1. R&S Companies, established in 1954, is a third-generation, family-owned business based in Miami, Florida, specializing in impact-resistant windows and doors. With over 65 years of experience, they have been instrumental in enhancing building standards, particularly after events like Hurricane Andrew, contributing to the


safety and resilience of structures in South Florida and the Caribbean. Their product offerings include a wide range of impact-resistant windows and doors, custom entry doors, garage doors, and glass railings. R&S Companies provides services for both residential and commercial projects, as well as export services to the Caribbean. They are known for their excellent customer service, competitive pricing, and expert installation. Key personnel at R&S Companies include President Jack Downey and Sales Manager David Downey. David Downey, a graduate of Florida State University, brings extensive knowledge of the company's products and has been recognized for his professional and straightforward approach. The company operates from their showroom located at 8715 SW 129th Terrace, Miami, FL 33176, where customers can explore their product offerings and consult with certified impact specialists. R&S Companies maintains an A+ rating with the Better Business Bureau, reflecting their commitment to customer satisfaction and quality service.

3. MECHANICAL/HVAC:

a. Atlantic Air Conditioning & Refrigeration

i. Humberto Alvera, General Superintendent

1. Atlantic Air Conditioning & Refrigeration, established in 1998, is a reputable HVAC service provider based in Medley, Florida. The company specializes in air conditioning and refrigeration solutions for both residential and commercial clients, offering services such as installation, repair, and maintenance to ensure optimal performance and efficiency of HVAC systems. Their office is located at 12470 NW 124th St, Medley, FL 33178. The company is led by President Humberto Modrono, who has been instrumental in steering the company since its inception. Under his leadership, Atlantic Air Conditioning & Refrigeration has developed a reputation for providing reliable and efficient HVAC services in



the Miami area. While specific details about previous projects are not readily available, the company's longstanding presence in the industry suggests a wealth of experience in handling a diverse range of HVAC and mechanical contracting projects. Their commitment to quality service is reflected in their active status as a certified air conditioning contractor in Florida.

4. ELECTRICAL:

a. DLD Electrical Contractors, LLC.

i. Alexander Lopez, President and Director of Operations

- 1. DLD Services & Maintenance, LLC, established in 2011, is a Miami-based electrical contractor specializing in a range of electrical construction services. Operating from their principal office at 10753 NE 3rd Ct, Miami, FL 33161, the company has been serving the Miami-Dade County area for over a decade. The company is managed by Alexander B. Lopez, who holds the position of Manager. Under his leadership, DLD Services & Maintenance has developed a reputation for delivering reliable electrical solutions tailored to both residential and commercial clients. DLD's sustained presence in the industry indicates a breadth of experience in handling diverse electrical construction projects within the Miami area. In 2023, DLD Electrical Contractor LLC was established, sharing the same principal address as DLD Services & Maintenance. This expansion suggests a strategic move to broaden their service offerings and reinforce their commitment to meeting the evolving needs of their clientele. The team at DLD Services & Maintenance is composed of skilled professionals dedicated to upholding high standards of quality and safety in all their projects. Their expertise encompasses a wide array of electrical services, ensuring that both residential and commercial installations meet the stringent codes and regulations pertinent to Miami-Dade County.**

5. PLUMBING:

a. A&C Portela Plumbing, Inc.

i. David Portela, President & General Superintendent


- 1. A&C Portela Plumbing, Inc., established in 2003, is a reputable plumbing contractor based in Miami, Florida, specializing in new construction commercial projects. With over two decades of experience, the company has developed a strong portfolio of commercial plumbing installations, demonstrating expertise in both complex and large-scale projects. Under the leadership of President David Portela, the company has successfully completed numerous significant projects in the Miami area, including Government Facilities, Hospitals, Ambulatory Surgical Centers, Restaurants, and Multifamily projects. The company's commitment to quality and compliance is evident through its active status and licensure in Florida. David Portela, serving as the President and Director, has been instrumental in steering the company towards consistent growth and success in the commercial plumbing sector. A&C Portela Plumbing's extensive experience and proven track record make them a trusted partner for new construction commercial plumbing projects in the Miami area.**

6. FIRE ALARM:

a. WISE Building Technologies

i. Guido Tregent, President & General Superintendent

- 1. Wise Building Technologies, LLC, established in April 2021, is an electrical and low-voltage contracting firm based in Doral, Florida. The company specializes in providing comprehensive electrical solutions, including installations, maintenance, and low-voltage systems integration, catering to a diverse clientele in both the public and private sectors. The company's substantial project portfolio indicates a capacity to undertake large-scale and complex assignments. The firm is led by President and Founder Guido**



Tregent. Prior to establishing Wise Building Technologies, Tregent served as a Fire Alarm Division Manager, amassing over 15 years of experience in the construction industry. His extensive background encompasses various facets of electrical contracting and low-voltage systems, contributing to the company's expertise and success in delivering quality services. Wise Building Technologies' success can be attributed to its commitment to excellence, a robust project management approach, and a leadership team with deep industry knowledge. Their focus on client satisfaction and the ability to manage significant projects effectively positions them as a reliable contractor in the electrical and low-voltage sectors.

7. FIRE SPRINKLER:

a. Century Fire, Inc.

i. Felix Bravo, Vice President of Field Operations

- 1. Century Fire Protection, headquartered in Pompano, Florida, is a leading fire and life safety solutions provider serving South Florida and the Caribbean. The company offers comprehensive services, including consultation, design, installation, inspection, service, and repair of fire protection systems across various commercial markets. Their expertise spans multiple sectors, with a notable presence in multi-family and commercial projects. Leading the company is Vice President Felix Bravo, who brings over 25 years of experience in the fire protection industry. Under his leadership, Century Fire Protection has undertaken numerous commercial, residential, and government projects, establishing a reputation for quality and reliability. Century Fire Protection's commitment to excellence, combined with a seasoned leadership team and a comprehensive suite of services, positions them as a trusted partner for fire protection needs in the region.**

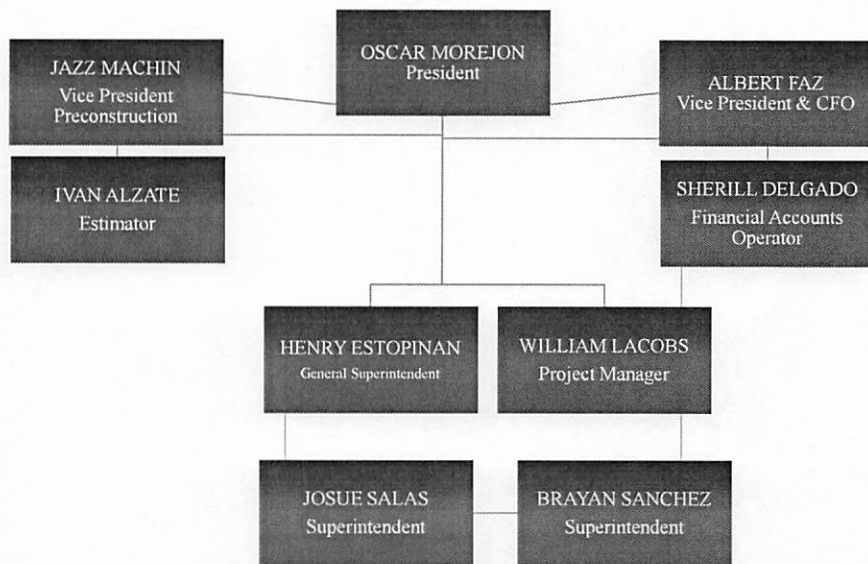
SET APART

TAB D

PROJECT TEAM/ PERSONNEL QUALIFICATIONS

JOHN BELL CONSTRUCTION INC.

PROPOSED ORGANIZATIONAL CHART



OSCAR MOREJON

President, Owner, Founder & Company Qualifier

February 2016 – Present

Certified General Contractor CGC1524390



Oscar drives the direction and strategy of the company on many different fronts. Not only is he constantly thinking of and working out ways to perform projects safer, more efficiently and effectively, but he also provides the leadership and necessary resources to offer stronger client service as well as maintain a solid company culture, brand, and future opportunities.

Previous Experience (prior to starting John Bell Construction, Inc.):


Suffolk Construction

May 2012 – May 2016

Lead Superintendent

Project: Met III (Downtown Miami, FL)

- High-rise New Construction
 - 32 Story Commercial Building
 - 28 Story Commercial Building
- 12 Story Parking Garage.
- High-end Restaurants/Retail, Finishes & Buildouts.
 - 50,000 Sq. Ft. Whole Foods
- Cold/Hot Applied Waterproofing
- First Aid/CPR Certified.

- 
- Certified Post-tension Installer & Inspector
 - OSHA 30
 - Certified Crane Flagger and Rigger

Education:

Florida International University

2008 – 2012

Bachelor of Science in Construction Management

Professional References:

1. Jeff Gouveia

- a. Company: Suffolk Construction
- b. Title: President
- c. Phone: 305-849-1224
- d. Email: jgouveia@suffolk.com

2. Francisco Oses

- a. Company: Bachiller Ironworks
- b. Title: President
- c. Phone: 786-473-3193
- d. Email: osesf@biwiron.com

3. Doug Rush

- a. Company: The Related Group
- b. Title: Director of Field Operations
- c. Phone: 954-540-5228
- d. Email: douglas.rush@relatedgroup.com

IVAN ALZATE

Estimator

March 2024 – Present



Notable Previous Experience (prior to John Bell Construction, Inc.):

I Alzateestimate Corp.

March 2022 – March 2024

President & Owner

Relevant Projects:

1. Saint Matthews Missionary Baptist Church
 - a. 10,000 SF Renovation (Framing/Drywall/Finish/Stucco/Paint)

BDI Construction, Inc.

October 2005 – October 2008

Project Manager

Relevant Projects (Education):

1. Barbara Goleman Senior High School
2. Booker T. Washington Senior High School
3. Horace Mann Middle School
4. Hialeah Gardens Senior High School
5. Miami Springs Elementary School
6. James H. Bright Elementary School

SHERILL DELGADO

Financial Accounts Operator

August 2024 – Present



Previous Experience (prior to John Bell Construction, Inc.):

Estela Living LLC **2023 – 2024**

Accounting Manager

Apex Marine LLC **2021 - 2023**

Accounting Manager

Prime Shell Inc. **2017 - 2021**

Accounting Manager

Pride Group Americas **2025 - 2017**

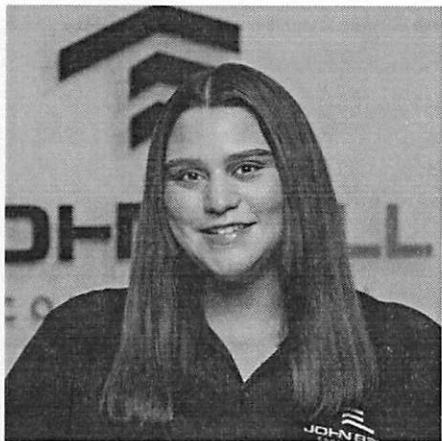
Education:

University of Phoenix

Bachelor of Science in Accounting

MARIA SEVILLA
Office Administrator

March 2022 – Present



Previous Experience (prior to John Bell Construction, Inc.):

Reggae Roofing Inc. 2020 – 2022

Operations Manager

Florida Roofing Solutions
2020

Project Estimator

Roofclaim.com 2019 - 2020

Administrator

Education:

Harvard Business School(Online) 2021

Certificate in Financial Accounting

ANTONIO ARRIAGA

Professional Summary:

Results-driven construction executive with a strong background in Shell Construction, Civil Engineering, Project Management, and Leadership. Over a decade of experience in the construction industry, specializing in shell contracting, general contracting, and business operations. Proven ability to lead teams, manage large-scale projects, and drive company growth while maintaining high standards of quality and efficiency.

Professional Experience:

Amex Construction Group |

January 2021 – Present

President & Owner

- Founded and successfully grew Amex Construction Group into a reputable construction firm, overseeing all aspects of business operations, including project management, budgeting, and client relations.
- Spearheaded the execution of commercial and residential construction projects, ensuring adherence to timelines, budgets, and quality standards.
- Built strong relationships with clients, subcontractors, and suppliers, fostering long-term partnerships and driving business development.
- Implemented operational strategies that enhanced efficiency, reduced costs, and maximized profitability.

Generation 2000 Shell Contractors |

March 2017 – January 2021

Vice President & General Superintendent

- Managed daily field operations and coordinated large-scale shell construction projects, ensuring on-time and within-budget completion.
- Led and supervised multiple teams of project managers, superintendents, and laborers to maintain high-quality workmanship and safety compliance.
- Developed and optimized project schedules, resources, and logistics to enhance overall efficiency.
- Established and maintained strong client relationships, contributing to business growth and repeat contracts.

Education:

Florida International University

Bachelor of Science in Civil Engineering |

December 2024

Skills & Expertise:

- Construction Management & Operations
- Project Scheduling & Budgeting
- Structural & Shell Construction
- Business Development & Client Relations

ANTONIO ARRIAGA

- Team Leadership & Workforce Coordination
- Contract Negotiation & Compliance
- Safety Regulations & Quality Control

Certifications & Licenses

- General Contractor License
- OSHA Certification

Languages:

- English & Spanish

JOHN THOMAS DOWNEY

PROFESSIONAL SUMMARY

A seasoned business owner and general contractor with extensive experience in the construction and distribution industries. Proven track record in leadership, project management, and financial oversight. Strong background in accounting and business administration, with a commitment to community involvement and civic engagement.

EDUCATION

Florida International University – Miami, FL
Graduate Studies in Business Administration

The Ohio State University – Columbus, OH
Bachelor of Science in Accounting

Campion Jesuit High School – Lima, OH

PROFESSIONAL EXPERIENCE

Owner & President

The Companies of R & S Inc. – Miami, FL | 1989–Present

- Lead and manage all facets of company operations, including construction, distribution, and financial oversight.
- Responsible for business development, client relations, and strategic planning to ensure company growth.
- Licensed General Contractor (since 1980), with hands-on experience in all phases of construction projects specializing in windows and doors.
- Increased company revenue and expanded service offerings within the industry.
- Opened up R&S Impact Bahamas in 2021 with an office/showroom in Nassau as second location.

Financial Institution – Miami, FL | 1979–1981

- Worked for two years while attending graduate school in Business Administration at Florida International University.
- Gained foundational experience in financial services, accounting, and business management.

PROFESSIONAL AFFILIATIONS & COMMUNITY INVOLVEMENT

- **Executive Association of Greater Miami** – Past Board Member
- **Florida Bar Fee Arbitration Committee** – Past Member
- **Riviera Country Club** – Member
- **Hound Ears Club** – Member
- **Building Officials Association of Florida** – Past Member
- **Advisory Board** – Member of several manufacturers' advisory boards
- **Finance Committee** – St. Louis Church
- **Finance Committee** – Morning star renewal center

HUMBERTO ALVERA

PROFESSIONAL SUMMARY:

Highly experienced General Superintendent with over two decades of expertise in mechanical and HVAC contracting. Proven track record of managing large-scale commercial and residential HVAC projects, ensuring quality, safety, and efficiency. Skilled in overseeing field operations, coordinating teams, and maintaining strong relationships with clients and subcontractors. Adept at problem-solving and delivering projects on time and within budget.

PROFESSIONAL EXPERIENCE:

Atlantic Air Conditioning and Refrigeration | Miami, FL | 2000 – Present

General Superintendent

- Oversee daily field operations for HVAC and mechanical contracting projects across commercial, residential, and industrial sectors.
- Manage and coordinate installation crews, subcontractors, and technicians to ensure quality workmanship and project efficiency.
- Ensure compliance with all safety regulations, building codes, and project specifications.
- Develop and implement project schedules, optimizing workflow and resource allocation to meet deadlines and budget requirements.
- Serve as the primary liaison between project managers, engineers, and field personnel, ensuring seamless communication and problem resolution.
- Maintain strong client relationships, addressing concerns and ensuring satisfaction with project execution.

SKILLS & EXPERTISE:

- HVAC & Mechanical Systems Installation
- Field Operations & Team Management
- Project Scheduling & Budgeting
- Safety Compliance & Quality Control
- Blueprint & Technical Drawing Interpretation
- Client & Vendor Relations
- Problem-Solving & Troubleshooting

ALEXANDER LOPEZ

Professional Summary:

Seasoned electrical contractor and business leader with nearly two decades of experience in the electrical industry. Proven expertise in project management, field operations, and business development. Strong background in overseeing large-scale electrical installations, ensuring safety, quality, and efficiency. Adept at leading teams, optimizing operations, and maintaining excellent client and subcontractor relationships.

Professional Experience:

DLD Electrical Contractor LLC | Miami, FL |

February 2011 – Present

President

- Founded and expanded DLD Services and Maintenance, rebranding to DLD Electrical Contractor LLC in June 2023 to better reflect the company's specialized electrical services.
- Oversee all company operations, including project management, budgeting, and workforce coordination.
- Manage and execute electrical installations, maintenance, and service contracts for commercial, residential, and industrial clients.
- Build and maintain strong relationships with clients, suppliers, and general contractors to drive business growth and reputation.
- Ensure compliance with electrical codes, safety regulations, and industry standards.
- Lead a team of electricians and field staff, providing guidance, training, and support for project success.

Novoa Electrical Contractors | Miami, FL |

September 2006 – February 2011

Superintendent

- Supervised field operations for electrical projects, ensuring timely completion and adherence to quality standards.
- Coordinated with project managers, electricians, and subcontractors to streamline workflows and improve efficiency.
- Conducted site inspections to ensure compliance with safety regulations and electrical codes.
- Assisted in project planning, material procurement, and workforce scheduling to meet project deadlines.
- Served as a key point of contact between field crews and upper management, ensuring seamless communication and issue resolution.

Skills & Expertise:

- Electrical System Installation & Maintenance
- Project Management & Field Operations
- Business Development & Client Relations

ALEXANDER LOPEZ

- Safety Compliance & Quality Assurance
- Team Leadership & Workforce Coordination
- Budgeting & Cost Control
- Blueprint Reading & Technical Drawings

Certifications & Licenses:

- Licensed Electrical Contractor

DAVID PORTELA

Professional Summary:

Experienced President and Director of Field Operations with over a decade of leadership in the plumbing industry. Expert in managing large-scale residential, commercial, and industrial plumbing projects, ensuring efficiency, quality, and compliance. Proven ability to lead teams, optimize field operations, and build lasting relationships with clients and subcontractors. Committed to delivering top-tier plumbing solutions while maintaining safety and industry standards.

Professional Experience:

A&C Portella Plumbing, Inc. | Miami, FL |

January 2009 – Present

President & Director of Field Operations

- Oversee all aspects of company operations, including project management, budgeting, and workforce coordination.
- Direct field operations, ensuring efficient scheduling, resource allocation, and high-quality workmanship.
- Develop and maintain strong relationships with clients, general contractors, and suppliers to drive business growth and project success.
- Implement safety protocols and ensure compliance with local and national plumbing codes and regulations.
- Lead and mentor field teams, fostering a culture of professionalism, teamwork, and continuous improvement.
- Manage large-scale plumbing installations, repairs, and maintenance projects across various sectors, including commercial and residential developments.
- Oversee procurement of materials and equipment, ensuring cost-effective and timely project execution.

Skills & Expertise:

- Plumbing System Design & Installation
- Field Operations & Workforce Management
- Project Budgeting & Cost Control
- Safety Compliance & Quality Assurance
- Blueprint Reading & Technical Drawings
- Client Relations & Business Development
- Problem-Solving & Troubleshooting

Certifications & Licenses:

- Certified Plumbing Contractor
- OSHA 30

OBJECTIVE

To provide relevant experience and expertise in fire alarm, building automation, and security systems to support Wise Building Technologies' qualification for federal projects with the General Services Administration (GSA). Specializing in design, service, installation, and project management, with a focus on compliance with NFPA codes, local regulations, and industry best practices.

PROFESSIONAL EXPERIENCE

Founder & CEO

WISE Building Technologies, Doral, FL — April 2020 – Present

- Direct all aspects of company operations, including contract management, business performance, and compliance with industry codes and local AHJ regulations, ensuring adherence to NFPA standards, UL listings, and other applicable codes.
- Oversee the Engineering, Operations, Sales, Service, and Accounting departments, ensuring effective cross-functional team management and strategic business development.
- Implement sales, marketing, and growth strategies for the design, installation, and service of fire alarm, security, and building automation systems, focusing on federal, commercial, and institutional projects.
- Maintain a strong emphasis on compliance with NFPA 72 (National Fire Alarm and Signaling Code), NFPA 101 (Life Safety Code), and NFPA 70 (National Electrical Code) while navigating local permitting and inspection processes.
- Ensure that all staff and technicians receive continuous education and certifications for emerging technologies, safety standards, and industry changes.
- Lead efforts in acquiring new technology partnerships and certifications, with a focus on smart building integration and advanced fire protection solutions.

General Manager & Fire Alarm Division Manager

Empire Electric / Empire Fire Safety, Miami, FL — November 2005 – April 2020

- Progressed from electrician helper to Fire Alarm Division Manager by overseeing fire alarm system sales, design, and project execution for new construction, retrofits, and service contracts.
- Managed the end-to-end design and installation of fire alarm systems, ensuring compliance with NFPA 72, UL certification processes, and local AHJ approvals.
- Directed the AutoCAD engineering team in developing compliant system designs, including device layout, wiring schematics, and equipment specifications.

- Supervised technicians, engineers, and project managers, ensuring service excellence, on-time project delivery, and adherence to NFPA and UL standards.
- Coordinated with manufacturers to establish long-term distribution lines, increasing sales and enhancing service offerings in fire alarms, security systems, CCTV, and access control.
- Managed relationships with clients, general contractors, and subcontractors to streamline project management, while ensuring compliance with safety standards and regulatory requirements across all trades.
- Conducted annual UL audits and certification processes for fire alarm and fire sprinkler systems, maintaining compliance with all applicable regulatory standards.

TECHNICAL EXPERTISE & INDUSTRY STANDARDS

- **Fire Alarm Systems:** Extensive knowledge of NFPA 72, UL 864 standards for control units, fire alarm testing and maintenance protocols, system design, and commissioning.
- **Building Automation:** Integration of fire alarm systems with building management systems (BMS), compliance with ASHRAE 135 (BACnet) standards for smart building controls.
- **Security Systems:** Design, installation, and maintenance of CCTV, access control, and intrusion detection systems, with experience in NFPA 731 (Standard for the Installation of Electronic Premises Security Systems).
- **Electrical Contracting:** Expertise in electrical installation, repair, and maintenance with adherence to NFPA 70 (National Electrical Code) and IEEE standards for safety and reliability.
- **Fire Protection and Stopping Systems:** Certified in installation, design, and maintenance of fire protection systems, including compliance with UL standards for firestopping and the International Building Code (IBC).
- **Safety Compliance:** OSHA 10 & 30 certifications, extensive knowledge of OSHA 1910 and OSHA 1926 standards for construction and general industry safety practices.
- **Project Management:** Skilled in resource allocation, budgeting, and timeline management for large-scale projects, ensuring compliance with regulatory requirements and project specifications.
- **Technical Training & Certification:** Oversight of technician training for fire alarm system installations, security systems, and OSHA-compliant safety practices, ensuring ongoing professional development and adherence to industry standards.

EDUCATION & CERTIFICATIONS

- Unlimited Electrical Contracting License / Master Electrician (State of Florida) – 2020
- Certified by the Federal Communications Commission (FCC) – GROL Licensed, 2022
- NICET Level IV in Fire Protection Engineering Technology (Fire Alarm Systems) –

2018

- NICET Level II in Fire Protection Engineering Technology (Inspections and Testing) – 2016
- Technical Career in Telecommunication Technologies (Completed abroad) – 2005
- Factory Trained and Certified by Fire Alarm & Security System Manufacturers: Faraday, FireLite, Honeywell, Harrington Signal, Mircom, Siemens, Kantech, Secutron
- Certified by Hilti and Tremco for Fire Protection and Fire Stopping Systems
- Member of the FFMIA (Florida Fire Marshals & Inspectors Association)
- Member of the SAME (Society of American Military Engineers)
- Certified in Building Automation and Lighting Control Systems by HDL Buspro and Lutron
- Certified OSHA 10 & 30 (Construction Safety & Health Safety Training) – Since 2011
- Certified for Aerial Lift & Forklift Operation – Since 2013
- State of Florida Public Notary
- Project Management Training Completed

KEY SKILLS

- Fire Alarm System Design, Installation, and Compliance (NFPA 72, UL 864, NFPA 101)
- Security System Design and Integration (CCTV, Access Control, NFPA 731)
- Building Automation and Lighting Control Systems (BACnet, ASHRAE 135, BMS Integration)
- Electrical Contracting (NFPA 70, IEEE Standards, Commercial/Residential Projects)
- Regulatory Compliance (UL Certifications, Local AHJ Requirements, NFPA Codes)
- Team Leadership and Training (Technical Certifications, Safety Training, OSHA)
- Sales, Marketing, and Business Development (Growth Strategy, Client Relations, Technology Partnerships)
- Project Management (Budgeting, Resource Allocation, Timeline Management, Cross-Disciplinary Coordination)

Giuseppe Villari

EDUCATION:

George Brown College - Technical training and certification as a fire protection technician and installation professional.

WORK HISTORY:

Giuseppe (Joe) Villari's career in fire protection began in 1973 in Toronto, Canada. Mr. Villari served as a union pipe fitter, fire protection specialist, foreman/superintendent and member of the Canadian Fire Safety Association (CFSA) for many years while living and working in the greater Toronto area.

In 1994 Mr. Villari relocated from Canada to the St. Petersburg, Florida area, where he was initially employed by FireMaster (a Johnson Controls company) as a Division Manager for several years. Mr. Villari became licensed independently in the United States in 1997 and founded Century Fire Inc.

For over 20 years, Century Fire Inc. has operated in the fire protection industry in Florida, with a focus and concentration in the greater Miami-Dade area. The company provides both commercial and residential installation of new fire protection/suppression systems. The company's full spectrum of services also includes fire protection and life safety inspection services, as well as retrofit and repair/maintenance services.

A list of Mr. Villari's employers within the fire protection industry is listed below:

Urban Mechanical - 1973 – 1978

L.F. Wilson Fire Protection – 1978 – 1983

Niagara Mechanical – 1983-1991

Pioneer Fire Protection – 1991-1994

FireMaster (a Johnson Controls company) – 1994-1997





Century Fire Inc. – 1997 – Current

PROFESSIONAL LICENSES & AFFILIATIONS:

- Florida Department of Financial Services – Division of State Fire Marshall
 - o Fire Protection License #8511177-0001-1997
- National Fire Protection Association (NFPA) – Member

APPROACH TO EMPLOYEE TRAINING, MANAGEMENT, & STAFFING (TAB D.)

At John Bell Construction, we take great pride in our ability to efficiently mobilize and execute projects with precision, ensuring that our clients receive the highest level of service and quality. A key component of this success is our proactive approach to staffing, training, and management. Our in-house recruiting department plays a vital role in assembling a top-tier Project Team. We are constantly sourcing and interviewing for roles such as Superintendents, Project Managers, Assistant Project Managers, Project Engineers, and Estimators - the heart and soul of our operations. By maintaining an ongoing pipeline of top talent, we can swiftly fill both growth and replacement positions without any disruption to our projects. This ensures that every project, including the Wellness Center, is staffed with the top professionals in the industry, allowing us to meet timelines and deliver exceptional results. Additionally, when it comes to finding and hiring Subcontractors, this is not an issue for us. To begin with, we have a long and strong Database of active and prequalified Subcontractors for every trade. This Database has been a work in progress for nine (9) years and is updated on a weekly basis. At the time of Estimating, we receive at least 2-3 (sometimes 3-5) bids per trade. Therefore, having a secondary Subcontractor in line in the event a primary Subcontractor needs to be replaced or cannot perform the work will not be an issue. This is in addition to the numerous companies that solicit our business daily. Beyond staffing, our commitment to Training is unwavering. From a Safety perspective, we conduct regular safety training sessions onsite and at the office to ensure that all work is performed with the utmost care, keeping both our team and the community safe. Although we pride ourselves on the speed in which we build, efficiency is multi-faceted. It's also about doing things the right way, the first time, without compromising safety or quality. Another periodic training that is important for our team is that of Procore. This Construction Management Software is pivotal to our projects' success, and we see the importance in staying abreast of any technology tool that can help us do our job and service our clients better. To maintain clear communication and seamless execution, we hold weekly staff meetings, where we review every single active project in detail. These meetings allow us to assess open items, project status,



schedule, procurement, and any challenges that may have risen, ensuring that nothing falls through the cracks. By addressing potential issues early and keeping every team member aligned, we can proactively manage risks and maintain project momentum. Additionally, what sets John Bell Construction apart is the active involvement of our executive team in the day-to-day operations of every project. We never lose sight of the relationships we build with our clients, and our leadership team remains hands-on to ensure that all expectations are not only met but surpassed. Our relationship with the Town of Golden Beach is of the utmost importance to us, and we are committed to delivering a Wellness Center that reflects our shared vision for excellence. Through strategic recruitment, comprehensive training, structured project oversight, and engaged leadership, John Bell Construction continues to uphold its reputation as a trusted and reliable contractor. We look forward to bringing the Town of Golden Beach's Wellness Center to life with the same level of dedication and excellence that defines every project we undertake.

TAB E

TECHNICAL
APPROACH/
IMPLEMENTATION
SCHEDULE

TECHNICAL APPROACH PROJECT DEVELOPMENT & CONSTRUCTION

Please consider this narrative describing our (John Bell Construction, Inc.) approach towards the development and construction of the Golden Beach Wellness Center project. We will describe how this project will be implemented from a schedule, logistics, and sequencing perspective, based on our experience performing other similar projects.

After the Town of Golden Beach provides the Official Award Notice to John Bell Construction, Inc. and a contract is executed, we plan on starting as much procurement as possible proactively due to long lead items as well as long lead procurement/submittal processes. For example, a couple trades that fall under this category are Windows/Storefront and Elevator scope. Therefore, these trades will receive an award and a Subcontract Agreement from us right away after we sign a contract with the Town of Golden Beach. Following these Subcontract Agreements, we'll release Shell, Electrical, Mechanical, Plumbing, and Fire Protection.



Next, we will mobilize and execute all processes required therein, for instance, installation of our temporary facilities, jobsite signage – Safety, Security, Proprietary, etc.

Next, we will proceed with Auger Cast Piles installation for the construction of the Wellness Center. Immediately after the completion of Auger Cast Piles, the Shell (Structure) scope of work (from foundations to top-out) can commence. Soon after Shell commencement, underground Electrical and Plumbing can be coordinated and began.

Next, as soon as the Shell is complete, we will begin the installation of the Elevator. We will coordinate and ensure all material has been delivered to the site, the hoist way is set with rough openings, inserts have been installed, machine hoist beam is at the top of the shaft, and all fall protection is in place. This scope also has a long procurement timeline; therefore, Elevator procurement will begin back at the time of our contract execution with the Town of Golden Beach.

After the completion of the Shell, all the way through top-out, Roofing and Windows/Storefront scope will commence to close the building envelope, working concurrently. As soon as the building is dried in with a Roof and Windows/Exterior Doors, we can start interior (as well as Exterior) Framing together with FRP and Stucco. As soon as Stucco finishes, we will apply one (1) coat of Hot Stucco Primer. As soon as interior Framing is complete, Mechanical (HVAC), Electrical, Fire Alarm, Fire Sprinkler, and Plumbing rough will begin. MEP's will be working currently with the Elevator company, Stucco, Miscellaneous Metals, and Exterior Painting.

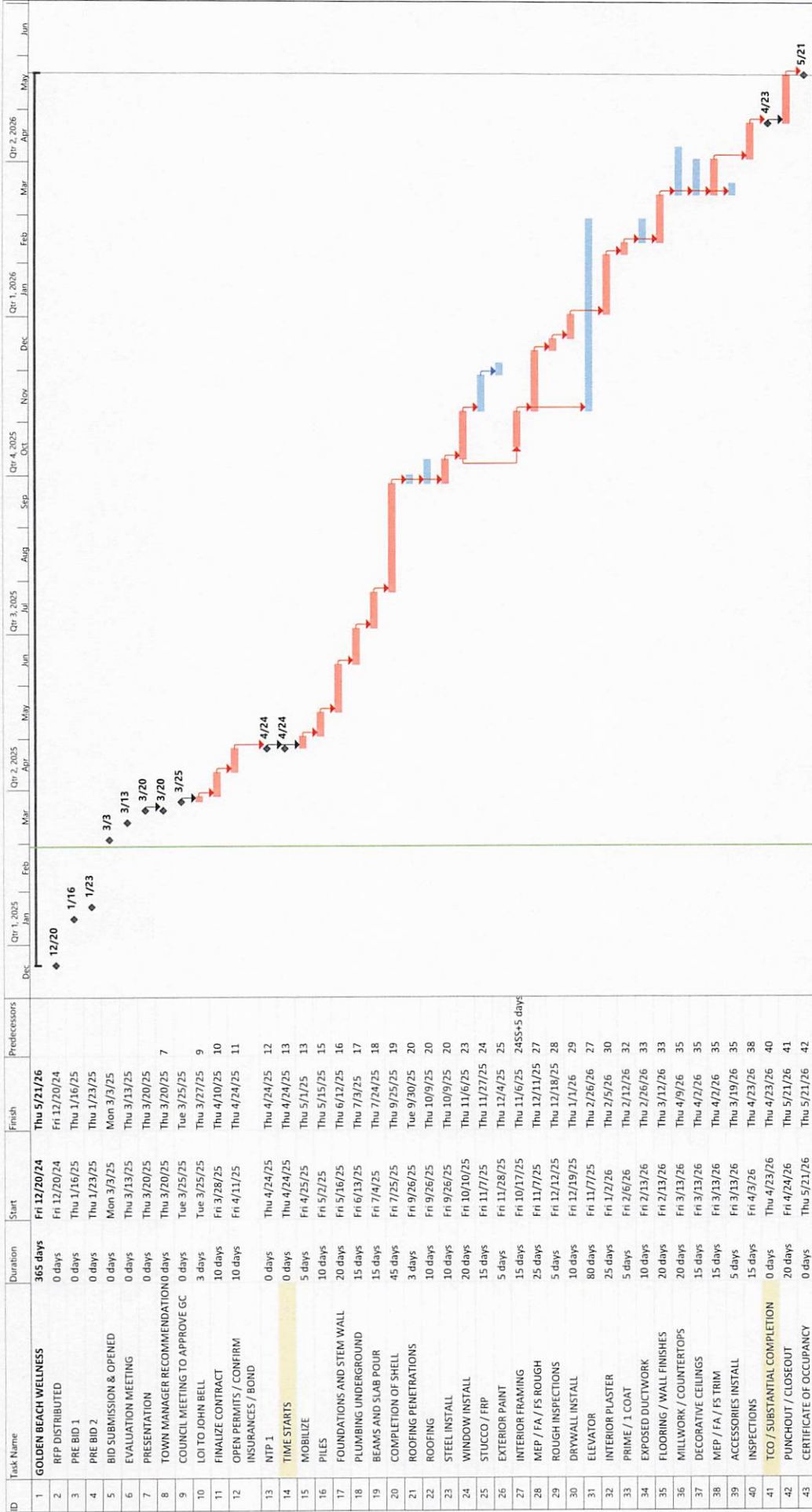
Next, when MEP rough and Inspections are complete, we can begin installation of Insulation, Drywall, and interior Plaster Finish. As soon as the interior Plaster Finish is complete, we can begin interior Flooring. To protect the interior Flooring, as soon as all Terrazzo is cured and



finished, we will protect it with Ram Board for the remainder of the project. The goal is to perform all exterior Flooring towards the end of the project to avoid damage to any Terrazzo.

After the Flooring has been protected, we can begin Millwork/Cabinetry, Interior Doors, and Acoustical Ceiling Tile/Grid. This will allow MEPs to complete their work within the Acoustical Ceiling area. As soon as Interior Doors and Trim are installed, interior Prime and Paint can commence. When interior Painting is complete, MEP's can perform their Trim (finish work) and Window Shades can be installed.

Lastly, we will close out all Final Inspections for the Temporary Certificate of Occupancy and Substantial Completion.



TOWN OF GOLDEN BEACH WELLNESS CENTER BASELINE



TAB F

FINANCIAL
STRENGTH

FINANCIAL STRENGTH

We recognize that financial strength is a critical factor in ensuring the successful execution of any project. Over the past nine years, we have built a solid financial foundation that allows us to confidently take on large-scale projects without any disruption or financial concern. One of the strongest indicators of our financial stability is the fact that, despite being approved for a healthy line of credit, we have never had to tap into it. This demonstrates our disciplined financial management and ability to sustain operations, payroll, and project costs without relying on external financing. Additionally, our bonding limits and capacities have consistently increased year over year, reflecting the confidence and trust placed in us by our bonding partners. Today, we proudly maintain bonding capacities of over \$20 million for single projects and over \$40 million in aggregate, allowing us to take on and successfully execute large, complex projects. Our financial strength is further reinforced by our impeccable track record. Over the past seven years, we have bonded multiple multi-million-dollar projects without a single issue. This speaks to our reliability, fiscal responsibility, and ability to deliver on our commitments. Furthermore, we run a weekly payroll and have never missed a payroll cycle, ensuring that our workforce remains motivated and committed to excellence. Likewise, we have never missed payment on any bill, maintaining strong relationships with our vendors, subcontractors, and financial partners. For the Town of Golden Beach Wellness Center, our financial position provides assurance that we have the resources, stability, and experience to complete the project seamlessly. We have the capacity to mobilize quickly, sustain operations efficiently, and ensure that all project obligations are met on time and within budget. Should any additional documentation be required, we are fully prepared to provide the necessary financial records to demonstrate our unwavering financial stability and strength. John Bell Construction is not just a General Contractor, we are a trusted partner with a proven track record of financial responsibility, operational excellence, and project success. We look forward to the opportunity to bring our expertise and financial strength to the Town of Golden Beach Wellness Center project.



January 15, 2025

RE: John Bell Construction, Inc

To Whom It May Concern:

John Bell Construction, Inc is bonded by West Bend Mutual Insurance Company of West Bend, WI. West Bend Mutual Insurance Company is listed on the U.S. Treasury Department's Listing of Approved Sureties (Department Circular 570) and is rated A, Financial Size Class 12 by A.M. Best.

The contractor's current bonding limits are \$20,000,000 single job, \$40,000,000 aggregate work program. These limits are subject to our annual underwriting review and should not necessarily be considered as a maximum expression of our commitment to the account.

If John Bell Construction, Inc were to be awarded a contract that falls within the above parameters, West Bend Mutual Insurance Company will favorably consider providing performance and payment bonds subject to a satisfactory review of the construction agreement.

This letter is not an assumption of liability nor is it a bond. Any arrangement for bonds is a matter between John Bell Construction, Inc and West Bend Mutual Insurance Company. We assume no liability to you or to third parties if for any reason we do not supply said bond or bonds.

Sincerely,

A handwritten signature in cursive script that reads "DJ Read".

DJ Read
Contract Bond UW II

SET APART

TAB G

INSURANCE

JOHN BELL CONSTRUCTION INC.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/12/2025

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 GGA Insurance & Bonds 10689 N. Kendall Drive Suite 208 Miami FL 33176	CONTACT NAME: Benny Cabrera PHONE (A/C, No, Ext): (305) 630-4777 E-MAIL ADDRESS: bcabrera@ggaig.com	FAX (A/C, No): (305) 279-3022
	INSURER(S) AFFORDING COVERAGE	
INSURED JOHN BELL CONSTRUCTION, INC. 4000 SW 60TH COURT Miami FL 33155	INSURER A: Berkley Assurance Company	NAIC # 39462
	INSURER B: Infinity Assurance Insurance Company	39497
	INSURER C: James River Insurance Company	12203
	INSURER D: FCCI Insurance Company	10178
	INSURER E: Certain Underwriters at Lloyds, London	N/A
	INSURER F:	

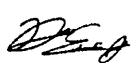
COVERAGES **CERTIFICATE NUMBER:** CL2410223357 **REVISION NUMBER:**

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 SUBR (INSR) 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 <input checked="" type="checkbox"/> XCU <input checked="" type="checkbox"/> \$2,500 BI/PD Deductible Per Occ. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y	Y	VUMA0275552	05/20/2024	05/20/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>	Y	Y	50016055701	10/23/2024	10/23/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	00133197-2	05/20/2024	05/20/2025	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	Y	WC0100092637	05/20/2024	05/20/2025
E	Contractor's Pollution Liability	Y	Y	CPL00697001	10/10/2024	10/10/2025	Each Occurrence \$ 1,000,000 Aggregate \$ 1,000,000 Deductible \$ 10,000

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

Re: RFP#2024-002

CERTIFICATE HOLDER Town of Golden Beach 1 Golden Beach Drive Golden Beach FL 33160	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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SET APART

TAB H

BID BOND

JOHN BELL CONSTRUCTION INC.

**FORM 12
 BID SECURITY/BID BOND**

KNOW ALL MEN BY THESE PRESENTS, that we, John Bell Construction, Inc

as Principal and Proposer, and West Bend Insurance Company

Hereinafter called Surety, are held and firmly bound unto the Town of Golden Beach, a municipality within the State of Florida, and represented by its Town Manager, in the sum of two (2%) of the proposed annual base bid amount of: \$ Two Percent of Amount Bid (Written Dollar Amount) dollars (\$ 2% of Amount Bid) lawful money of the United States of America, for the payment of which well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally by these presents.

WHEREAS, the Principal contemplates submitting or has submitted, a bid to the Town of Golden Beach for the furnishing of all labor, materials (except those to be specifically furnished by the Town), equipment, machinery, tools, apparatus, means of transportation for, and the performance of the work covered in the bid and solicitation, entitled:

**Request for Proposals No. 2024-002
 Construction of Wellness Center**

WHEREAS, it was a condition precedent to the submission of said bid that a cashier's check, certified check, or bid bond in the amount of 5% of the proposal amount be submitted with said bid as a guarantee that the Proposer would, if awarded the Contract, enter into a written Contract with the Town for the performance of said Contract, within ten (10) consecutive calendar days after written notice having been given of the award of the Contract.

NOW, THEREFORE, the conditions of this obligation are such that if the Principal within ten (10) consecutive calendar days after written notice of such acceptance, enters into a written Contract with the Town of Golden Beach and furnishes the Performance Bond, in an amount equal to one hundred percent of the annual base bid amount, satisfactory to the Town, then this obligation shall be void; otherwise the sum herein stated shall be due and payable to the Town of Golden Beach and the Surety herein agrees to pay said sum immediately upon demand of the Town in good and lawful money of the United States of America, as liquidated damages for failure thereof of said Principal.

IN WITNESS WHEREOF, the said John Bell Construction, Inc as Principal herein, has caused these presents to be signed in its name by its _____

_____ and attested by its _____

_____ under its corporate seal, and the said West Bend Insurance Company

_____ as Surety herein, has caused these presents to be signed in its name by its _____

_____ Attorney in Fact and attested in its

name by its _____ Secretary _____ under its

corporate seal, this 24th day of February, 2025.

In the presence of:

[Signature]
 Witness #1 Print Name: Jazz Machin
[Signature]
 Witness #2 Print Name: ALBERT FAZ

Signed, sealed and delivered by:

John Bell Construction, Inc
 Print Name: Oscar Morejón
 Title: President
 Principal/Firm: [Signature]

In the presence of:

[Signature]
 Witness #1 Print Name: Kacie McCrorey
[Signature]
 Witness #2 Print Name: Julie Messbarger

Signed, sealed and delivered by:

[Signature]
 Attorney-in-Fact: David S. Salavitch
 (Power of Attorney to be attached)
[Signature] Joshua Roberts
 Resident Agent





Bond No. n/a

POWER OF ATTORNEY

Know all men by these Presents, that West Bend Insurance Company (formerly known as West Bend Mutual Insurance Company prior to 1/1/2024), a corporation having its principal office in the City of West Bend, Wisconsin does make, constitute and appoint:

Robert L Cox II, Rodney Demaree, Kathryn E Johnson, Luke Lambert, Kacee McCrorey, Julie Messbarger, Joshua Roberts, David S Salavitch

lawful Attorney(s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety and as its act and deed any and all bonds, undertakings and contracts of suretyship, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed in amount the sum of: Thirty Million Dollars (\$30,000,000)

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of West Bend Insurance Company by unanimous consent resolution effective the 1st day of January 2024.

Appointment of Attorney-In-Fact. The president or any vice president, or any other officer of West Bend Insurance Company may appoint by written certificate Attorneys-In-Fact to act on behalf of the company in the execution of and attesting of bonds and undertakings and other written obligatory instruments of like nature. The signature of any officer authorized hereby and the corporate seal may be affixed by facsimile to any such power of attorney or to any certificate relating therefore and any such power of attorney or certificate bearing such facsimile signatures or facsimile seal shall be valid and binding upon the company, and any such power so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the company in the future with respect to any bond or undertaking or other writing obligatory in nature to which it is attached. Any such appointment may be revoked, for cause, or without cause, by any said officer at any time.

Any reference to West Bend Mutual Insurance Company in any Bond and all continuations thereof shall be considered a reference to West Bend Insurance Company.

In witness whereof, West Bend Insurance Company has caused these presents to be signed by its president undersigned and its corporate seal to be hereto duly attested by its secretary this 1st day of January 2024.

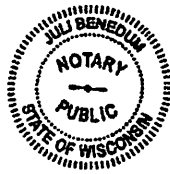
Attest Christopher C. Zwygart
Christopher C. Zwygart
Secretary



Robert J. Jacques
Robert J. Jacques
President

State of Wisconsin
County of Washington

On the 1st day of January 2024, before me personally came Robert Jacques, to me known being by duly sworn, did depose and say that he is the President of West Bend Insurance Company, the corporation described in and which executed the above instrument; that he knows the seal of the said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the board of directors of said corporation and that he signed his name thereto by like order.



Julie Benedum
Julie Benedum
Lead Corporate Attorney
Notary Public, Washington Co., WI
My Commission is Permanent

The undersigned, duly elected to the office stated below, now the incumbent in West Bend Insurance Company, a Wisconsin corporation authorized to make this certificate, Do Hereby Certify that the foregoing attached Power of Attorney remains in full force effect and has not been revoked and that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force.

Signed and sealed at West Bend, Wisconsin this 24th day of February, 2025



Christopher C. Zwygart
Christopher C. Zwygart
Secretary

SET APART

TAB I
PRICE
PROPOSAL

**FORM 11
PRICE PROPOSAL**

Project Name: RFP 2024-002 – Construction of Wellness Center Project

Proposer: John Bell Construction, Inc.

Proposer's Address: 4000 SW 60th Ct., Miami, FL 33155

Date: March 3rd, 2025

1. Price Proposal

The undersigned, having examined the RFP Documents and the Site of the proposed Work, hereby proposes to furnish all labor, materials, and equipment required to complete the Project in accordance with the Contract Documents for the sum of:

Total Amount: (Written in Words: [Five Million, Two Hundred Twenty-Nine Thousand, Five Hundred Thirteen Dollars and Five Cents])

1	MECHANICAL			
2	PLUMBING			
3	ELECTRICAL			
4	CONCRETE			
5	PAINTING			
6	ROOFING			
7	THEATRE / MUSIC	LS	\$1,000,000	\$1,000,000
8	OPENING	LF	\$20,000	\$20,000
9	BRICK	LS	\$10,000	\$10,000
10	CONCRETE	LS	\$10,000	\$10,000
11	EQUIPMENT			
12	FURNISHING			
14	CONCRETE / SYSTEM / E. FLOOR	LS	\$100,000	\$100,000
22	PLUMBING	LS	\$10,000	\$10,000
23	HYDRO MECHANICAL	LS	\$10,000	\$10,000
26	ELECTRICAL	LS	\$10,000	\$10,000
	OTHER ITEMS NOT LISTED	LS	\$10,000	\$10,000
	OVERHEAD / INSURANCE	LS	\$10,000	\$10,000
	CONTINGENCY	LS	\$10,000	\$10,000
	TOTAL AMOUNT		\$2,295,005	\$2,295,005

Town of Gold Beach - RFP NO. 2024-002
Page 55

Estimate Template attached to the RFP as Attachment E, which provides supporting quantity information and cost breakdowns as outlined above.

ADDITIONAL
INFORMATION/
SPECIAL

FORM 1
PROPOSAL CHECKLIST

- Form 1: Proposal Checklist
- Form 2: Company Qualifications Questionnaire
- Form 3: Certificate of Authority (Complete one of the two forms as applicable)
 - Form 3A: Certificate of Authority (for Corporations or Partnerships)
 - Form 3B: Certificate of Authority (for Individuals)
- Form 4: Acknowledgment of Addenda
- Form 5: Single Execution Affidavit
- Form 6: Dispute Disclosure
- Form 7: Key Staff and Proposed Subcontractors
- Form 8: Reference Letters
- Form 9: E-Verify Affidavit
- Form 10: IRS Form W-9
- Form 11: Price Proposal
- Form 12: Bid Security/Bid Bond (unless waived)

Firm: John Bell Construction, Inc.

Date: 03/03/2025

Authorized Signature:  _____

Print or Type Name: Oscar Morejon

Title: President

FORM 2
COMPANY QUALIFICATIONS QUESTIONNAIRE

Please complete this Company Qualifications Questionnaire. By completing this form and submitting a response to the solicitation, you certify that any and all information contained in the Proposal is true, that your response to the RFP is made without prior understanding, agreement, or connections with any corporation, firm or person submitting a response to the RFP for the same materials, supplies, equipment, or services, is in all respects fair and without collusion or fraud, that you agree to abide by all terms and conditions of the solicitation, and certify that you are authorized to sign for the Proposer's firm.

Some responses may require the inclusion of separate attachments. Separate attachments should be as concise as possible, while including the requested information. In no event should the total page count of all attachments to this Form exceed five (5) pages. Some information may not be applicable; in such instances, please insert "N/A".

Firm Name John Bell Construction, Inc.

4000 SW 60th Ct., Miami, FL 33155
Principal Business Address

305-458-5666 N/A
Telephone Number Facsimile Number

oscar@johnbellconstruction.com
Email Address

81-1551021 CGC1524390
Federal I.D. No. or Social Security Number Municipal Business Tax/Occupational License No.

FIRM HISTORY AND INFORMATION

How many years has the firm has been in business under its current name and ownership? Nine (9)

Please identify the Firm's document number with the Florida Division of Corporations and date the Firm registered/filed to conduct business in the State of Florida:

P16000016299 02/18/2016
Document Number Date Filed

Please identify the Firm's category with the Florida Department of Business Professional Regulation (DBPR), DBPR license number, and date licensed by DBPR:

Certified General Contractor CGC1524390 06/20/2016
Category License No. Date Licensed

Please indicate the type of entity form of the Firm (if other, please describe):

Individual Partnership Corporation LLC LLP Other _____

Please identify the Firm's primary business: General Contractor

Please identify the number of continuous years your Firm has performed its primary business: Nine (9)

Please list all professional licenses and certifications held by the Firm, its Qualifier/Principal, and any Key Staff, including any active certifications of small, minority, or disadvantaged business enterprise, and the name of the entity that issued the license or certification:

License/Certification Type	Name of Entity Issuing License or Certification	License No.	License Issuance Date
Small Business Enterprise	Miami-Dade County	N/A	2017
Disadvantaged Business Enterprise	Miami-Dade County	N/A	2017

Local Development Business	Miami-Dade County	N/A
----------------------------	-------------------	-----

Please identify the name, license number, and issuance date of any prior companies that pertain to your Firm:

License/Certification Type	Name of Entity Issuing License or Certification	License No.	License Issuance Date
N/A			
N/A			
N/A			

Please identify all individuals authorized to sign for the entity, their title, and the threshold/level of their signing authority:

Authorized Signor's Name	Title	Signing Authority Threshold (All, Cost up to \$X-Amount, No Cost, Other)
Oscar Morejon	President	All
Albert Faz	Vice President	All

Please identify the total number of Firm employees, managerial/administrative employees, and identify the total number of trades employees by trade (e.g., 20 electricians, 5 laborers, 2 mechanics, etc.):

Total No. of Employees	22
Total No. of Managerial/Administrative Employees	22
Total No. of Trades Employees by Trade	See Form 2 (Exhibit A)

INSURANCE INFORMATION

Please provide the following information about the Firm's insurance company:

Berkley Assurance Company Hector Echemendia (Broker)
 Insurance Carrier Name Insurance Carrier Contact Person
475 Steamboat Road, Greenwich, CT 06830 855-663-8551 service@berkleynet.com
 Insurance Carrier Address Telephone No. Email

Has the Firm filed any insurance claims in the last five (5) years? No Yes If yes, please identify the type of claim and the amount paid out under the claim: _____

FIRM OWNERSHIP

Please identify all Firm owners or partners, their title, and percent of ownership:

Owner/Partner Name	Title	Ownership (%)
Oscar Morejon	President	50%
Albert Faz	Vice President	50%

Please identify whether any of the owners/partners identified above are owners/partners in another entity:
 No Yes If yes, please identify the name of the owner/partner, the other entity's name, and percent of ownership held by the stated owner/partner:

Owner/Partner Name	Other Entity Name	Ownership (%)

CURRENT AND PAST CLIENTS

Please identify a list of current and past clients, with an emphasis on clients that are Florida municipalities and/or local governments:

Entity Name	Contact Person	Telephone No.	Email Address	Date Awarded
City of Miami Beach	Pablo Gomez	305-989-7878	pablogomez@miamibeachfl.gov	08/25/2020
Bal Harbour Village	Matilde Reyes	305-297-8549	mreyes@balharbourfl.gov	04/22/2020
Miami-Dade County	David Martinez-Delgado	786-779-2871	david.martinez-delgado@miamidade.gov	11/24/2020
Vascadio Heart Institute	Ody Rodman	305-479-3181	ody@vascardio.com	06/07/2022
Pediatric Gastro Associates	Marifa Frometa	305-302-9930	mfrometa@pedga.com	01/04/2023

Additional current and past clients may be attached to this form on a separate sheet.


RECENT CONTRACTS

Please identify the five (5) most recent contracts in which your Firm has provided services to other public entities:

Public Entity Name	Contact Person	Telephone No.	Email Address	Date Awarded
City of West Miami	Edward Silva	305-266-4214	esilva@cityofwestmiami.org	05/14/2024
City of Coral Gables	Mayor Vince Lago	305-303-0115	vlago@coralgables.com	09/25/2024
City of Coral Gables	Carolina Vester	305-460-5344	cvester@coralgables.com	10/05/2023
City of Coral Gables	Jose Oliveros	305-619-5251	joliveros@coralgables.com	02/10/2022
Miami-Dade County	Jesus Sanchez	786-525-7054	sanchezj@mdpls.org	09/20/2020

By signing below, Proposer certifies that the information contained herein is complete and accurate to the best of Proposer's knowledge.

Firm: John Bell Construction, Inc.

Authorized Signature:  _____ **Date:** 03/03/2025

Print or Type Name: Oscar Morejon **Title:** President

FORM 2 (EXHIBIT A)

1. Total No. of Trades Employees by Trade:

- a. Shell (Concrete & Masonry) = 20
- b. Misc. Metals = 5
- c. Millwork/Cabinetry = 15
- d. Insulation = 10
- e. Roofing = 10
- f. Windows = 20
- g. Interior Glazing = 5
- h. Folding Partitions = 15
- i. Stucco = 10
- j. Painting = 10
- k. Flooring = 15
- l. Elevator = 150
- m. Mechanical (HVAC) = 20
- n. Plumbing = 20
- o. Fire Sprinkler = 20
- p. Electrical = 20
- q. Fire Alarm = 10

FORM 3A
CERTIFICATE OF AUTHORITY
(if Corporation)

I HEREBY CERTIFY that a meeting of the [circle one] Board of Directors Partners of _____
John Bell Construction, Inc.

_____ a business existing under the laws of the State of Florida
_____, (the "Entity") held on March 3rd, 2025, the following
resolution was duly passed and adopted:

"RESOLVED, that, Oscar Morejon, as _____
President of the Entity, be and is hereby authorized to
execute this Proposal dated March 3rd, 2025, on
behalf of the Entity and submit this Proposal to the Town of Golden
Beach, and this Entity and the execution of this Certificate of
Authority, attested to by the Secretary of the Corporation, and with
the Entity's Seal affixed, will be the official act and deed of this
Entity."

I FURTHER CERTIFY that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of
the Entity this 3 day of March, 2025

Secretary: _____
Print Name: Maria Sevilla

President: _____
Print Name: Oscar Morejon

(Seal)



Maria Sevilla
Comm.: HH 272738
Expires: June 6, 2026
Notary Public - State of Florida

FORM 4
ACKNOWLEDGEMENT OF ADDENDA

I HEREBY ACKNOWLEDGE that I have received all of the following addenda and am informed of the contents thereof:

Addendum Numbers Received:
(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum 1 | <input checked="" type="checkbox"/> Addendum 6 |
| <input checked="" type="checkbox"/> Addendum 2 | <input type="checkbox"/> Addendum 7 |
| <input checked="" type="checkbox"/> Addendum 3 | <input type="checkbox"/> Addendum 8 |
| <input checked="" type="checkbox"/> Addendum 4 | <input type="checkbox"/> Addendum 9 |
| <input checked="" type="checkbox"/> Addendum 5 | <input type="checkbox"/> Addendum 10 |

Firm: John Bell Construction, Inc.

Authorized Signature: 

Date: 03/03/2025

Print or Type Name: Oscar Morejon

Title: President

FORM 5
SINGLE EXECUTION AFFIDAVITS

THIS FORM COMBINES SEVERAL AFFIDAVIT STATEMENTS TO BE SWORN TO BY THE PROPOSER OR PROPOSER AND NOTARIZED BELOW. IN THE EVENT THE PROPOSER OR PROPOSER CANNOT SWEAR TO ANY OF THESE AFFIDAVIT STATEMENTS, THE PROPOSER OR PROPOSER IS DEEMED TO BE NON-RESPONSIBLE AND IS NOT ELIGIBLE TO SUBMIT A PROPOSAL/BID.

THESE SINGLE EXECUTION AFFIDAVITS ARE STATEMENTS MADE ON BEHALF OF:

John Bell Construction, Inc. By: Oscar Morejon, President
NAME OF PROPOSING OR BIDDING ENTITY INDIVIDUAL'S NAME AND
TITLE

81-1551021 Date: 03/03/2025
FEIN OF PROPOSING OR BIDDING ENTITY

Americans with Disabilities Act Compliance Affidavit

The above named firm, corporation or organization is in compliance with and agrees to continue to comply with, and assure that any subcontractor, or third party contractor under this project complies with all applicable requirements of the laws listed below including, but not limited to, those provisions pertaining to employment, provision of programs and services, transportation, communications, access to facilities, renovations, and new construction.

- The American with Disabilities Act of 1990 (ADA), Pub. L. 101-336, 104 Stat 327, 42 USC 1210112213 and 47 USC Sections 225 and 661 including Title I, Employment; Title II, Public Services; Title III, Public Accommodations and Services Operated by Private entities; Title IV, Telecommunications; and Title V, Miscellaneous Provisions.
- The Florida Americans with Disabilities Accessibility Implementation Act of 1993, Section 553.501-553.513, Florida Statutes:
- The Rehabilitation Act of 1973, 229 USC Section 794;
- The Federal Transit Act, as amended 49 USC Section 1612;
- The Fair Housing Act as amended 42 USC Section 3601-3631.

O.M.
Proposer Initials

Public Entity Crimes Affidavit

I understand that a “public entity crime” as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentations.

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 any 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, non-jury trial, or entry of a plea of guilty or nolo contendere.

I understand that an “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.

I understand that a “person” as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or 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 for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term “person” includes those officers, directors, executives, and partners, shareholders, employees, members, and agents who are active in management of an entity.

Based on information and belief, the statement, which I have marked below, is true in relations to the entity submitting this sworn statement.

(INDICATE WHICH STATEMENT APPLIES.)

Neither the entity submitting this sworn statement, nor any of its officers, directors, 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 ad convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted Contractor list (attach a copy of the final order).

I understand that the submission of this form to the contracting officer for the public entity identified in paragraph 1 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 the public entity prior to entering into a contract in excess of the threshold amount provided in Section 287.017, Florida Statutes for category two of any change in the information contained in this form.

O.M.
Proposer Initials

No Conflict of Interest or Contingent Fee/Anti-Kickback/Code of Ethics Affidavit

Proposer warrants that neither it nor any principal, employee, agent, representative nor family member has paid, promised to pay, or will pay any fee or consideration that is contingent on the award or execution of a contract arising out of this solicitation. Proposer also warrants that neither it nor any principal, employee, agent, representative nor family member has procured or attempted to procure this contract in violation of any of the provisions of the Miami-Dade County conflict of interest or code of ethics ordinances. Further, Proposer acknowledges that any violation of this warranty will result in the termination of the contract and forfeiture of funds paid or to be paid to the Proposer should the Proposer be selected for the performance of this contract.

O.M.
Proposer Initials

Business Entity Affidavit

Proposer hereby recognizes and certifies that no elected official, board member, or employee of Town of Golden Beach (the "Town") shall have a financial interest directly or indirectly in this transaction or any compensation to be paid under or through this transaction, and further, that no Town employee, nor any elected or appointed officer (including Town board members) of the Town, nor any spouse, parent or child of such employee or elected or appointed officer of the Town, may be a partner, officer, director or proprietor of Proposer or Contractor, and further, that no such Town employee or elected or appointed officer, or the spouse, parent or child of any of

them, alone or in combination, may have a material interest in the Contractor or Proposer. Material interest means direct or indirect ownership of more than 5% of the total assets or capital stock of the Proposer. Any exception to these above described restrictions must be expressly provided by applicable law or ordinance and be confirmed in writing by Town. Further, Proposer recognizes that with respect to this transaction or bid, if any Proposer violates or is a party to a violation of the ethics ordinances or rules of the Town, the provisions of Miami-Dade County Code Section 2-11.1, as applicable to Town, or the provisions of Chapter 112, part III, Fla. Stat., the Code of Ethics for Public Officers and Employees, such Proposer may be disqualified from furnishing the goods or services for which the bid or proposal is submitted and may be further disqualified from submitting any future bids or proposals for goods or services to Town.

O.M.
Proposer Initials

Non-Collusion/Anti-Collusion Affidavit

1. Proposer/Proposer has personal knowledge of the matters set forth in its Proposal/Bid and is fully informed respecting the preparation and contents of the attached Proposal/Bid and all pertinent circumstances respecting the Proposal/Bid;
2. The Proposal/Bid is genuine and is not a collusive or sham Proposal/Bid; and
3. Neither the Proposer/Proposer nor any of its officers, partners, owners, agents, representatives, employees, or parties in interest, including Affiant, has in any way colluded, conspired, connived, or agreed, directly or indirectly with any other Proposer/Proposer, firm, or person to submit a collusive or sham Proposal/Bid, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer/Proposer, firm, or person to fix the price or prices in the attached Proposal/Bid or of any other Proposer/Proposer, or to fix any overhead, profit, or cost element of the Proposal/Bid price or the Proposal/Bid price of any other Proposer/Proposer, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the Town or any person interested in the proposed Contract.

O.M.
Proposer Initials

Scrutinized Companies

1. Proposer certifies that it and its subcontractors are not on the Scrutinized Companies that Boycott Israel List. Pursuant to Section 287.135, F.S., the Town may immediately terminate the Agreement that may result from this RFP at its sole option if the Proposer or its subcontractors are found to have submitted a false certification; or if the Proposer, or its subcontractors are placed on the Scrutinized Companies that Boycott Israel List or is engaged in the boycott of Israel during the term of the Agreement.
2. If the Agreement that may result from this RFP is for more than one million dollars, the Proposer certifies that it and its subcontractors are also not on the Scrutinized Companies with Activities in Sudan, Scrutinized Companies with Activities in the Iran Petroleum Energy

Sector List, or engaged with business operations in Cuba or Syria as identified in Section 287.135, F.S. pursuant to Section 287.135, F.S., the Town may immediately terminate the Agreement that may result from this RFP at its sole option if the Proposer, its affiliates, or its subcontractors are found to have submitted a false certification; or if the Proposer, its affiliates, or its subcontractors are placed on the Scrutinized Companies with Activities in Sudan List, or Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or engaged with business operations in Cuba or Syria during the term of the Agreement.

3. The Proposer agrees to observe the above requirements for applicable subcontracts entered into for the performance of work under the Agreement that may result from this RFP. As provided in Subsection 287.135(8), F.S., if federal law ceases to authorize the above-stated contracting prohibitions then they shall become inoperative.

O.M.
Proposer Initials

Acknowledgment, Warranty, and Acceptance

1. Contractor warrants that it is willing, able to, and will comply with all applicable federal, state, county, and local laws, rules and regulations.
2. Contractor warrants that it has read, understands, and is willing to and will comply with all of the requirements of the solicitation and any and all addenda issued pursuant thereto.
3. Contractor warrants that it will not delegate or subcontract its responsibilities under an agreement without the prior written permission of the Town Manager.
4. Contractor warrants that all information provided by it in connection with this proposal is true and accurate.
5. I hereby propose to furnish the services specified in the RFP. I agree that my Proposal will remain firm for a period of 365 days in order to allow the Town adequate time to evaluate the Proposals.
6. I certify that all information contained in this Proposal is truthful to the best of my knowledge and belief. I further certify that I am duly authorized to submit this Statement of Qualification on behalf of the firm as its act and deed and that the firm is ready, willing and able to perform if awarded the contract.
7. I understand that a person or affiliate who has been placed on the convicted Contractor list following a conviction for public entity crimes may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to public entity, may not be awarded or perform work as a contractor, supplier, sub-contractor, or consultant under a contract with a public entity, and may not transact business with any public entity in excess of the threshold amount provided in Sec. 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted Contractor list.

O.M.
Proposer Initials

Ownership Disclosure Affidavit

1. If the contract or business transaction is with a corporation or company, the full legal name and business address shall be provided for each officer, director, member and manager and each stockholder or member who holds directly or indirectly five percent (5%) or more of the corporation's or company's stock or shares. If the contract or business transaction is with a trust, the full legal name and address shall be provided for each trustee and each beneficiary. All such names and addresses are (Post Office addresses are not acceptable), as follows (attach additional sheet, if necessary):

Name	Address	Ownership (%)
Oscar Morejon	4000 SW 60th Ct. Miami, FL 33155	50
Albert Faz	4000 SW 60th Ct. Miami, FL 33155	50

2. The full legal names and business address of any other individual (other than subcontractors, material men, suppliers, laborers, or lenders) who have, or will have, any interest (legal, equitable, beneficial or otherwise) in the contract or business transaction with the Town are (Post Office addresses are not acceptable), as follows (attach additional sheet, if necessary):

Name	Address
N/A	

O.M.
Proposer Initials

Truth in Negotiation Certificate

The Contractor hereby certifies, covenants, and warrants that wage rates and other factual unit costs supporting the compensation for projects and services that may be offered pursuant to this Request for Proposals and the Continuing Services Agreement related thereto will be accurate, complete, and current at the time of contracting. The Contractor further agrees that the price provided under separate, project specific agreements and any additions thereto shall be adjusted to exclude any significant sums by which the Town determines the agreement price was increased due to inaccurate, incomplete, or non-current wage rates and other factual unit costs. All such agreement adjustments shall be made within one (1) year following the end of each corresponding agreement. For purpose of this certificate, the end of the agreement shall be deemed to be the date of the final billing or acceptance of the work by the Town, whichever is later. The undersigned firm is furnishing this Truth in Negotiation Certificate pursuant to Section 287.055(5)(a), Florida Statutes for the undersigned firm to receive a continuing agreement for professional architecture and engineering services with the Town of Golden Beach, Florida.

O.M.
Proposer Initials

Prohibition on Contingent Fees

The Contractor warrants that he or she has not employed or retained any company or person, other than a bona fide employee working solely for the Contractor to solicit or secure this Request for Proposals and the Continuing Services Agreement related thereto and that he or she has not paid or agreed to pay any person, company, corporation, individual, or firm, other than a bona fide employee working solely for the Contractor any fee, commission, percentage, gift, or other consideration contingent upon or resulting from the award or making of this agreement. The undersigned Contractor is furnishing this statement pursuant to Section 287.055(6)(a), Florida Statutes for the undersigned firm to receive a continuing agreement for professional architecture and engineering services with the Town, Florida. Contractor understands that for the breach or violation of this provision, the Town shall have the right to terminate the resulting agreement without liability and, at its discretion, to deduct from the contract price, or otherwise recover, the full amount of such fee, commission, percentage, gift, or consideration. The provisions of this statement shall be incorporated in the resulting agreement, if awarded, as though fully stated therein.

O.M.
Proposer Initials

Prohibition Against Consideration of Social, Political, or Ideological Interests

Pursuant to Section 287.05701(2), Florida Statutes, the Contractor acknowledges that the Town has not requested documentation of or considered the Contractor's social, political, or ideological interests to determine if the Contractor is a responsible proposer. In addition, the Contractor acknowledges that the Town has not and will not give preference to any proposer based on their social, political, or ideological interests.

O.M.

Proposer Initials

Prohibition on Use of Coercion for Labor or Services

The Contractor warrants and attests under penalty of perjury that he or she does not and will not use coercion for labor or services in accordance with Section 787.06, Florida Statutes. As defined under Section 787.06(2)(a), Florida Statutes, the term "coercion" means:

8. Using or threatening to use physical force against any person;
9. Restraining, isolating, or confining or threatening to restrain, isolate, or confine any person without lawful authority and against her or his will;
10. Using lending or other credit methods to establish a debt by an person when labor or services are pledged as a security for the debt, if the value of the labor or services as reasonably assessed is not applied toward the liquidation of the debt, the length and nature of the labor or service are not respectively limited and defined;
11. Destroying, concealing, removing, confiscating, withholding, or possessing any actual or purported passport, visa, or other immigration document, or any other actual or purported government identification document, of any person;
12. Causing or threatening to cause financial harm to any person;
13. Enticing or luring any person by fraud or deceit; or
14. Providing a controlled substance as outlined in Schedule I or Schedule II of Section 893.03 to any person for the purpose of exploitation of that person.

The undersigned Contractor is furnishing this statement pursuant to Section 787.06(13), Florida Statutes, for the undersigned firm to be considered for award of an agreement by the Town of Golden Beach, Florida. Contractor understands that for the breach or violation of this provision, the Town shall have the right to terminate the resulting agreement without liability. The provisions of this statement shall be incorporated in the resulting agreement, if awarded, as though fully stated therein, and shall remain in effect during the term of the resulting agreement and any subsequent contract renewal or extension.

O.M.

Proposer Initials

**Sworn Signature of Proposing Entity Representative and Notarization
for all above Affidavits follows on the next page.**

In the presence of:

Signed, sealed and delivered by:

[Signature]
Witness #1 Print Name: Jazz Machin

[Signature]
Print Name: Oscar Morejon

[Signature]
Witness #2 Print Name: Albert Faz

Title: President
Firm: John Bell Construction, Inc.


ACKNOWLEDGMENT

State of Florida
County of Miami Dade

The foregoing instrument was acknowledged before me by means of physical presence or
online notarization, this 3 day of MARCH, 2025, by OSCAR MOREJON
(name of person) as President (type of authority) for
John Bell Construction, Inc. (name of party on behalf of whom instrument is executed).

[Signature]
Notary Public (Print, Stamp, or Type as
Commissioned)

- Personally known to me; or
- Produced identification (Type of Identification: _____)
- Did take an oath; or
- Did not take an oath


 Maria Sevilla
 Comm.: HH 272738
 Expires: June 6, 2026
 Notary Public - State of Florida

FORM 6
DISPUTE DISCLOSURE

Answer the following questions by placing an "X" after "Yes" or "No". If you answer "Yes" to any of the questions, please explain in the space provided, or on a separate sheet attached to this form.

1. Has your firm or any of its officers, received a reprimand of any nature or been suspended by the Department of Professional Regulations or any other regulatory agency or professional associations within the last five (5) years?

YES _____ NO

2. Has your firm, or any member of your firm, been declared in default, terminated or removed from a contract or job related to the services your firm provides in the regular course of business within the last five (5) years?

YES _____ NO

3. Has your firm had against it or filed any requests for equitable adjustment, contract claims, Bid protests, or litigation in the past five (5) years that is related to the services your firm provides in the regular course of business?

YES _____ NO

If yes, state the nature of the request for equitable adjustment, contract claim, protest, litigation, and/or regulatory action, and state a brief description of the case, the outcome or status of the suit, the monetary amounts of extended contract time involved, and the court or agency before which the action was instituted, the applicable case or file number, and the status or disposition for such reported action. Describe all litigation (include the court and location) of any kind involving Contractor or any Key Staff members within the last five (5) years.

I hereby certify that all statements made are true and agree and understand that any misstatement or misrepresentation or falsification of facts shall be cause for forfeiture of rights for further consideration of this Proposal for the Town of Golden Beach.

Firm: John Bell Construction, Inc.

Authorized Signature: _____

Date: 03/03/2025

Print or Type Name: Oscar Morejon

Title: President

**FORM 7
KEY STAFF & PROPOSED SUBCONTRACTORS**

KEY STAFF

Please complete the following chart with the Firm's proposed Key Staff. If additional space is required, please copy/duplicate this page and attach to this Form. Additional space: No Yes

Name	Title	Years of Experience	Years with Firm	Licenses/Certifications (Attach Copies)
Oscar Morejon	President	20	9	CGC1524390
Albert Faz	Vice President	9	9	
Jazz Machin	Vice President	7	7	
Enrique "Henry" Estopinan	General Superintendent	35	2	OSHA 30
Josue Salas	Superintendent	5	3	OSHA 30
William Lacobs	Project Manager	10	2	
Jay Castellanos	Project Manager	8	2	
Sherill Delgado	Financial Accounts Operator	8	1	
Maria Sevilla	Office Manager	6	3	

Please explain the Firm's ability and resources to substitute personnel with equal or higher qualifications than the Key Staff they will substitute for where substitute is required due to attrition, turnover, or a specific request by the Town:

In every position stated above, there is at least one person in a supporting role that at any point in time can step in and assume the said role. Additionally, we are currently and consistently recruiting for every position stated above. Our company is in growth phase, therefore people will not be an issue. We have an internal Recruiting Department and Staffing is an on-going function.

Please identify each Key Staff member's engagement commitments that will exist concurrently with the Town's Services:

Key Staff Name	Area of Responsibility	Client	Commitment (Hours/week)	Period of Engagement
Henry Estopinan	General Field Supervision	West Miami/ Miami-Dade	10	05/25 - 11/25
Josue Salas	Superintendent	West Miami/ Miami-Dade	15	05/25 - 11/25
William Lacobs	Project Manager	Miami-Dade	20	05/25 - 11/25
Jay Castellanos	Project Manager	West Miami	15	05/25 - 08/25

PROPOSED SUBCONTRACTORS

The undersigned Proposer hereby designates, as follows, all major subcontractors whom they propose to utilize for the major areas of work for the services. The Proposer is further notified that all subcontractors shall be properly licensed, bondable, and shall be required to furnish the Town with a Certificate of Insurance in accordance with the contract general conditions. Failure to furnish this information shall be grounds for rejection of the Proposer's proposal. (If no subcontractors are proposed, state "None" on first line below.)

Subcontractor Name & Address	Scope of Work	License Number
Amex Construction Group, Inc. 17201 SW 285th Street Homestead, FL 33030	Shell (Concrete & Masonry)	CGC1535639
The Companies of R&S, Inc. 8715 SW 129th Terrace Miami, FL 33176	Windows/Storefront	CRC1333899
Atlantic Air Conditioning & Refrigeration Inc. 3450 West 84th Street, Suite 202G Hialeah, FL 33018	Mechanical/HVAC	CAC057704

Firm: John Bell Construction, Inc.

Authorized Signature:  _____ Date: 03/03/2025

Print or Type Name: Oscar Morejon Title: President



FORM 7 (EXHIBIT A)

OSHA
Occupational Safety
and Health Administration

20-602000486

This card acknowledges that the recipient has successfully completed:

30-hour Construction Safety and Health

This card issued to:

Enrique Estopinan

Mario Monge
Trainer Name

7/7/2016
Date of Issue

OSHA
Occupational Safety
and Health Administration

38-602026902

This card acknowledges that the recipient has successfully completed:

30-hour Construction Safety and Health

This card issued to:

Josue Salas

Brent Wesley Huffman
Trainer Name

11/12/2024
Date of Issue

FORM 7 (EXHIBIT B)
PROPOSED SUBCONTRACTORS (cont.)

4. **DLD Electrical Contractor, LLC.**
 - a. Address: 10753 NE 3rd Ct., Miami, FL 33161
 - b. Scope of work: Electrical
 - c. License Number: EC13013062
5. **A&C Portela Plumbing, Inc.**
 - a. Address: 2655 SW 3rd Avenue, Miami, FL 33133
 - b. Scope of work: Plumbing
 - c. License Number: CFC1428617
6. **WISE Building Technologies, LLC.**
 - a. Address: 1355 NW 93rd Ct., A-105, Doral, FL 33172
 - b. Scope of work: Fire Alarm
 - c. License Number: EC13010682
7. **Century Fire, Inc.**
 - a. Address: 8290 NW 27th Street, Suite 605, Doral, FL 33122
 - b. Scope of work: Fire Sprinkler
 - c. License Number: 851117-0001-1997

**FORM 8
REFERENCES**

**IN ADDITION TO THE INFORMATION REQUIRED ON THIS FORM, PLEASE
PROVIDE A MINIMUM OF THREE REFERENCE LETTERS, ONE OF WHICH
SHOULD BE MUNICIPAL OR GOVERNMENT REFERENCES.**

REFERENCE #1

Public Entity Name: City of West Miami **Address:** 901 SW 62nd Ave, West Miami, FL 33144

Reference Contact Person/Title/Department: Name: Edward Silva

Title: City Manager Department: City

Contact Number & Email Cell Phone: 786-606-8903

Email: esilva@cityofwestmiami.org

Public Entity Size/Number of Residents/Square Mileage: Number of Residents = 8,500

Square Mileage = 0.71

Event(s) Completed (include Name of Project/Event, Date of Event Start/Completion,

Details on Size/Scope of Work/Complexity) Name of Project: West Miami Recreational Facility

Start Date: 06/03/2024; Completion Date: 06/27/2025 (est.)

Details: New Construction of 23,000 SF, 3-story Recreational Facility, housing a Gym, Activity

Center, Offices, Locker Rooms, Exterior Terraces, Commercial Kitchen, Storage, Elevator

Spinning, Pilates, Arts & Crafts, Boxing, Indoor Playground, Rooftop Terrace, etc.

Is the Contract still Active? Yes No

REFERENCE #2

Public Entity Name: Miami-Dade County **Address:** 101 W. Flagler St., Miami, FL 33130

Reference Contact Person/Title/Department: Contact #1: Jesus Sanchez: Title: Supervisor

Department: Public Library System / Contact #2: Angel C. Saqui, II, AIA, NCARB

Title: Architect of Record (Health & Wellness Information Center)

Contact Number & Email Jesus Sanchez Cell: 786-525-7054; Jesus Sanchez Email: sanchezj@mdcpls.org

Angel Saqui Cell: 305-607-3133; Angel Saqui Email: acs2@saquiarchitects.com

Public Entity Size/Number of Residents/Square Mileage: Number of Residents = 2,701,767

Square Mileage = 1.900

Event(s) Completed (include Name of Project/Event, Date of Event Start/Completion,

Details on Size/Scope of Work/Complexity) Project #1: Health & Wellness Information Center

Project #1 Details: New Construction of 5,000 SF LEED Silver Certified Government Facility on the premises of a functional and occupied County Library, consisting of Civil Work, Exterior Alucobond, Curved Reception Desks, and an intricate Audio/Visual System (among all other construction aspects).

Start Date: 12/07/2020; End Date: 03/16/2022

Is the Contract still Active? Yes _____ No _____

REFERENCE #3

Public Entity Name: City of Coral Gables Address: 405 Biltmore Way, Coral Gables, FL 33134

Reference Contact Person/Title/Department: Contact #1: Vince Lago

Contact #1 Title: Mayor / Contact #2: Carolina Vester; Contact #2 Title: Assistant City Manager

Departments: City

Contact Number & Email Contact #1 Phone: 305-303-0115; Contact #1 Email: vlago@coralgables.com

Contact #2 Phone: 305-460-5344; Contact #2 Email: cvester@coralgables.com

Public Entity Size/Number of Residents/Square Mileage: Number of Residents = 50,699

Square Mileage = 13

Event(s) Completed (include Name of Project/Event, Date of Event Start/Completion,

Details on Size/Scope of Work/Complexity) Project #1: Venetian Pool - Pool Bottom Replacement

& Pump System Improvements

Start Date: 11/25/2024; Completion Date: 05/30/2025 (est.)

Details: Demolition of entire Pool Bottom Concrete Slab (24,000 SF). Replacement of all Underground Plumbing. Replacement of Pool Pump System, including Submersible Pumps outside of Pool Area. Reconstruction of Pool Bottom Concrete Slab and Exterior Site/Components - Civil scope (Parking & Roadways). Maintain Historic Elements.
Is the Contract still Active? Yes No

FORM 8 (EXHIBIT A)

1. Reference #2 (Miami-Dade County):

a. Project #2: North Dade Library

- i. Start Date: 12/07/2020
- ii. Completion Date: 12/03/2021
- iii. Details: Renovation of an existing 50,000 SF Public Library for Miami-Dade County. This project was phased out in such a way to keep the library open and functional the entire time during construction. Government Elections were also held in this building during construction. Scope of work included, but not limited to, Interior Doors, Access Control, Electrical, Mechanical, Finishes, etc.
- iv. Contract Still Active? – No

2. Reference #3 (City of Coral Gables):

a. Project #2: Pierce Park


- i. Start Date: 03/28/2022
- ii. Completion Date: 11/11/2022
- iii. Details: Construction of Public Park for the City of Coral Gables. Scope of work included, but not limited to, Landscaping, Concrete Walkways and Slabs, Misc. Metals (Fencing), Renovations to Park Shelter, Flexi-Pave Walkways & Safety Rubber Surfacing, New Playground & Site Furnishings, Plumbing, Site Electrical Lighting, etc.
- iv. Contract Still Active? - No

b. **Project #3: Lamar Louise Curry Park**

- i. **Start Date: 11/01/2021**
- ii. **Completion Date: 05/10/2022**
- iii. **Details: New Construction of Public Park for the City of Coral Gables.**
Scope of work included, but not limited to, new Main Park Entrance (Structure & Trellis), Landscaping & Irrigation, Concrete Walkways and Slabs, Pedestrian Bridge over Dry Pond, Misc. Metals (Fencing), Flexi-Pave Walkways & Safety Rubber Surfacing, Site Furnishings, Plumbing, Site Electrical Lighting, etc.
- iv. **Contract Still Active? – No**


3. Reference #4:

- a. **Public Entity Name: City of Miami Beach**
- b. **Public Entity Address: 1700 Convention Center Drive, Miami Beach, FL 33139**
- c. **Contact Name: Pablo Gomez**
- d. **Contact Title: Senior Capital Projects Coordinator**
- e. **Contact Department: Capital Improvements**
- f. **Contact Phone Number: 305-989-7878**
- g. **Contact Email: pblogomez@miamibeachfl.gov**
- h. **Number of Residents: 83,000**
- i. **Square Mileage: 18.7**
- j. **Project Name: Neptune Apartments**
 - i. **Start Date: 08/31/2020**
 - ii. **Completion Date: 06/25/2021**

- 
- iii. Details: Renovation of a Historic Apartment Building in Miami Beach.
The building was fully occupied and operable during construction. Scope of work consisted of, but not limited to Demolition, Sandblasting, Concrete Restoration and Repairs, Storefront, Stucco, Paint, Precast, Misc. Metals, Flooring.
 - iv. Contract Still Active? – No

4. Reference #5:

- a. Public Entity Name: Bal Harbour Village
- b. Public Entity Address: 655 96th Street, Bal Harbour, FL 33154
- c. Contact Name: Matilde Reyes
- d. Contact Title: Capital Program Manager
- e. Contact Department: Capital Improvements
- f. Contact Phone Number: 305-297-8549
- g. Contact Email: mreyes@balharbourfl.gov
- h. Number of Residents: 3,000
- i. Square Mileage: 0.6
- j. Project Name: New Operations Facility
 - i. Start Date: 03/02/2020
 - ii. Completion Date: 02/24/2021
 - iii. Details: Demolition of existing Commercial Facility (down to roughly 10% of structure) and New Construction of Government Operations Offices Facility, including roughly 20,000 SF of Warehouse Space, together with Office Space. Scope included Civil, Sitework, Parking Lots,



Landscaping, Irrigation, Shell, Misc. Metals, Roofing, Windows, Doors,
all Finishes, Mechanical, Electrical, Plumbing, and Fire Protection, etc.

iv. Contract Still Active? – No



EDWARD SILVA
City Manager

February 21, 2025

Town of Golden Beach Council
Town of Golden Beach
100 Ocean Boulevard
Golden Beach, Florida 33160

Re: Letter of Recommendation

Dear Town of Golden Beach Council,

I am pleased to recommend John Bell Construction for your upcoming Wellness Center project. Their work on the City of West Miami Community Center has been exemplary. This project, a 25,000-square-foot, three-story building, is significant for our city, and John Bell has delivered with remarkable efficiency. The construction is several months ahead of schedule, this is a testament to their organized and proactive project management. The John Bell team has been a pleasure to work with, constantly keeping the lines of communication open and addressing any issues promptly. Their commitment to quality and timely completion has left our city officials and residents extremely satisfied. I am confident that John Bell Construction will bring the same level of dedication and expertise to your project.

Regards,

Edward Silva, R.A.
City Manager



ANGEL C. SAQUI, FAIA
ARCHITECTS, PLANNERS, INTERIORS, PLLC.

February 12th, 2025

Town of Golden Beach Council
Town of Golden Beach
100 Ocean Blvd
Golden Beach, FL 33160

Re: Letter of Recommendation

Dear Town of Golden Beach Council,

It is with great pleasure that I write this letter of recommendation for John Bell Construction for your above-mentioned municipal project.

For the past five, (5) years, I have had the pleasure of working closely with their team on both ground-up projects as well as very challenging and detailed interior remodeling projects.

Our two (2) latest projects are the Westchester Regional Library Health + Wellness Information Center, a LEED Silver Certified project and the How to Manage a Small Firm Law offices. These were not easy tasks due to their complexities, including numerous municipal connections and the challenges of building during the Covid-19 pandemic and tight time schedules.

Their team demonstrated incredible adaptability, working efficiently under significant pressure while ensuring that the project was completed to the highest standards.

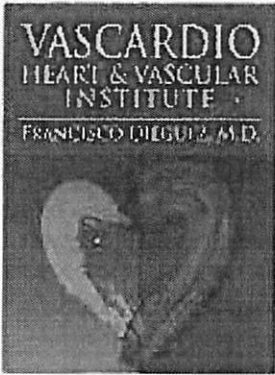
Despite the material and labor shortages, they maintained open lines of communication and coordinated exceptionally well with all parties involved.

Their ability to successfully navigate these obstacles while achieving LEED Certification for the Wellness Center speaks volumes about their expertise and professionalism. I have no doubt that John Bell Construction would be a great asset to your project, delivering exhibiting the highest levels of integrity, ethics, attention to detail and commitment to excellence.

Sincerely,

Angel C. Saqui, AIA, NCARB
Angel C. Saqui, FAIA, Architects, Planners, Interiors, PLLC, President

Y:\Documents\1 Word Docs\Reference Letters\John Bell Construction Recommendation for Golden Beach, FI Ltr 2-13-25



February 10, 2025


TO WHOM IT MAY CONCERN:

Dear Town of Golden Beach Council

I am writing to recommend John Bell Construction, who is the General Contractor for our Vascardio Ambulatory Surgical Center in Hialeah. As the first of its kind in the area, this cardiovascular surgery facility presented many technical and regulatory challenges, yet the John Bell team has exceeded our expectations at every stage. Their work has been especially impressive given that this was their first AHCA-accredited project. Their attention to detail and ability to manage complex medical systems and requirements have been exceptional. They have consistently met deadlines and worked seamlessly with regulatory bodies, ensuring that we open our facility on schedule and fully certified. John Bell Construction's ability to handle such intricate work with precision and professionalism makes me confident in their ability to deliver on any project you have in mind.

Please reach out to me directly if you need any other information pertaining to John Bell Construction's Company

Best regards,


Ody Rodman, Practice Manager

**FORM 9
E-VERIFY AFFIDAVIT**

In accordance with Section 448.095, Florida Statutes, the Town of Golden Beach requires all contractors doing business with the Town to register with and use the E-Verify system to verify the work authorization status of all newly hired employees. The Town will not enter into a contract unless each party to the contract registers with and uses the E-Verify system.

The Proposer Firm must provide of its proof of enrollment in E-Verify. For instructions on how to provide proof of the Firm's participation/enrollment in E-Verify, please visit: <https://www.e-verify.gov/faq/how-do-i-provide-proof-of-my-participation-enrollment-in-e-verify>

By submitting a response to this RFP and signing below, the Proposer Firm acknowledges that it has read Section 448.095, Florida Statutes and will comply with the E-Verify requirements imposed by it, including but not limited to obtaining E-Verify affidavits from subcontractors.

Check here to confirm proof of enrollment in E-Verify has been submitted as part of the response.

In the presence of:

Signed, sealed and delivered by:

Witness #1 Print Name: Jazz Machin

Print Name: Oscar Morejon

Witness #2 Print Name: Albert Faz

Title: President

Firm: John Bell Construction, Inc.

ACKNOWLEDGMENT

State of Florida

County of Miami Dade

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 3 day of MARCH, 2025, by OSCAR MOREJON (name of person) as President (type of authority) for John Bell Construction, Inc. (name of party on behalf of whom instrument is executed).

Maria Sevilla
Notary Public (Print, Stamp, or Seal as Commissioned)  Notary Public - State of Florida

Personally known to me; or
 Produced identification (Type of Identification: _____)
 Did take an oath; or
 Did not take an oath



My Company Account

My Company Profile

Company Information

Company Name

John Bell Construction, Inc.

Doing Business As (DBA) Name

Company ID

1601155

Enrollment Date

Oct 22, 2020

 **Employer Identification Number (EIN)**

811551021

Unique Entity Identifier (UEI)

DUNS Number

Total Number of Employees

20 to 99

NAICS Code

236

Sector

Construction

Subsector

Construction of Buildings

[Edit Company Information](#)



Employer Category

Employer Category

None of these categories apply

[Edit Employer Category](#)

Company Addresses

Physical Address

4000 SW 60th Court
Miami, FL 33155

Mailing Address

Same as Physical Address

[Edit Company Addresses](#)

Hiring Sites

Number of Sites

1

[Edit Hiring Sites](#)

Company Access

My Company is configured to:

Verify Its Own Employees

Memorandum of Understanding

[View Current MOU](#)

[U.S. Department of Homeland Security](#). [U.S. Citizenship and Immigration Services](#)

[Accessibility](#). [Plug-ins](#) [Site Map](#)



Company Name

Company Address

FORM 10
IRS FORM W-9

Please visit the following link for information about IRS Form W-9:

<https://www.irs.gov/forms-pubs/about-form-w-9>

Please complete and submit with the proposal IRS Form W-9, which may be found online by visiting:

<https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Check here to confirm IRS Form W-9 has been submitted as part of the response.

Firm: John Bell Construction, Inc.

Authorized Signature: 

Date: 03/03/25

Print or Type Name: Oscar Morejon

Title: President

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

John Bell Construction, Inc.

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.

- Individual/sole proprietor
 C corporation
 S corporation
 Partnership
 Trust/estate
 LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership)
 Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.
 Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions

(Applies to accounts maintained outside the United States.)

5 Address (number, street, and apt. or suite no.). See instructions.

4000 SW 60th Court

6 City, state, and ZIP code

Miami, FL 33155

Requester's name and address (optional)

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number										
-										
or										
Employer identification number										
8	1		-	1	5	5	1	0	2	1

Part II Certification


Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of
U.S. person



Date

03/03/25

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid).
- Form 1099-DIV (dividends, including those from stocks or mutual funds).
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds).
- Form 1099-NEC (nonemployee compensation).
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers).
- Form 1099-S (proceeds from real estate transactions).
- Form 1099-K (merchant card and third-party network transactions).
- Form 1098 (home mortgage interest), 1098-E (student loan interest), and 1098-T (tuition).
- Form 1099-C (canceled debt).
- Form 1099-A (acquisition or abandonment of secured property).

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

Caution: If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding; or
3. Claim exemption from backup withholding if you are a U.S. exempt payee; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See *What Is FATCA Reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441-1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(i)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester;
2. You do not certify your TIN when required (see the instructions for Part II for details);
3. The IRS tells the requester that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under "*By signing the filled-out form*" above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

- **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note for ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

- **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or "doing business as" (DBA) name on line 2.

- **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

- **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.

- **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner's name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For

example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or • Sole proprietorship	Individual/sole proprietor.
• LLC classified as a partnership for U.S. federal tax purposes or • LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	Limited liability company and enter the appropriate tax classification: P = Partnership, C = C corporation, or S = S corporation.
• Partnership	Partnership.
• Trust/estate	Trust/estate.

Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

Note: A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

Line 4 Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

- 2—The United States or any of its agencies or instrumentalities.
- 3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5—A corporation.
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission.
- 8—A real estate investment trust.
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940.
- 10—A common trust fund operated by a bank under section 584(a).
- 11—A financial institution as defined under section 581.
- 12—A middleman known in the investment community as a nominee or custodian.
- 13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
• Interest and dividend payments	All exempt payees except for 7.
• Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
• Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.
• Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5. ²
• Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.

¹ See Form 1099-MISC, Miscellaneous Information, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).

B—The United States or any of its agencies or instrumentalities.

C—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.

G—A real estate investment trust.

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.

I—A common trust fund as defined in section 584(a).

J—A bank as defined in section 581.

K—A broker.

L—A trust exempt from tax under section 664 or described in section 4947(a)(1).

M—A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/EIN. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. **Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.
2. **Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
3. **Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
4. **Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
5. **Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABL accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A)) ^{**}	The grantor ⁴

For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(i)(B)) ^{**}	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

^{*} Note: The grantor must also provide a Form W-9 to the trustee of the trust.

^{**} For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Go to www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

SET APART

SET APART