CERTIFICATE OF INSURANCE

Name and Address of Additional Interest

Named Insured

TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS APPROVED APR 0 5 2018

TIME AT THE ADDRESS OF THE NAMED INSURED AS STATED ABOVE. TO	AGENCY	AGENCY	POLICY
ТО			NO. NUMBER
ENDORSEMENT SUPPLEMENTA	L INFORMATION (If Applicable)		
DESIGNATION OF PREMISES/LO	CATION OF If you I	have any questions concerning	this policy, please
COVERED PROPERTY (If Applical		t the agent of record listed belo	
			1
			1
MPOPTANT NOTICE: THIS CEPTIFICATI	E OE INSUDANCE IS ISSUED AS A MATTEE	P OF INFORMATION ONLY IT	CONFERS NO DIGHTS
UPON THE THIRD PARTY REQUESTING	E OF INSURANCE IS ISSUED AS A MATTER THE CERTIFICATE BEYOND WHAT THE R	REFERENCED POLICY OF INS	URANCE EXPRESSLY
UPON THE THIRD PARTY REQUESTING PROVIDES. THIS CERTIFICATE OF INSL		REFERENCED POLICY OF INS ALTER THE COVERAGE, TERI	URANCE EXPRESSLY
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