City of Hollywood
Procurement Services
Otis Thomas, Director/Chief Procurement Officer
2600 Hollywood Boulevard, Hollywood, FL 33020

[ADVANCED ROOFING, INC.] RESPONSE DOCUMENT REPORT

IFB No. IFB-351-26-WV

City of Hollywood Fire Station 40 HVAC Unit Replacement Project

RESPONSE DEADLINE: December 17, 2025 at 3:00 pm

Report Generated: Tuesday, February 10, 2026

ADVANCED ROOFING, INC. Response

CONTACT INFORMATION

Company:
ADVANCED ROOFING, INC.

Email:
debbieg@advancedroofing.com

Contact:
Debbie Giuliani

Address:
1950 NW 22nd Street
Ft. Lauderdale, FL 33311

Phone:
(954) 522-6868

Website:
www.advancedroofing.com

Submission Date:
Dec 17, 2025 9:10 AM (Eastern Time)

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. VENDOR REFERENCE FORM*

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

- Vendor_Reference_Form.pdf

Vednor_References_Forms.pdf

2. Information Upload*

Please upload all specifications/licenses for your submittal here per requirements on Section 4.11 Contractor Qualifications.

Paul_Murphy_-_State_Mechanical_License.pdf
HVAC_License_2024-2026.pdf
Broward_County_137934_BTR_2025-2026.pdf

3. HOLD HARMLESS AND INDEMNITY CLAUSE*

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

Confirmed

4. NON-COLLUSION STATEMENT*

I , being first duly sworn, depose that:

A. He/she is an authorized representative of the Company, the Proposer that has submitted the attached Proposal.

B. He/she has been fully informed regarding the preparation and contents of the attached Proposal and of all pertinent circumstances regarding such Proposal;

C. Such Proposal is genuine and is not a collusion or sham Proposal;

D. Neither the said Proposer nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Proposer, firm or person to submit a collusive or sham Proposal in connection with the contractor for which the attached Proposal has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Proposer, firm or person to fix the price or prices, profit or cost element of the Proposal price or the Proposal price of any other Proposer, or to secure an advantage against the City of Hollywood or any person interested in the proposed Contract; and

E. The price or prices quoted in the attached Proposal are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Proposer or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

Confirmed

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

The applicant certifies that it and its principals:

A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

B. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction, violation of Federal or State antitrust statutes or

commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

C. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and

D. Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.

Confirmed

6. DRUG-FREE WORKPLACE PROGRAM*

A. IDENTICAL TIE PROPOSALS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie proposals will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer

of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.

5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program (if such is available in the employee's community) by, any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of these requirements.

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

Confirmed

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

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

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

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

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate or terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,
- Transportation, lodging, or parking,
- Food or beverage,

- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements
- Services provided by persons pursuant to a professional license or certificate.
- Other personal services for which a fee is normally charged by the person providing the services.
- Any other similar service or thing having an attributable value not already provided for in this section.

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

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

Confirmed

8. Certificate of Insurance*

See requirements in the #SPECIAL TERM AND CONDITIONS section.

For_Bidding_Purposes_Only_Advanced_Roofing_Inc_2025_dba_Adv_Air_without_forms_4-11-2025_421540456.pdf

9. PROOF OF SUNBIZ REGISTRATION*

Enter company FEIN to be verified in Sunbiz

59-2360591
Click to Verify *Value will be copied to clipboard*

10. ACKNOWLEDGMENT AND SIGNATURE PAGE

IF CORPORATION - DATE INCORPORATED/ORGANIZED:*
Oct 8, 1983

STATE INCORPORATED/ORGANIZED:*
Florida

REMITTANCE ADDRESS*

1950 NW 22nd Street, Fort Lauderdale, FL 33311

BIDDER/PROPOSER'S AUTHORIZED REPRESENTATIVE'S TYPED FULL NAME*
Robert P. Kornahrens, President

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

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

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

THIS FORM STATEMENT IS SUBMITTED TO THE CITY OF HOLLYWOOD BY:*
(Print individual's name and title) (Print name of entity submitting sworn statement)

Robert P. Kornahrens, President

SWORN STATEMENT CONTINUATION:*
Enter business address:

1950 NW 22nd Street, Fort Lauderdale, FL 33311

SWORN STATEMENT CONTINUATION:*
Enter Federal Employer Identification Number (FEIN) is:

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

59-2360591

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

understand

SWORN STATEMENT CONTINUATION:*
I understand that “Affiliate,” as defined in paragraph 287.133(1)(a), Florida Statutes, means:

1. A predecessor or successor of a person convicted of a public entity crime, or

2. An entity under the control of any natural person who is active in the management

of the entity and who has been convicted of a public entity crime. The term “affiliate”

includes those officers, directors, executives, partners, shareholders, employees,

members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

Confirmed

SWORN STATEMENT CONTINUATION:*

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

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

Confirmed

SWORN STATEMENT CONTINUATION:*

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

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

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

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

Confirmed

PRICE TABLES

BID FORM

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
Equipment Replacement					
1	Replace AHU-1 and CU-1 (2nd Floor) per schedule	1	EA	$28,600.00	$28,600.00
2	Replace AHU-2 and CU-2 (2nd Floor) per schedule	1	EA	$33,300.00	$33,300.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
3	Replace AHU-3 and CU-3 (AHU-1) per schedule	1	EA	$77,030.00	$77,030.00
4	Replace AHU-4 and CU-4 (2nd Floor) per schedule	1	EA	$16,070.00	$16,070.00
5	Replace AHU-9 and CU-9 (AHU-2) per schedule	1	EA	$56,010.00	$56,010.00
Controls & Integration					
6	Provide new DDC/BAS control panels, controllers, sensors, actuators; integrate new AHUs into existing BAS or provide new master controller (if required). Note: Contractor must submit control narrative	1	LS	$54,670.00	$54,670.00
7	Programming, software licenses, graphics, trending points, alarm configuration. Note: Include mockups for owner approval	1	LS	$27,340.00	$27,340.00
Air Distribution / Damper Work					
8	Provide and install new motorized dampers (supply, return, outside air, relief) with actuators, linkages, wiring, supports, balancing. Note: Dampers to be factory-rated and UL listed	1	LS	$11,990.00	$11,990.00
Electrical / Power					
9	Provide new fused disconnect switches for each AHU and condensing unit, including wiring from existing panels. Note: Contractor shall verify existing service capacity	1	LS	$5,930.00	$5,930.00
10	Provide VFDs for supply fans (including wiring, bypass if required, programming, harmonic mitigation). Note: VFDs to be matched to motor sizing and loads	1	LS	$8,610.00	$8,610.00
11	Electrical coordination, conduit, raceways, supports, terminations. Note: Must meet NEC and local code	1	LS	$3,490.00	$3,490.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
Temporary Systems / Phasing					
12	Temporary cooling / HVAC during construction: rental, removal, connections, maintenance. Note: Must maintain full building comfort during outages	1	LS	$4,750.00	$4,750.00
Testing, Balancing, Commissioning & Startup					
13	Air and hydronic balancing per national standards (NEBB or AABC). Note: Submit report	1	LS	$7,570.00	$7,570.00
14	Control checkout, startup, functional testing, performance verification. Note: Contractor to provide test logs	1	LS	$3,460.00	$3,460.00
15	Equipment warranty, performance guarantees, and acceptance testing. Note: Include guarantee durations	1	LS	$8,530.00	$8,530.00
Closeout, Documentation					
16	Provide O&M manuals, parts lists, wiring and control drawings. Note: As-built drawings required	1	LS	$7,260.00	$7,260.00
General Requirements / Others					
17	Permits, inspections, testing fees, bonding — all included. Note: Contractor to carry required insurance	1	LS	$13,240.00	$13,240.00
18	Mobilization / demobilization / site cleanup. Note: Must restore site to original conditions	1	LS	$11,370.00	$11,370.00
19	Contingency / allowance (e.g. additional ductwork, structural supports, extra wiring). Note: Specify what the allowance covers	1	LS	$20,440.00	$20,440.00

Line Item	Description	Quantity	Unit of Measure	Unit Cost	Total
TOTAL					$399,660.00

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-351-26-WV
Reference for: City of Hollywood Fire Station 40 HVAC Unit Replacement Project

Organization/Firm Name providing reference: Coral Springs Public Works Facilities Division
Organization/Firm Contact Name: Paul Zahn
Title: Facilities Manager
Email: PZahn@coralsprings.gov
Phone: 954-344-1132
Name of Referenced Project: Coral Springs Fire Station 80
Contract No: NA
Date Services were provided: December, 2024 - April, 2025
Project Amount: $213,827.91

Referenced Vendor's role in Project: ☒ **Prime Vendor** ☐ **Subcontractor/ Subconsultant**

Would you use the Vendor again? ☒ **Yes** ☐ **No. Please specify in additional comments**

Description of services provided by Vendor (provide additional sheet if necessary):
Replacement of Daikin VRV system, refrigerant piping and building controls.

Please rate your experience with the Vendor	**Need Improvement**	**Satisfactory**	**Excellent**	**Not Applicable**
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☒	☐	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☒	☐	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

******THIS SECTION FOR CITY USE ONLY******						
Verified via:	**Email:**	☐	**Verbal:**	☐	**Mail:**	☐
Verified by:	**Name:**				**Title:**	
	Department:				**Date:**	

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-351-26-WV
Reference for: City of Hollywood Fire Station 40 HVAC Unit Replacement Project

Organization/Firm Name providing reference: Yes We are Mad LLC
Organization/Firm Contact Name: Tiffani Aptakin Ollino
Title: Manager
Email: Tiffani@yeswearemad.com
Phone: 786-533-3240
Name of Referenced Project: Mad Arts Chiller Replacement
Contract No: NA
Date Services were provided: July, 2025 - October, 2025
Project Amount: $203,660.00

Referenced Vendor's role in Project: ☒ **Prime Vendor** ☐ **Subcontractor/ Subconsultant**

Would you use the Vendor again? ☒ **Yes** ☐ **No. Please specify in additional comments**

Description of services provided by Vendor (provide additional sheet if necessary):
Replacement of one air cooled chiller, transition piping and electrical.

Please rate your experience with the Vendor	**Need Improvement**	**Satisfactory**	**Excellent**	**Not Applicable**
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☐	☒	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☒	☐	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

******THIS SECTION FOR CITY USE ONLY******						
Verified via:	**Email:**	☐	**Verbal:**	☐	**Mail:**	☐
Verified by:	**Name:**				**Title:**	
	Department:				**Date:**	

VENDOR REFERENCE FORM

City of Hollywood Solicitation #: IFB-351-26-WV
Reference for: City of Hollywood Fire Station 40 HVAC Unit Replacement Project

Organization/Firm Name providing reference: Riverside Hotel
Organization/Firm Contact Name: Michael Weymouth
Title: President
Email: Mike@lasolas.co
Phone: 954-444-3130
Name of Referenced Project: Riverside Hotel - HVAC Upgrades
Contract No: NA
Date Services were provided: Feb, 2024 - November, 2024
Project Amount: $821,900.00

Referenced Vendor's role in Project: ☒ **Prime Vendor** ☐ **Subcontractor/ Subconsultant**

Would you use the Vendor again? ☒ **Yes** ☐ **No. Please specify in additional comments**

Description of services provided by Vendor (provide additional sheet if necessary):
Removal of existing chilled water fan coils and installation of forty (40) new 400 CFM chilled water vertical stack fan coils.
Replacement of two 110 ton chillers with upgraded systems designed to enhance cooling efficiency.

Please rate your experience with the Vendor	**Need Improvement**	**Satisfactory**	**Excellent**	**Not Applicable**
Vendor's Quality of Service				
a. Responsive	☐	☐	☒	☐
b. Accuracy	☐	☐	☒	☐
c. Deliverables	☐	☐	☒	☐
Vendor's Organization:				
a. Staff expertise	☐	☐	☒	☐
b. Professionalism	☐	☐	☒	☐
c. Staff turnover	☐	☒	☐	☐
Timeliness/Cost Control of:				
a. Project	☐	☐	☒	☐
b. Deliverables	☐	☐	☒	☐

Additional Comments (provide additional sheet if necessary):

******THIS SECTION FOR CITY USE ONLY******						
Verified via:	**Email:**	☐	**Verbal:**	☐	**Mail:**	☐
Verified by:	**Name:**				**Title:**	
	Department:				**Date:**	

Ron DeSantis, Governor

Melanie S. Griffin, Secretary

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

MURPHY, PAUL JAMES

ADVANCED ROOFING, INC.
1950 NW 22ND ST
FORT LAUDERDALE FL 33311

LICENSE NUMBER: CMC1251466

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 11/13/2024

Do not alter this document in any form.

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

Ron DeSantis, Governor

Melanie S. Griffin, Secretary

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE CLASS A AIR CONDITIONING CONTRACTOR HEREIN IS CERTIFIED UNDER THE PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

KORNAHRENS, THOMAS MICHAEL

ADVANCED ROOFING, INC.
1950 NW 22ND ST
FORT LAUDERDALE FL 33311

LICENSE NUMBER: CAC1818806

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/09/2024

Do not alter this document in any form.

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

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

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

VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026

Receipt #: 183-281157

Business Name: ADVANCED ROOFING INC

Business Type: HEATING/AIRCONDITION CONTRACTR (MECHANICAL CONTRACTOR)

Owner Name: PAUL J MURPHY/QUAL

Business Location: 1950 NW 22ND ST FT LAUDERDALE

Business Phone: 9545226868

Business Opened: 12/12/2016

State/County/Cert/Reg: CMC1251466

Exemption Code:

Rooms	Seats	Employees	Machines	Professionals
		350		

For Vending Business Only

Number of Machines: **Vending Type:**

Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
150.00	0.00	0.00	0.00	0.00	0.00	150.00

Receipt Fee 150.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

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

Mailing Address:

ADVANCED ROOFING INC
1950 NE 22 ST
FORT LAUDERDALE, FL 33311

Receipt #WWW-24-00294316
Paid 08/29/2025 150.00

2025 - 2026

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

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

VALID OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026

Receipt #: 183-281157

Business Name: ADVANCED ROOFING INC

Business Type: HEATING/AIRCONDITION CONTRACTR (MECHANICAL CONTRACTOR)

Owner Name: PAUL J MURPHY/QUAL

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Business Phone: 9545226868

Business Opened: 12/12/2016

State/County/Cert/Reg: CMC1251466

Exemption Code:

Rooms	Seats	Employees	Machines	Professionals
		350		

Signature

For Vending Business Only

Number of Machines: **Vending Type:**

Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
150.00	0.00	0.00	0.00	0.00	0.00	150.00

Receipt #WWW-24-00294316
Paid 08/29/2025 150.00

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 4/11/2025

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

License#: BR-1796553
ADVAROO-06

CONTACT NAME: Jalen Belle-Walker
PHONE (A/C, No, Ext): 800-845-8437 **FAX (A/C, No):**
E-MAIL ADDRESS: jbelle-walker@acrisure.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Greenwich Insurance Company	22322
INSURER B : Starr Indemnity & Liability Company	38318
INSURER C : Bridgefield Employers Insurance Company	10701
INSURER D : Continental Casualty Company	20443
INSURER E : Columbia Casualty Company	31127
INSURER F : Indian Harbor Insurance Company	36940

INSURED
Advanced Roofing Inc
dba: Advanced Air Systems
1950 Nw 22nd Street
Fort Lauderdale FL 33311

COVERAGES **CERTIFICATE NUMBER:** 421540456 **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	X **COMMERCIAL GENERAL LIABILITY**			CGS740979406	1/1/2025	1/1/2026	EACH OCCURRENCE	$ 2,000,000
	[ ] CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
	X Contractual Incl						MED EXP (Any one person)	$ 10,000
	X Broad Form PD						PERSONAL & ADV INJURY	$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 4,000,000
	[ ] POLICY [X] PRO-JECT [X] LOC						PRODUCTS - COMP/OP AGG	$ 4,000,000
	[ ] OTHER:							$
A	**AUTOMOBILE LIABILITY**			CAH740979506	1/1/2025	1/1/2026	COMBINED SINGLE LIMIT (Ea accident)	$ 2,000,000
	X ANY AUTO						BODILY INJURY (Per person)	$
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
							PIP	$ 10,000
B	[ ] **UMBRELLA LIAB** [X] OCCUR			1000588143251	1/1/2025	1/1/2026	EACH OCCURRENCE	$ 10,000,000
	X **EXCESS LIAB** [ ] CLAIMS-MADE						AGGREGATE	$ 10,000,000
	[ ] DED [X] RETENTION $ 0							$
C	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** Y / N	N / A		830-56020	1/1/2025	1/1/2026	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [Y] **(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
D	Installation Floater			4016260407	1/1/2025	1/1/2026	Per Jobsite/Aggregate	$5.5M/$15,000,000
E	Contractors Errors & Omissions			C 6018114505	1/1/2025	1/1/2026	Ea Claim/Aggregate	$5000000/$5000000
F	Contractors Poll incl Mold			CEO744615206	1/1/2025	1/1/2026	Ea Claim/Aggregate	$2000000/$2000000

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

CERTIFICATE HOLDER

"For Bidding Purposes Only"
USA

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