



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/14/2023

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).

<b>PRODUCER</b> Brown & Brown Inc.  80 South 8th Street Suite 700 Minneapolis, MN 55402  <b>INSURED</b> ETL Holdco, LLC Fiasco Enterprises, LLC, DBA: Energy Transport Logistics 1411 South 47th Avenue, Suite 140 Phoenix, AZ 85043	1-612-333-3323  <b>CONTACT NAME:</b> Kathy Beatty OR Sara McWethy <b>PHONE (A/C, No, Ext):</b> 612-333-3323 <b>FAX (A/C, No):</b> 612-373-7270 <b>E-MAIL ADDRESS:</b> kathleen.beatty@bbrown.com														
<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: ATEGRITY SPECIALTY INS CO</td> <td>16427</td> </tr> <tr> <td>INSURER B: CANAL INS CO</td> <td>10464</td> </tr> <tr> <td>INSURER C: Upland Specialty Ins Co</td> <td>16988</td> </tr> <tr> <td>INSURER D: TRAVELERS PROP CAS CO OF AMER</td> <td>25674</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: ATEGRITY SPECIALTY INS CO	16427	INSURER B: CANAL INS CO	10464	INSURER C: Upland Specialty Ins Co	16988	INSURER D: TRAVELERS PROP CAS CO OF AMER	25674	INSURER E:		INSURER F:	
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**COVERAGES**                      **CERTIFICATE NUMBER:** 68952333                      **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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			01TGLP00000336	06/22/23	06/22/24	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ EXCLUDED
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMPIOP AGG	\$ 2,000,000
								\$
B	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			I2330390011	06/22/23	06/22/24	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  <input type="checkbox"/> DED <input type="checkbox"/> RETENTIONS			USXTL0373623	06/22/23	06/22/24	EACH OCCURRENCE	\$ 2,000,000
							AGGREGATE	\$ 2,000,000
								\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y    N/A If yes, describe under DESCRIPTION OF OPERATIONS below			6JUB-5R87288-9-23 (AZ)	05/08/23	05/08/24	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
D				SEE ATTACHED-MORE WC	05/08/23	05/08/24	E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	MOTOR TRUCK CARGO			6300W265645	06/22/23	06/22/24	PER VEHICLE/DEDUCT	300K/2,500

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

Evidence of Insurance.

## CERTIFICATE HOLDER

Fiasco Enterprises, Inc.  
 dba: Energy Transport Logistics  
  
 P.O. Box 887  
 Tolleson, AZ 85353  
  
 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

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# SUPPLEMENT TO CERTIFICATE OF INSURANCE

DATE  
06/14/2023

NAME OF INSURED: ETL Holdco, LLC  
Fiasco Enterprises, LLC, DBA: Energy Transport Logistics

COVERAGE: WORKERS COMPENSATION

INSURER: FALLS LAKE FIRE AND CAS CO -- NAIC# 15884

X PER STATUTORY / E.L. LIMITS - \$1,000,000

EFF AND EXP DATES: 09/03/22 - 09/03/23

POLICY#: FLA00116506 (CA)

INSURER: TEXAS MUTUAL INS CO -- NAIC# 22945

X PER STATUTORY / E.L. LIMITS - \$1,000,000

EFF AND EXP DATES: 05/08/22 - 05/08/23

POLICY#: 0001302282 (TX)

INSURER: LM INS CORP -- NAIC# 33600

X PER STATUTORY / E.L. LIMITS - \$1,000,000

EFF AND EXP DATES: 08/17/22 - 08/17/23

POLICY#: WC539S726080012 (IN)

INSURER: LM INS CORP -- NAIC# 33600

X PER STATUTORY / E.L. LIMITS - \$1,000,000

EFF AND EXP DATES: 09/15/22 - 09/15/23

POLICY#: WC533SB22S7C012 (NV)

INSURER: COMPSOURCE MUTUAL INS CO -- NAIC# 36188

X PER STATUTORY / E.L. LIMITS - \$1,000,000

EFF AND EXP DATES: 05/08/23 - 05/08/24

POLICY#: 0350920923-1 (OK)