State Co.									
	<u>ACORD</u> ™	CERTIFICATE O	F LIA	ABILITY	Y INSURA	NCE	DATE(MM/DD/YY) 11/30/23		
Hu 39 Ind Ph	RODUCER udson Insurance Company 150 Priority Way, South Drive, S dianapolis, IN 46240 none (317)582-0073 Fax (86 nail: certificate@HudsonInsGro	6)542-7618		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. COMPANIES AFFORDING COVERAGE COMPANY A Hudson Insurance Company (NAIC# 25054)					
IN:	SURED			COMPANY B					
Ad	lmiral Merchants Motor Freight, I	nc.	ŀ	COMPANY					
	5 S. 11th Street nneapolis, MN 55403		-	C COMPANY					
CC	VERAGES								
	POLICY PERIOD INDICATED, N WITH RESPECT TO WHICH THI	POLICIES OF INSURANCE LISTE OTWITHSTANDING ANY REQUIRI S CERTIFICATE MAY BE ISSUED HE TERMS, EXCLUSIONS AND CC	EMENT, OR MA	TERM OR (Y PERTAIN.	CONDITION OF A	ANY CONTRACT OR O' CE AFFORDED BY THE	THER DOCUMENT POLICIES DESCRIBED		
CO LTR	TYPE OF INSRUANCE	POLICY NUMBER		Y EFFECTIVE : (MM/DD/YY)	POLICY EXPIRATION	LI	MITS		
Α	GENERAL LIABILITY X COMPREHENSIVE FORM X PREMISES/OPERATIONS UNDERGROUND EXPLOSION/COLLAPSE HAZARD X PRODUCTS/COMPLETED OPER	HMU200001-16	12/0	01/2023	12/01/2024	BODILY INJURY OCC BODILY INJURY AGG PROPERTY DAMAGE OCC PROPERTY DAMAGE OCC BI/PD COMBINED OCC	\$2,000,000.00 CS		
	X CONTRACTUAL X INDEPENDENT CONTRACTORS X BROAD FORM PROPERTY DAMAGE X PERSONAL INJURY					BI/PD COMBINED AGG PERSONAL INJURY AGG	\$2,000,000.00 CC		
А	AUTOMOBILE LIABILITY X ANY AUTO	HMU200001-16	12/0	01/2023	12/01/2024	BODILY INJURY (Per person)			
	X ALL OWNED AUTOS(Private Pass) ALL OWNED AUTOS (Other than Private Passenger) X HIRED AUTOS					BODILY INJURY (Per accident)			
	X NON-OWNED AUTOS GARAGE LIABILITY					BODILY INJURY PROPERTY DAMAGE COMBINED	\$2,000,000.00 CS		
	EXCESS LIABILITY					EACH OCCURRENCE			
	UMBRELLA FORM OTHER THAN UMBRELLA FORM					AGGREGATE			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: INCL EXCL					WC STATU- TORY LIMITS ER EL EACH ACCIDENT EL DISEASE-POLICY LIMIT EL DISEASE-EA EMPLOYEE			
A	Cargo Coverage	HMU200001-16	12/	01/2023	12/01/2024	\$100,000.00 CSL			
Α	Trailer Interchange Coverage	HMU200001-16	12/	01/2023	12/01/2024	\$50,000.00 CSL			
Ca	SCRIPTION OF OPERATIONS/LOCATIONS/ argo liability may be limited by controls of the specify value of Cargo to carrier,	ract, the actual value of the cargo, o	l or 49 US	C Section 14	4706. Cargo cove	rage applies per truck lo	ad only. Should customer		
CE	RTIFICATE HOLDER		(CANCELLATION					
Admiral Merchants Motor Freight, Inc. 215 South 11th Street Minneapolis, MN 55403				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE;					

ACORD CORPORATION 1998

ACORD 25-N (1/95)

	ACORD _™	CERTIFICATE OF	LIARILITY	- INGIIDA	NCE	DATE(MM/DD/YY) 11/30/23			
	ODUCER	CERTIFICATE OF	THIS CER	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFO					
Hu	dson Insurance Company	24 200	AND CON	AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. COMPANIES AFFORDING COVERAGE					
	50 Priority Way, South Drive, S Iianapolis, IN 46240	ite 200							
		6)542-7618							
	nail: certificate@HudsonInsGro	up.com	COMPANY A H	COMPANY Hudson Insurance Company (NAIC# 25054)					
	SURED miral Merchants Motor Freight, I	20.0	COMPANY B						
AG	mirai werchants wotor Freight, ii	nc.	COMPANY	1					
	5 S. 11th Street nneapolis, MN 55403		COMPANY						
co	VERAGES		D	D					
	POLICY PERIOD INDICATED, NO WITH RESPECT TO WHICH THIS	POLICIES OF INSURANCE LISTED OTWITHSTANDING ANY REQUIREN S CERTIFICATE MAY BE ISSUED O HE TERMS, EXCLUSIONS AND CON	MENT, TERM OR (OR MAY PERTAIN.	CONDITION OF A THE INSURANC	ANY CONTRACT OR OT CE AFFORDED BY THE F	HER DOCUMENT POLICIES DESCRIBED			
CO LTR	TYPE OF INSRUANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION	LIMITS				
	GENERAL LIABILITY				BODILY INJURY OCC				
Α	X COMPREHENSIVE FORM	HMU200001-16	12/01/2023	12/01/2024	BODILY INJURY AGG				
	X PREMISES/OPERATIONS	111010200001-10	12/01/2020	12/01/2024	PROPERTY DAMAGE OCC				
	UNDERGROUND EXPLOSION/COLLAPSE HAZARD				PROPERTY DAMAGE OCC				
	X PRODUCTS/COMPLETED OPER				BI/PD COMBINED OCC	\$2,000,000.00 CSL			
	X CONTRACTUAL				BI/PD COMBINED AGG				
	X INDEPENDENT CONTRACTORS	'			PERSONAL INJURY AGG				
	X BROAD FORM PROPERTY DAMAGE	'							
	X PERSONAL INJURY	'		_					
	AUTOMOBILE LIABILITY	E LIABILITY			BODILY INJURY				
Α	X ANY AUTO	HMU200001-16	12/01/2023	12/01/2024	(Per person)				
	X ALL OWNED AUTOS(Private Pass) ALL OWNED AUTOS				BODILY INJURY (Per accident)				
	(Other than Private Passenger) X HIRED AUTOS X NON-OWNED AUTOS	:			PROPERTY DAMAGE				
	X NON-OWNED AUTOS GARAGE LIABILITY				BODILY INJURY				
	GARAGE LIABILITY				PROPERTY DAMAGE COMBINED	\$2,000,000.00 CSL			
	EXCESS LIABILITY				EACH OCCURRENCE				
	UMBRELLA FORM	i			AGGREGATE				
	OTHER THAN UMBRELLA FORM	i l							
ensemble de la constitución de l	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- TORY LIMITS OTH- ER EACH ACCIDENT				
	THE PROPRIETOR/ INCL	,			EL DISEASE-POLICY LIMIT				
	PARTNERS/EXECUTIVE EXCL	, 1			EL DISEASE-EA EMPLOYEE				
Α	Cargo Coverage	HMU200001-16	12/01/2023	12/01/2024	\$100,000.00 CSL				
Α	Trailer Interchange Coverage	HMU200001-16	12/01/2023	12/01/2024	\$50,000.00 CSL				
^	Trailer Interchange Coverage	HIVIO200001-10	12/01/2023	12/01/2024	\$50,000.00 CSL				
	L SCRIPTION OF OPERATIONS/LOCATIONS/				1				
	rgo liability may be limited by contr t specify value of Cargo to carrier, t	ract, the actual value of the cargo, or 4 then release rates shall apply.	49 USC Section 14	1706. Cargo cove	rage applies per truck loa	d only. Should customer			
CEI	RTIFICATE HOLDER		CANCELLA	TION					
			SHOULD AL	NY OF THE ABO	VE DESCRIBED POLICIE	S BE CANCELLED			
			BEFORE TH	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY					
	NEW MEXICO TAXATION & R	EVENUE	CERTIFICA	WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL					
8	NEW MEXICO TAXATION & R	EVENUE	ISUCH NOTI	SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE;					
-	MOTOR TRANSPORTATION/F	PERMIT	KIND UPON						
	P.O. BOX 1028 SANTA FE, NM 87504-1028		AUTHORIZED						

ACORD CORPORATION 1998

ACORD 25-N (1/95)

MINNESOTA INSURANCE IDENTIFICATION CARD

COMPANY NUMBER

COMPANY **Hudson Insurance Company**

☑ COMMERCIAL ☐PERSONAL

25054

POLICY NUMBER HMU200001-16

EFFECTIVE DATE 12/01/2023

EXPIRATION DATE 12/01/2024

YFAR

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

ALL OWNED VEHICLES

AGENCY/COMPANY ISSUING CARD Hudson Insurance Company 3950 Priority Way South Drive, Ste 200 Indianapolis, IN 46240 800-809-3660

INSURED

Admiral Merchants Motor Freight, Inc. 215 South 11th Street Minneapolis, MN 55403

SEE IMPORTANT NOTICE ON REVERSE SIDE

MINNESOTA'S NOTICE OF CRIMINAL PENALTIES.

A. Every driver, whether or not the owner, shall have in possession at all times when operating a vehicle and shall produce on demand of a peace officer proof of insurance at the time of the demand covering the vehicle being operated. If the driver does not produce the required proof of insurance upon demand of a peace officer, the driver is quilty of a misdemeanor.

B. It is unlawful for any person:

- (1) to issue, to display, or cause or permit to be displayed, or have in possession, an insurance identification card, policy, or written statement knowing or having reason to know that the insurance is not in force or is not in force as to the vehicle in question; (2) to alter or make a fictitious insurance identification card, policy, or written state-
- (3) to display an altered or fictitious insurance identification card, insurance policy, or written statement knowing or having reason to know that the proof has been altered or is fictitious.

Any person who violates (1), (2) or (3) is guilty of a misdemeanor

C. Every owner of a motor vehicle of a type which is required to be registered or licensed or is principally garaged in this state shall maintain during the period in which operation or insurance or other security covering the vehicle. A person who violates this is quilty of a misdemeanor.