



Exhibit B - Insurance Zambelli Fireworks MFG Co. Inc.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/17/2017

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: Allied Specialty Insurance, Inc. 10451 Gulf Blvd, Treasure Island, FL 33706-4814. CONTACT NAME: Michelle Kugler, PHONE: 727-547-3070, FAX: 727-367-5695, E-MAIL ADDRESS: mkugler@alliedspecialty.com. INSURER(S) AFFORDING COVERAGE: T.H.E. Insurance Company, NAIC #: 12866. INSURED: ZAMBELLI FIREWORKS MFG CO, INC., ETAL, 20 SOUTH MERCER STREET, NEW CASTLE PA 16101.

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Excess Liab, Workers Compensation and Employers' Liability, and Inland Marine / Hull.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Display Date: July 4, 2017 Rain Date: Location: Pompano Beach Pier, 222 N Pompano Beach Blvd, Pompano Beach, FL RE: General Liability, the following are named as additional insured in respects to the negligence of the named insured: City of Pompano Beach, The Whiting-Turner Contracting Company, Murray Logan Construction Inc., ATIMA. Further this Insurance will be deemed to be primary and non-contributory with respect to the Insurance of such additional insured if you agreed to such a condition in the written contract with such additional insured. Thirty (30) days written notice of cancellation applies

CERTIFICATE HOLDER CANCELLATION

CERTIFICATE HOLDER: City of Pompano Beach, 100 West Atlantic Blvd, Pompano Beach, FL 33060. C# 514336. 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: Carol A Serra

APPROVED By John Mealer at 1:53 pm, May 23, 2017