

BID ACKNOWLEDGEMENT COVER PAGE

SUBMIT BIDS TO:

Wellington
Attn: Clerk's Office
12300 Forest Hill Blvd
Wellington, FL 33414

REFER ALL INQUIRIES TO PRIMARY CONTACT:

Purchasing Division
12300 Forest Hill Blvd
Wellington, FL 33414
Ph:(561) 791-4107 Fax: (561) 904-5817

Wellington

INVITATION TO BID

BID TITLE:

Waste Water Treatment Plant Aeration Tanks Rehabilitation

BID NO:

026-14/DZ

NAME OF FIRM, ENTITY, or ORGANIZATION:

Southland Painting Corp.

NAME OF CONTACT PERSON

Jozef Verhelst

VENDOR MAILING ADDRESS:

2635 NW 4th Street

CITY:

Ft. Lauderdale 33311 FL

ZIP:

STATE:

TITLE

President

VENDOR HEADQUARTERS ADDRESS (IF DIFFERENT):

N/A

CITY:

N/A

ZIP:

N/A

STATE:

N/A

PHONE NUMBER:

(954) 748-2770

FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN):

59-227-8618

EMAIL ADDRESS:

jefkmv45@msn.com

STATE OF FLORIDA BUSINESS LICENSE NUMBER (IF APPLICABLE)

N/A

FAX NUMBER:

(954) 748-2901

ORGANIZATIONAL STRUCTURE (Please Check One):

Corporation ☒

Partnership ☐

PROPRIETORSHIP ☐

Joint Venture ☐

Other ☐

If Corporation, please provide the following:

(A)

Country of Incorporation: Florida
Month / Day / Year

Date of Incorporation: April 14, 1983

(B) State or

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all terms and conditions of this bid and certify that I am authorized to sign this bid for the bidder and that the bidder is in compliance with all requirements of the Invitation to Bid, including but not limited to, certification requirements.

AUTHORIZED SIGNATURE (MANUAL)

/ Jozef Verhelst

AUTHORIZED SIGNATURE (PRINT OR TYPED)

/ President

TITLE (PRINT OR TYPED)

BID PROPOSAL CHECKLIST

Please submit your proposal in this order

- YES ☒ NO ☐ 1. Bid submittal – one (1) original and one (1) PDF (CD or flash drive) Copy
- YES ☒ NO ☐ 2. Bid Form signed by authorized representative
- YES ☒ NO ☐ 3. Acknowledgment of addendums
- YES ☒ NO ☐ 4. Bid Bond/Security or Cashier's Check
- YES ☒ NO ☐ 5. Schedule of Value
- YES ☒ NO ☐ 6. Schedule of Subcontractor/Supplies
- YES ☒ NO ☐ 7. Schedule of Equipment and Materials
- YES ☒ NO ☐ 8. Sworn Statement under Section 287.133(3) (a)
- YES ☒ NO ☐ 9. Drug Free Workplace
- YES ☒ NO ☐ 10. Trench Safety Affidavit
- YES ☒ NO ☐ 11. Questionnaire
- YES ☒ NO ☐ 12. References
- YES ☒ NO ☐ 13. Insurance Certificates
- YES ☒ NO ☐ 14. Copy of Appropriate Licenses
- YES ☒ NO ☐ 15. Proof of Workers Compensation Insurance/Workers Compensation Exemption Affidavit
- YES ☒ NO ☐ 16. Local Preference Affidavit
- YES ☒ NO ☐ 17. Conflict of Interest Statement
- YES ☒ NO ☐ 18. Non-Collusion Affidavit

BID FORM

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

PROJECT: Waste Water Treatment Plant Aeration Tanks Rehabilitation

Date: 8/13/2014

BIDDER: Southland Painting Corp.

THIS BID IS SUBMITTED TO:

Wellington
Clerk's Office
12300 Forest Hill Boulevard
Wellington, FL 33414

1. The undersigned BIDDER proposes and agrees, if this Bid is accepted, to enter into an Agreement with OWNER in the form included in the Contract Documents to perform and furnish all Work as specified or indicated in the Contract Documents for the Contract Price and within the Contract Time indicated in this Bid and in accordance with the other terms and conditions of the Contract Documents.
2. BIDDER accepts all of the terms and conditions of the Advertisement or Invitation to Bid and Instructions to Bidders, including without limitation those dealing with the disposition of Bid security. This Bid will remain subject to acceptance for 120 days after the posting of the recommended award. BIDDER will sign and submit the Agreement and other documents required by the Bidding Requirements within 15 days after the date of OWNER'S Notice of Award.
3. In submitting this Bid, BIDDER represents, as more fully set forth in the Agreement, that:

(a) BIDDER has examined copies of all the Bidding Documents and of the following Addenda (receipt of all which is hereby acknowledged):

Date	<u>N/A</u>
Date	<u>N/A</u>
Date	<u>N/A</u>

Addenda Number	<u>N/A</u>
Addenda Number	<u>N/A</u>
Addenda Number	<u>N/A</u>

(b) BIDDER has familiarized itself with the nature and extent of the Contract Documents, Work, Site, locality, and all local conditions, Laws, and Regulations that in any manner may affect cost, progress, performance, or furnishing of the Work.

(c) BIDDER has studied carefully all reports and drawings of subsurface conditions and drawings of physical conditions which, if any, are attached to the Contract Documents, as provided in Paragraph 4.02 of the General Conditions, and accepts the determination as set forth in the Bidding Documents of the extent of the technical data contained in such reports and drawings upon which BIDDER is entitled to rely.

(d) BIDDER has obtained and carefully studied (or assumes responsibility for obtaining and carefully studying) all such examinations, investigations, explorations, tests and studies (in addition to or to supplement those referred to in (c) above) which pertain to the subsurface or physical conditions at the site or otherwise may affect the cost, progress, performance or furnishing of the Work as BIDDER considers necessary for the performance or furnishing of the Work at the Contract Price, within the Contract Time and in accordance with the other terms and conditions of the Contract Documents, including specifically the provisions of Paragraph 4.02 of the General Conditions; and no additional examinations, investigations, explorations, tests, reports or similar information or data are or will be required by BIDDER for such purposes.

(e) BIDDER has reviewed and checked all information and data shown or indicated on the Contract Documents with respect to existing Underground Facilities at or contiguous to the site and assumes responsibility for the accurate location of said Underground Facilities. No additional examinations, investigations, explorations, tests, reports or similar information or data in respect of said Underground Facilities are or will be required by BIDDER in order to perform and furnish the Work at the Contract price, within the Contract Time and in accordance with the other terms and conditions of the Contract Documents, including specifically the provisions of Paragraph 4.04 of the General Conditions.

(f) BIDDER has correlated the results of all such observations, examinations, investigations, explorations, tests, reports, and studies with the terms and conditions of the Contract Documents.

(g) BIDDER has given OWNER written notice of all conflicts, errors or discrepancies that it has discovered in the Contract Documents and the written resolution thereof by ENGINEER is acceptable to BIDDER.

(h) This Bid is genuine and not made in the interest of or on behalf of any undisclosed person, firm, or corporation and is not submitted in conformity with any agreement or rules of any group, association, organization or corporation; BIDDER has not directly or indirectly induced or solicited any other Bidder to submit a false or sham Bid; BIDDER has not solicited or induced any person, firm or corporation to refrain from bidding; and BIDDER has not sought by collusion to obtain for itself any advantage over any other Bidder or over OWNER.

4. BIDDER agrees to perform all the Work described in Contract Documents, subject to adjustments as provided therein, for the Prices BIDDER provides on the Schedule of Values.
5. BIDDER declares it understands that the unit quantities shown on the Bid Form Unit Price Schedule are approximate only and not guaranteed and are subject to either increase or decrease; and that should the quantities of any of the items of Work be increased, the BIDDER agrees to do the additional Work at the unit prices set out herein, and should the quantities be decreased, BIDDER also understands that final payment shall be made on actual quantities completed at the unit prices, and shall make no claims for anticipated profits for any decrease in the quantities.
6. The BIDDER further declares its understands the OWNER may elect to construct only a portion of the Work covered by these Documents and BIDDER agrees to perform that portion of the Work for which BIDDER is awarded a Contract at the unit prices quoted herein.
7. BIDDER agrees that the Work:

The Waste Water Treatment Plant Aeration Tanks Rehabilitation project shall be Substantially Complete within **60** days of Notice to Proceed and Finally Complete within **75** days of Notice to Proceed. Work hours Monday – Friday 7am – 6pm, excluding holidays.

BIDDER accepts the provisions of the Agreement as to liquidated damages in the event of failure to complete the Work on time.

8. The following documents are attached to and made a condition of this Bid:

- (a) Required Bid security in the form of Bid Bond.
- (b) Schedule of Values.
- (c) List other documents as pertinent.

9. Communications concerning this Bid shall be telephoned or addressed to:

Name: Jozef Verhelst
Address: 2635 NW 4th Street
Ft. Lauderdale, FL 33311
Phone No.: (954) 748-2770 Fax: (954) 748-2901

10. The terms used in this Bid which are defined in the General Conditions of the Construction Contract included as part of the Contract Documents have the meanings assigned to them in the General Conditions.
11. BIDDER'S Florida Contractor's License No. U-13390
12. BIDDER covenants that it is qualified to do business in the State of Florida and has attached evidence of BIDDER'S qualification to do business in the State of Florida, or if not attached, BIDDER covenants to obtain such evidence within five days of request by OWNER to provide evidence.

If BIDDER is

An Individual

Name _____ (SEAL)

Signature: _____

Doing business as _____ N/A

Business Address: _____

Phone Number: _____

Fax Number _____

A Partnership

Firm's Name _____ (SEAL)

General Partner Signature: _____

Business Address: _____ N/A

Phone Number: _____

Fax Number _____

A Corporation

Corporation's Name Southland Painting Corp. (SEAL)

State of Incorporation Florida

Authorized Person: Jozef Verhelst

Title: President

Signature: _____

Attest: Nancy Verhelst (Secretary)

Signature: Nancy Verhelst

Business Address: 2635 NW 4th Street

Ft. Lauderdale, FL 33311

Phone Number: (954) 748-2770

Fax Number (954) 748-2901

BID BOND/SECURITY

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

KNOW ALL MEN BY THESE PRESENTS, that we SOUTHLAND PAINTING CORP.

as Principal, hereinafter called the Principal, and DEVELOPERS SURETY AND INDEMNITY COMPANY

as a corporation duly organized under the laws of the State of IOWA as Surety, hereinafter called the Surety, are held and firmly bound unto Wellington, Purchasing Dept., 12300 Forest Hill Boulevard, Wellington, FL 33414

as Obligor, hereinafter called the Obligor, in the sum of Ten Percent (10%) of amount bid for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the said Principal has submitted a bid for ITB 026-14/DZ - Waste Water Treatment Plant Aeration Tanks Rehabilitation.

NOW, THEREFORE, if the Obligor shall accept the bid of the Principal and the Principal shall enter into a Contract with the Obligor in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Obligor the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Obligor may in good faith contract with another party to perform the Work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect.

Signed and sealed AUGUST 11, 2014

Witnesses:

SOUTHLAND PAINTING CORP.

Seal

By: 

DEVELOPERS SURETY AND INDEMNITY COMPANY

Seal

By: 

ARTHUR K. BRODER, AGENT & ATTORNEY
IN FACT

**POWER OF ATTORNEY FOR
DEVELOPERS SURETY AND INDEMNITY COMPANY**
PO Box 19725, IRVINE, CA 92623 (949) 263-3300

KNOW ALL BY THESE PRESENTS that except as expressly limited, DEVELOPERS SURETY AND INDEMNITY COMPANY, does hereby make, constitute and appoint:

Michael P. Broder, Arthur K. Broder, jointly or severally

as its true and lawful Attorney(s)-in-Fact, to make, execute, deliver and acknowledge, for and on behalf of said corporation, as surety, bonds, undertakings and contracts of suretyship giving and granting unto said Attorney(s)-in-Fact full power and authority to do and to perform every act necessary, requisite or proper to be done in connection therewith as each of said corporation could do, but reserving to each of said corporation full power of substitution and revocation, and all of the acts of said Attorney(s)-in-Fact, pursuant to these presents, are hereby ratified and confirmed.

This Power of Attorney is granted and is signed by facsimile under and by authority of the following resolution adopted by the Board of Directors of DEVELOPERS SURETY AND INDEMNITY COMPANY, effective as of January 1st, 2008.

RESOLVED, that a combination of any two of the Chairman of the Board, the President, any Executive Vice-President, Senior Vice-President or Vice-President of the corporation be, and that each of them hereby is, authorized to execute this Power of Attorney, qualifying the attorney(s) named in the Power of Attorney to execute, on behalf of the corporation, bonds, undertakings and contracts of suretyship; and that the Secretary or any Assistant Secretary of the corporation be, and each of them hereby is, authorized to attest the execution of any such Power of Attorney;

RESOLVED, FURTHER, that the signatures of such officers may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signatures shall be valid and binding upon the corporation when so affixed and in the future with respect to any bond, undertaking or contract of suretyship to which it is attached.

IN WITNESS WHEREOF, DEVELOPERS SURETY AND INDEMNITY COMPANY has caused these presents to be signed by its officers and attested by its Secretary or Assistant Secretary this October 4th, 2011.

By: Daniel Young
Daniel Young, Senior Vice-President

By: Steve A. Tvedt
Steve A. Tvedt, Vice-President



State of California
County of Orange

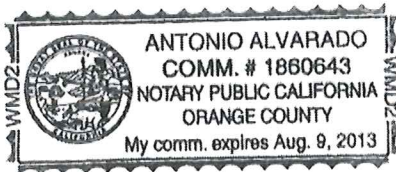
On October 4, 2011
Date

before me,

Antonio Alvarado, Notary Public

Here Insert Name and Title of the Officer

personally appeared Daniel Young and Steve A. Tvedt
Name(s) of Signer(s)



Place Notary Seal Above

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Antonio Alvarado

Antonio Alvarado, Notary Public

CERTIFICATE

The undersigned, as Secretary or Assistant Secretary of DEVELOPERS SURETY AND INDEMNITY COMPANY does hereby certify that the foregoing Power of Attorney remains in full force and has not been revoked and, furthermore, that the provisions of the resolution of the Board of Directors of said corporation set forth in the Power of Attorney are in force as of the date of this Certificate.

This Certificate is executed in the City of Irvine, California, this 11th day of August, 2014

By: Gregg N. Okura
Gregg Okura, Assistant Secretary

ID-1438 (Rev. 10/11)

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

SCHEDULE OF VALUES

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Item No.	Description	Estimated Quantity	Unit of Measure	Unit Price	Total for Item
1	Waste Water Treatment Plant Aeration Tanks Rehabilitation per bid documents and plans	1	EA	\$90,500.00	\$90,500.00
	TOTAL CONTRACT PRICE				\$90,500.00
	TOTAL CONTRACT PRICE (in words)	Ninety thousand five hundred dollars and zero cents			

BIDDER/CONTRACTOR understands and agrees that this is a Lump Sum Contract and that successful contractor shall prepare and submit a detailed Schedule of Values to Wellington for approval prior to first payment application.

SCHEDULE OF SUBCONTRACTORS

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

<u>Discipline</u>	<u>Subcontractor</u>	<u>Address City, ST, Zip</u>	<u>License Number</u>
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

Address of Subcontractor may be considered in accordance with Wellington's Local Preference Policy

SCHEDULE OF EQUIPMENT AND MATERIALS

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Item	Manufacturer	Description
Compressor	Sullair	900 CFM
Blast Pot	Clemco	600 lbs remote
Pressure Washer	Honda	4,000 PSI
Pump Sprayer	Graco	Airless
Air Blowers	Allegro	Electric Fan
Scaffolding	To be rented	Scaffolding
Black Beauty	Harsco	Blasting Abrasive
S135 Chembuild	Tnemec	Polyamidoamine Epoxy
Series 219	Tnemec	Epoxy Modified Cement
Vinester 120-5002	Tnemec	Vinyl Ester
Vinester 120-5003	Tnemec	Vinyl Ester

**SWORN STATEMENT UNDER SECTION 287.133(3)(a), FLORIDA
STATUTES, ON PUBLIC ENTITY CRIMES**

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-
RESPONSIVE)

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER
OFFICER AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted to Wellington, Florida
[print name of the public entity]
by Jozef Verhelst, President
[print individual's name and title]
for Southland Painting Corp.
[print name of entity submitting sworn statement]

whose business address is 2635 NW 4th Street
Ft. Lauderdale, FL 33311

and (if applicable) its Federal Employer Identification Number (FEIN) is 59-227-8618

(If the entity has no FEIN, include the Social Security Number of the individual signing this sworn
statement: N/A.)

2. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services or any contract for the construction or repair of a public building or public work, to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3. 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 any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that an "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.
5. I understand that a "person" as defined in Paragraph 287.133(1)(c), Florida Statutes, means any natural person or 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 for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners,

shareholders, employees, members, and agents who are active in management of an entity.

6. 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.]

X Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in 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.

_____ The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer 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]

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 THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

[signature]

8/12/2014
[date]

STATE OF

Florida

COUNTY OF

Broward

Subscribed and Sworn to (or affirmed) before me on August 12, 2014 by

[date]

Peggy Verduist
[name]

He/she is personally known to me or has presented

_____ as identification.

[type of identification]



LIZETH M. FOSTER
MY COMMISSION # EE 099715
EXPIRES: June 13, 2015
Bonded Thru Budget Notary Services

[Notary's Signature and Seal]
Form PUR 7068 (Rev. 04/10/91)
M/R 03/06/92

Print Notary Name and Commission No.


DRUG FREE WORKPLACE

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Preference may 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 Owner 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 may be given preference in the award process. Established procedures for processing tied Bids 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 must attest to the following:

1. We 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. We 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. We 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. We, in the statement specified in subsection (1), notify the employees 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. We 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. We make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

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


Contractor's Signature

TRENCH SAFETY AFFIDAVIT

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Southland Painting Corp (NAME OF FIRM) hereby provides written assurance that compliance with applicable Trench Safety Standards identified in the Occupational Safety and Health Administration's Excavation Safety Standards, (OSHA) 29 C.F.R.S. 1926.650 Subpart P will be adhered to during trench excavation in accordance with Florida Statutes 553.60 through 553.64 inclusive (1990), "Trench Safety Act".

The undersigned acknowledges that included in the various items of the proposal and in the Total Proposal Price are costs for complying with the Florida "Trench Safety Act" as summarized below: (Attach additional sheets as necessary).

Schedule Item	Trench Safety Measure (Slope, Trench Shield, etc.)	Cost
	N/A	
	Total	

(Signature) (Date)

STATE OF Florida

COUNTY OF Broward

on August 12, 2014 Subscribed and Sworn to by (or affirmed) before me

presented Lizeth M. Foster. He/she is personally known to me or has

Notary Public Signature and Seal



LIZETH M. FOSTER
MY COMMISSION # EE 099715
EXPIRES: June 13, 2015
Bonded Thru Budget Notary Services

Print Notary Name and Commission No.

QUESTIONNAIRE

The following Questionnaire shall be completed and submitted in Envelope with the Bid. By submission of this Bid, Bidder guarantees the truth and accuracy of all statements and answers herein contained.

1. How many years has your organization been in business? 32

2. What is the last project of this nature that you have completed?

Immokalee Water & Sewer District WW System Improvements

Owner- Immokalee Water & Sewer District

General Contractor- Florida Design Contractors

3. Have you ever failed to complete work awarded to you? If so, where and why?

No.

4. Name three individuals or corporations for which you have performed work and to which you refer:

<u>Ray Shimokubo</u>	<u>shimokubo@fkaa.com</u>	<u>(305) 296-2454</u>
Name	Email Address	Phone

<u>John Hoffman</u>	<u>jhoffman@hazenandsawyer.com</u>	<u>(954) 249-9288</u>
Name	Email Address	Phone

<u>Kevin Smith</u>	<u>kevin_smith@emcorgroup.com</u>	<u>(786) 623-2931</u>
Name	Email Address	Phone

5. List the following information concerning all contracts OR projects in progress and past as of the date of submission of this bid. (List any Federal, State, City or local municipalities/government contracts or project information if any relevant in scope with this solicitation).

Information provided in (section 5) is for reference purposes and may be contacted for verification.

Name of Term Contract OR Project	Owner	Contact (Person) Name & Title	Contact Email Address & Phone Number	Contact Business Address
*** PLEASE SEE ATTACHED ***				

6. Has the bidder or his or her representative inspected the proposed project and does the Bidder have a complete plan for its performance?

Yes.

7. Will you subcontract any part of this work? If so, give details including a list of each subcontractor(s) that will perform work in excess of the percent (10%) of the contract amount and the work that will be performed by each subcontractor(s).

Subcontractor	Work to be Performed
N/A	N/A
N/A	N/A
N/A	N/A
N/A	N/A

8. What equipment do you own that is available for the work? compressor, blast pot, pressure washer, pump sprayer, air blowers
9. What equipment will you purchase for the proposed work? coating & abrasive materials
10. What equipment will you rent for the proposed work? scaffolding
11. State the name of your proposed project manager and give details of his or her qualifications and experience in managing similar jobs.
Carlos Rocha. Please see attached resume.
Jessie Foster. Please see attached resume.
12. State the true, exact, correct and complete name of the partnership, corporation, or trade name under which you do business and the address of the place of business. (If a corporation, state the name of the president and secretary. If a partnership, state the names of all partners. If a trade name, state the names of the individuals who do businesses under the trade name.
13. The correct name of the Bidder is Southland Painting Corp.
14. The partnership is a ☐ Sole Proprietorship, ☐ Partnership, or ☒ Corporation or ☐ Other Type of Entity _____ (Fill In).
15. The address of principal place of business is 2635 NW 4th Street

Ft. Lauderdale, FL 33311

16. The names of the Corporate Officers, or Partners, or Individuals doing business under a trade name, are as follows:

Jozef Verhelst, President

Nancy Verhelst, Secretary

17. List all organizations which were predecessors to Bidder or in which the principals or officers of the Bidder were principals or officers.

None.

18. List and describe all bankruptcy petitions (Voluntary or Involuntary) which have been filed by or against the Bidder, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.

Not Applicable.

19. List and describe all successful Performance or Payment Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Bidder and its predecessor organization(s).

None.

20. List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Bidder or its predecessor organization(s) during the last five (5) years. The list shall include all case names; case, arbitration, or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.

None.

21. List and describe all criminal proceedings or hearings concerning business related offenses in which the Bidder, its principals or officers or predecessor organization (s) were defendants.

None.

22. Has the Bidder, its principals, officers, or predecessor organization(s) been debarred or suspended from bidding by any government during the last five (5) years? If yes, provide details.

No.

23. List and disclose any and all business relations with any members of Wellington Council.

None.

**SOUTHLAND PAINTING CORP.
EXISTING WORKLOAD**

Questionnaire
Item # 5

NAME OF TERM CONTRACT OR PROJECT	OWNER	CONTACT (PERSON) NAME & TITLE	CONTACT EMAIL ADDRESS & PHONE NUMBER	CONTACT BUSINESS ADDRESS
Electrical Generator Palm Beach Co.	City of West Palm Beach	Poole & Kent Jones, Project Mgr	ericj@pkflorida.com 305/345-6039	1781 NW North River Drive Miami, FL 33125
Manatee Co. SWWRF Lake Filtration	Manatee County	Cardinal Contractors Michael Brandao, Project Mgr	mbrandao@cardinalco.com 941/377-8555	10405 Technology Terrace Lakewood Ranch, FL 34211
Gulfstream Master Pump Station Conversion	City of Plantation	RJ Sullivan William Pulsford, Project Mgr	wpulsford@risullivancorp.com 954/975-0388	2001 NW 22nd Street Pompano Beach, FL 33069
City of Boca OSG Rehab.	City of Boca Raton	Wharton Smith Nick Martin, Project Mgr	nmartin@whartonsmith.com 561/575-6340	125 W. Indiantown Rd., Ste. 201 Jupiter, FL 33458
S-5A Pump Station, Palm Beach County	South Fl. Water Mgmt District	Lambert Bros. Charles Young, Sr. Project Mgr	cyl@lambertbros.net 954/491-9380	823 NW 57th Street Ft. Lauderdale, FL 33309
SCR WWTP - Secondary Clarifiers Rehab	SCRWWTP & Disposal Board	Florida Design Con. Orlando Rivera, Project Mgr	orlandor@floridadesigncontractors.com 561/275-2282	1326 South Killian Drive Lake Park, FL 33403

**SOUTHLAND PAINTING CORP.
EXISTING WORKLOAD**

Questionnaire
Item # 5

NAME OF TERM CONTRACT OR PROJECT	OWNER	CONTACT (PERSON) NAME & TITLE	CONTACT EMAIL ADDRESS & PHONE NUMBER	CONTACT BUSINESS ADDRESS
Henry A. Gahn WTP, Filters 1-5 Rehab.	Ft. Pierce Utilities Authority	Globaltech, Inc. David Schuman, Sr. Project Mgr	dschuman@globaltechdb.com 561/997-6433	6001 Broken Sound Pkwy, Ste. 610 Boca Raton, FL 33487
Martin County RAS-WAS Pump Station	Martin County Utilities	TLC Diversified, Inc. Charles Schermer, Purchaser	cschermer@tlcdiversified.com 941/722-0621	7233 Southern Blvd, Ste B-1 West Palm Beach, FL 33413
Southwest WWTP, Repair & Replacement	City of Sunrise	John J. Kirlin Sam Akrouk, Sr. Project Mgr	sakrouk@jjkllc.com 954/739-8100	3125 W. Commercial Blvd, Ste. 200 Ft. Lauderdale, FL 33309
John Young Pkwy, Master Pump Station Improvements	Orange Co Utilities	Prime Construction Tom Perley, Chief Operations Officer	Tperley@pcginc.org 407/856-8180	1000 Jetstream Drive Orlando, FL 32824
Jensen Beach North WTP Backwash Pump Replacement	Martin Co. Utilities	Wharton-Smith, Inc. Nick Martin, Project Manager	nmartin@whartonsmith.com 561/748-5956	125 W. Indiantown Rd, Ste 201 Jupiter, FL 33458
Lake Worth Potable Well No. 16	City of Lake Worth	Florida Design Drilling Jeffrey Holst, Project Mgr	jeff@fldrilling.com 561/818-3228	7733 Hooper Road West Palm Beach, FL 33411

**SOUTHLAND PAINTING CORP.
EXISTING WORKLOAD**

Questionnaire
Item # 5

NAME OF TERM CONTRACT OR PROJECT	OWNER	CONTACT (PERSON) NAME & TITLE	CONTACT EMAIL ADDRESS & PHONE NUMBER	CONTACT BUSINESS ADDRESS
Painting Needs at the Westport WWTP	City of Pt. St. Lucie	City of Pt. St. Lucie Pierre Vignier, Plant Superintendent	pvignier@cityofpsl.com 772/871-5434	900 SE Ogdan Lane Pt. St. Lucie, FL 34983
Pressure Wash/Paint Wrhs Bldg Walton Rd	City of Pt. St. Lucie	City of Pt. St. Lucie Pierre Vignier, Plant Superintendent	pvignier@cityofpsl.com 772/871-5434	900 SE Ogdan Lane Pt. St. Lucie, FL 34983
Alex Orr Inspection/Norwood Water Plant	City of North Miami Beach	MWH Americas, Inc Gregg Johnson, Sr. Subcontract Administrator	gregg.r.johnson@mwhglobal.com 916/924-8844	3321 Power Inn Rd, Ste. 300 Sacramento, CA 95826
St. Lucie West High Svcs Pump Station	St. Lucie West Svcs District	Wharton Smith Julio Corena, Project Mgr	icorena@whartonsmith.com 561/575-6340	125 W. Indiantown Rd, Ste. 201 Jupiter, FL 33458
Inspections at Hollywood WWTP	City of Hollywood	Cardinal Contractors, Inc. Don Mullaney, Project Mgr	dmullaney@cardinalco.com 941/377-8555	10405 Technology Terrace Lakewood Ranch, FL 34211

**SOUTHLAND PAINTING CORP.
EXISTING WORKLOAD**

Questionnaire
Item # 5

NAME OF TERM CONTRACT OR PROJECT	OWNER	CONTACT (PERSON) NAME & TITLE	CONTACT EMAIL ADDRESS & PHONE NUMBER	CONTACT BUSINESS ADDRESS
Pt. St. Lucie West Fence	City of Pt. St. Lucie Lucie	City of Pt. St. Lucie Pierre Vignier, Plant Superintendent	p.vignier@cityofpsl.com 772/871-5434	900 SE Ogdan Lane Pt. St. Lucie, FL 34983
Naples- WWTP Reuse Pump Replacement	City of Naples	Douglas N Higgins Brandy Bartolone, Vice President	brandymb@dnhiggins.com 734/996-9500	4485 Enterprise Avenue Naples, FL 34104

Carlos M. Rocha Jr.
5510 Pacific Boulevard, # 108
Boca Raton, FL 33433
954/326-3055
Carlos@southlandpainting.com

CERTIFICATION

Osha 30hrs
RRP Lead Certified
C3 – SSPC Safety Supervisor
Quality Control Supervisor/PCI Level 1

OVERVIEW/SKILLS

A highly motivated project manager with a verifiable record of accomplishment spanning 12 years. Highly creative, recognized as a results-oriented and solution-focused individual. Areas of strength include:

- Necessary on site administration along with proper quality control measures for ensuring the entire project finish on time and as budgeted.
- Provide necessary coordination and planning for the contractors along with the subcontractors.
- Organize cost control with required payroll management.
- Responsible for subcontract negotiations and purchase orders as well as usual contracts with customers.
- Organizational Skills
- Determine labor requirements and dispatch workers to construction sites.
- Interpret and explain plans and contract terms to administrative staff, workers, and clients; representing the owner or developer.
- Obtain all necessary permits and licenses.
- Computer Literacy
- Communication Skills
- Time Management Skills
- Staff Supervision
- Ability to perform mathematical computations such as percentages, fractions, addition, subtraction, multiplication and division quickly and accurately.
- Ability to work independently and with a team in a fast-paced and high volume environment with emphasis on accuracy and timeliness.
- Trilingual- English, Portuguese, Spanish

COMPUTER SKILLS

- Microsoft Word
- Microsoft Excel
- Word Perfect

EDUCATION

09/94 – 06/98

North Bergen High School, North Bergen, NJ

EMPLOYMENT
02/01 – 09/02

Rocha Construction, Union City, NJ

Construction Manager

- Coordinated the Construction Process
- Responsible for hiring carpenters, general laborers and electricians to work a construction project.
- Dealing with emergency situations as they arise.
- Inspected and reviewed projects to monitor compliance with building and safety codes, and other regulations.
- Directed and supervised workers
- Attended and Conducted Tool Box Meetings
- Attended and Conducted weekly safety meetings
- Responsible for on field safety and quality compliance on various restoration projects
- Oversight of Contractors on site safety engineer

09/02 – 09/04

Pino & Son Supply, Union City, NJ

Store Manager

- Managed time, multi-task, problem solve.
- Management of Accounts Receivable; Management of customer accounts including sales and customer services; Inventory Management including Purchasing and Receiving.
- Design and set up advertising signs and displays of merchandise on shelves, counters, or table to attract customers and promote sales.
- Take inventory or examine merchandise to identify items to be reordered or replenished.
- Answer customers' questions about merchandise and advise customers on merchandise selection.
- Maintenance of the books of daily transactions done by the company.
- File materials in alphabetical, numerical, or subject order.

06/04 – 02/13

Quality Pro Painters

Project Manager/Painter

- Knowledge of the tools, equipment, materials, and application techniques common to the painting trade.
- Skill in the preparation and application of paints, stains, and surface preparation materials to a wide variety of surfaces.
- Knowledge and skill in hazardous materials handling, application, and disposal.
- Created and executed project work plans and revised as appropriate to meet changing needs and requirements.
- Managed day-to-day operational aspects of a project and scope.
- Managed project budget.
- Developed effective plans, creating project schedules that took into account all stages of the plan and established deadlines.
- Attended and Conducted Tool Box Meetings
- Attended and Conducted weekly safety meetings
- Responsible for on field safety and quality compliance on various restoration projects
- Oversight of Contractors on site safety engineer

06/13 – 10/13**Innovative Carpentry***Project Manager/Carpenter*

- Necessary on site administration along with proper quality control measures for ensuring the entire project finish on time and on budget.
- Responsible for on field safety and quality compliance on various restoration projects
- Skill in the preparation and application of paints, stains, and surface preparation materials to a wide variety of surfaces
- Installation of kitchen cabinets
- Developed effective plans, creating project schedules that took into account all stages of the plan and established deadlines.

10/13 – Present**Southland Painting Corp.***Regional Manager/Quality Control Supervisor*

- Knowledge of the tools, equipment, materials, and application techniques common to the painting trade.
- Knowledge and skill in hazardous materials handling, application, and disposal.
- Created and executed project work plans are revise as appropriate to meet changing needs and requirements.
- Manage day-to-day operational aspects of a project and scope.
- Manage project budget.
- Develop effective plans, creating project schedules that take into account of stages of the plan and establish deadlines.
- Attend and Conduct Tool Box Meetings.
- Attend and Conduct weekly safety meetings.
- Responsible for on field safety and quality compliance on various projects.
- Oversight of Contractors on site safety engineer.

JESSIE FOSTER

QUESTIONNAIRE #11

Quality Control Supervisor & Regional Manager, Southland Painting Corp.

Cell 954/854-3138

jessiefoster55@msn.com

Skill Highlights

- Quality Management
- Project Planning
- Operations Start-up
- Project Management
- Employee Scheduling
- Training & Development
- Leadership/Communication Skills
- Highly experienced & skilled in operating equipment including, but not limited to: sandblasting equipment, airless sprayers plural components, 40K ultra high water jetting, ecoquip.

Professional Experience

Jessie Foster joined Southland Painting Corp., Ft. Lauderdale, in 1994 as a Field Foreman/Painter. In 2001 he moved on to Project Management. Jessie is currently the Quality Control Supervisor & Regional Manager for Southland Painting, overseeing all of the projects in Florida.

Major Projects Managed & Completed

Army Corps of Engineers
PS 319, West Palm Beach, FL
General Contractor- Bell Constructors, Inc.

Army Corps of Engineers
PS 357, Everglades National Park
Homestead, FL
General Contractor- Skanska USA

2002 Wastewater Treatment Plant Upgrade
Hollywood, FL
General Contractor- The Poole & Kent Co.

South District Wastewater Treatment Plant Upgrade
Miami (Blackpoint), FL
General Contractor- The Poole & Kent Co.

South District Wastewater Treatment Plant Upgrade
Sodium Hypochlorite
General Contractor- Skanska USA

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

Certifications

SSPC Certifications

- Project Management for the Industrial Painting Contractor
- Quality Control Supervisor
- Concrete Coatings Inspector- Levels 1, 2, and 3; Certification# 44713
- C-3 and C-5: Supervisor/Competent Person for Deleading of Industrial Structures
- C-7: Dry Abrasive Blaster Qualification Program
- CAS, Coating Application Specialist (Full Status)
- Train the Trainer

NACE Certified Coating Inspector

Levels 1, 2, and 3; Certification # 37106

Greenman-Pedersen, Inc. (SSPC Approved)

QA/QC Basic Corrosion, Coatings, & Inspection

C.I.M. Industries, Inc.

Factory Trained Applicator Program

Sherwin Williams

Factory Trained Plural Component /Sherflex

Memberships

- Florida Council PDCA Organization
Formerly President of the Gulfstream Chapter & of the Florida Council
- SSPC: The Society for Protective Coatings
- NACE International, The Corrosion Society
- ASTM International

Education

Bachelor of Arts, Political Science Tuskegee University	1979
Associates of Arts, Political Science Lake City Community College	1976
High School Diploma Haines City High School	1974

Southland Painting Corp.

References

- Orlando Rivera
Project Manager
Florida Design Contractors, Inc.
(561)578-9075
orlandor@floridadesigncontractors.com
- Pierre Vignier
Plant Superintendent
City of Pt. St. Lucie
(772)871-5434
pvignier@cityofpsl.com
- John Hoffman
Engineer
Hazen & Sawyer
(954)249-9288
jhoffman@hazenandsawyer.com
- Bob Binda
Construction Manager
Gibraltar Construction Co.
(813)220-7722
bobbinda@verizon.net



SOUTHL7

OP ID: D3

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/13/2014

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 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 Brown & Brown of Florida, Inc. 1201 W Cypress Creek Rd # 130 P.O. Box 5727 Ft. Lauderdale, FL 33310-5727 Michael Gorham	CONTACT NAME:	
	PHONE (A/C, No, Ext): 954-776-2222	FAX (A/C, No): 954-776-4446
INSURED Southland Painting Corp. 2635 NW 4th St. Ft. Lauderdale, FL 33311	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Amerisure Mutual Ins. Co.	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
INSURER F:		
NAIC #		
23396		

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			CPP208792601	06/15/2014	06/15/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							Emp Ben. \$ 1,000,000
A	AUTOMOBILE LIABILITY			CA208792501	06/15/2014	06/15/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (PER ACCIDENT) \$
A	UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR		CU208792701	06/15/2014	06/15/2015	EACH OCCURRENCE \$ 4,000,000
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 4,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 0						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				WC STATU-TORY LIMITS
	If yes, describe under DESCRIPTION OF OPERATIONS below						OTH-ER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER**CANCELLATION**

SOUTHLA

Southland Painting Corp.
2635 NW 4th St.
Fort Lauderdale, FL 33311

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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CERTIFICATE OF LIABILITY INSURANCE

OP ID: KG

DATE (MM/DD/YYYY)

12/20/13

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 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 INNOVATIVE INSURANCE CONSULTANTS, INC. 5461 UNIVERSITY DRIVE, #103 CORAL SPRINGS, FL 33067 DAVID LEE SCHWARTZ	954-340-9551	CONTACT NAME:	
	954-340-9456	PHONE (A/C, No, Ext):	FAX (A/C, No):
		E-MAIL ADDRESS:	
		PRODUCER CUSTOMER ID #: SOUTH10	
		INSURER(S) AFFORDING COVERAGE	NAIC #
INSURED SOUTHLAND PAINTING CORP. 2635 NW 4 STREET FT. LAUDERDALE, FL 33311	INSURER A : FCCI COMMERCIAL INSURANCE CO.		33472
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

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.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY					EACH OCCURRENCE \$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$
						PRODUCTS - COMP/OP AGG \$
	GEN'L AGGREGATE LIMIT APPLIES PER:					\$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS					\$
	<input type="checkbox"/> NON-OWNED AUTOS					\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
	DEDUCTIBLE					\$
	RETENTION \$					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	32734	01/01/14	01/01/15	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input checked="" type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> N/A				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

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

CERTIFICATE HOLDER

CANCELLATION

SOUTH31

SOUTHLAND PAINTING CORP.
2635 NW 4TH STREET
FT LAUDERDALE, FL 33311

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

David L Schwartz

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IMPORTANT!
THIS IS YOUR CERTIFICATE OF COMPETENCY
PALM BEACH COUNTY, FLORIDA

**PALM BEACH COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY**

CERTIFICATE #
U-13390



EXPIRATION
09/30/2015

CERTIFIED CONTRACTOR
PAINTING

NAME : JOZEF K VERHELST
FIRM : SOUTHLAND PAINTING CORP

DBA :

2635 4TH ST
FT LAUDERDALE, FL 33311

FEE : 250.00

ISSUED BY : SMATTHES **ON :** 09/10/2013

ID #0000000

Signature:

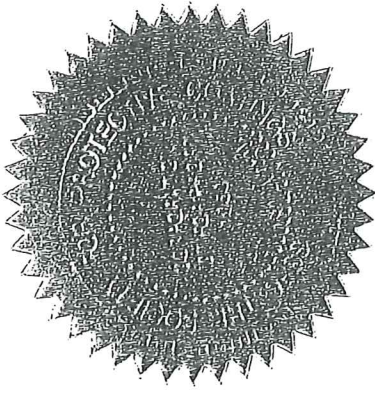
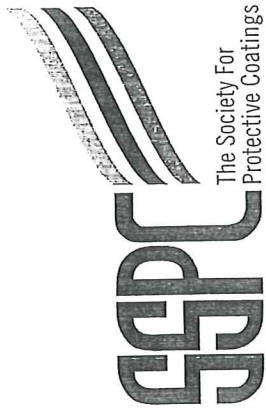
[Handwritten Signature]
Contractor Signature Required

Detach card  from this form

1) PLEASE CHECK ALL INFORMATION TO
ENSURE THAT IT IS CORRECT

2) CERTIFICATE MUST BE SIGNED

3) FOLD THE CARD WHERE INDICATED
FOR EASE IN CARRYING



Southland Painting Corporation

of
Fort Lauderdale, FL

*has met or exceeded the requirements set forth in the
SSPC Painting Contractor Certification Program for*

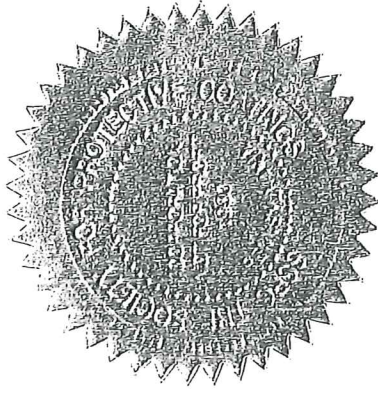
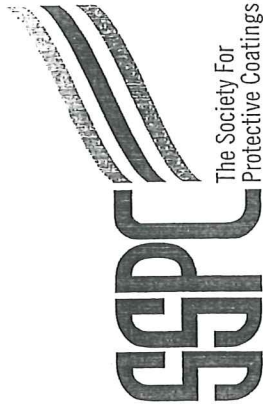
INDUSTRIAL HAZARDOUS PAINT REMOVAL SSPC-QP2

"A"
.....
Category

Dirk A. Felt
.....
President, SSPC

March 31, 2014 – March 31, 2015
.....
Validation Period





Southland Painting Corporation of Fort Lauderdale, FL

*has met or exceeded the requirements set forth in the
SSPC Painting Contractor Certification Program for*

FIELD APPLICATION OF COATINGS COMPLEX STRUCTURES SSPC-QP1



July 1, 2015
.....
President, SSPC

March 31, 2014 – March 31, 2015

.....
Validation Period

REQUEST FOR PROOF OF WORKERS COMPENSATION INSURANCE OR EXEMPTION

Dear Provider of Services or Goods:

In order to provide services or goods to the Wellington, we require that you provide us either proof of workers compensation coverage or proof of exemption.

Workers compensation insurance is required of all employers in Florida that employ 4 or more part or full time employees. In the event that you are an employer in the construction industry, you are required to have workers compensation insurance if you employ one or more workers. Corporate officers and sole proprietors are included when calculating the number of employees. Note: Corporate officers may claim exemption from workers compensation coverage on themselves only, by filing *Form DWC 250, Notice of Election to Be Exempt*. This form can be found at <http://fldfs.com/WC/forms.html>.

If you meet the above criteria to be exempt, you MUST provide us with one of the following:

- If your business is a sole proprietorship or unincorporated business: provide us a Verification of Automatic Exempt Certificate. This verification is a letter that is issued by the State of Florida Department of Financial Services. To receive a letter from the State, complete the following directions: 1) Call the National Council of Compensation Insurance 1-800-622-4123, Option 5, and ask them for the class code for your type of business. 2) Once you have received this code, call the Department of Financial Services at 1-850-413-1601 and provide them your business name, class code, mailing address, and contact phone number. They will send you the Verification of Automatic Exempt Certificate. 3) Provide us a copy of the Verification of Automatic Exempt Certificate.
- If your business is a corporation (including a professional association or limited liability company), and you are not required to have workers compensation insurance as per the requirements as outlined above, you must complete the attached Workers Compensation Exemption Affidavit, have it notarized, and return the original to us.

If you are an employer that meets the requirements of workers compensation and needs to obtain coverage, contact your current business insurance agent, or you may use the following resources to locate an agent: www.faja.com, www.piafl.org/wc-info.pdf, or call (850) 893-8245.

Please be reminded that the furnishing of this information to Wellington is a non-negotiable requirement to perform services for us. Failure to provide this timely may result in either termination of your services or delay of payment for services. Your workers compensation Certificate of Coverage, Workers Compensation Exemption Affidavit, or Verification of Automatic Exempt Certificate must be delivered or mailed to the Purchasing Department located at 12300 Forest Hill Boulevard, Wellington, Florida, 33414.

WORKERS COMPENSATION EXEMPTION AFFIDAVIT

(FAILURE TO COMPLETE THIS FORM MAY RESULT IN THE BID BEING DECLARED NON-RESPONSIVE)

Form should be completed by an officer of a sole proprietorship or a corporation with three (3) or less employees.
Form must be signed and notarized.

Name _____
First Last

Address _____
Street City

Phone _____
Home Business

This is to certify that _____
(Business Name)

_____ is a
Street City State Zip

Sole Proprietorship
OR
Corporation/Partnership

N/A

And has _____ employees, other than the owner his/her self.
(no. of employees)

Therefore, under the terms of Chapter 440, F.W., Workers' Compensation regulations it is NOT necessary for the above company to carry Workers' Compensation Insurance.

(signature)

Sworn and subscribed to me this _____ day of _____, 20____.

Personally known _____ Or, Produced ID: _____ (Type Produced) _____

NOTARY PUBLIC _____

My Commission Expires:

WELLINGTON LOCAL PREFERENCE

APPLICATION TO BE CONSIDERED A LOCAL BUSINESS IN ACCORDANCE WITH VILLAGE OF WELLINGTON FLORIDA'S LOCAL PREFERENCE POLICY

Wellington gives preference to local businesses in certain purchasing situations as set forth in Chapter 9 of Wellington's Purchasing and Procurement Manual. In order to be considered a local business, entitled to be given preference, the business must make application with Wellington and meet one of the following criteria as such is more fully set forth in Chapter 9, of Wellington's Purchasing and Procurement Manual:

Chapter 9, LOCAL PREFERENCE

Western Communities Local Business - For the purpose of determining a "Western Communities local business" a vendor must have a principal permanent business location and headquarters within Wellington of Wellington, Florida or west of the Florida Turnpike to the Palm Beach County western boundary line as depicted in Exhibit "A" hereto. This applies to all entity formations, including, but not limited to, limited liability companies, partnerships, limited partnerships and the like or sole proprietors. Further, the entity or sole proprietor must provide that it, he or she has been domiciled and headquartered in the jurisdictional boundaries of the Western Communities for at least six months prior to the solicitation. Post Office boxes will not be considered a permanent business location within the Western Communities. Home business offices shall be considered as a business location if it otherwise meets the requirements herein. In order to be eligible for such local preference the vendor shall have a local business tax receipt pursuant to the County's and/or municipalities' Code of Ordinances, having jurisdiction over the location of the business, unless otherwise exempt therefrom. Further, the vendor must be properly licensed and authorized by law to provide the goods, services or professional services to the extent applicable and the location of the business must be properly zoned in order for the vendor to conduct its business.

Palm Beach County local business - For the purpose of determining a "Palm Beach County local business" a vendor must have a principal permanent business location and headquarters within Palm Beach County, Florida. This applies to all entity formations, including, but not limited to, limited liability companies, partnerships, limited partnerships and the like or sole proprietors. Further, the entity or sole proprietor must provide that it, he or she has been headquartered and domiciled in the jurisdictional boundaries of Palm Beach County, Florida for at least six months prior to the solicitation. Post Office boxes will not be considered a permanent business location within Palm Beach County, Florida. Home business offices shall be considered as a business location if it otherwise meets the requirements herein. In order to be eligible for such local preference the vendor shall have a local business tax receipt pursuant to the Palm Beach County Code of Ordinances as amended from time to time, unless otherwise exempt there from. Further, the vendor must be properly licensed and authorized by law to provide the goods, services or professional services to the extent applicable and the location of the business must be properly zoned in order for the vendor to conduct its business.

Subcontractor utilization - In competitive bid situations, a business may also qualify as either a Palm Beach County or Western Community local business if they are utilizing subcontractors to perform the work or materialmen to supply the job and more than fifty (50%) percent of their proposed bid price will be paid to subcontractors and/or materialmen who qualify, under the above standards, as Palm Beach County and/or Western Community local businesses.

Please check the box below indicating which preference category your business is applying for:

☐ Western Communities Local Business

☐ Palm Beach County Local Business

☐ Subcontractor Utilization

1. The name of the business is: N/A

2. The address of the business is: N/A

3. How long has the business been located at its current address: N/A

4. If the business has relocated within the last six months, please provide the answers to questions 1-3 for the previous location:

5. The previous name of the business is: N/A

6. The previous address of the business is: N/A

7. How long was this business at the previous location: N/A

8. If the business is attempting to qualify under the subcontractor utilization provision, please provide a breakdown of the subcontractors who would qualify for either the Palm Beach County or Western Community, business classification, the requisite information, provide their responses to the above 1 - 7 questions and for each of the subcontractors, indicate the amount that they are proposed to be compensated at under the bid price.

9. The business as a local business tax receipt from: (1) Palm Beach County ☒ (2) the following municipality: _____ (3) located in unincorporated Palm Beach County: ☐

10. Please provide a copy of Local Business Tax Receipts from Palm Beach County and the applicable municipality are attached.

11. Please provide a Certificate of Good Standing indicating the formation or domestication of the entity in and for the State of Florida is attached.

12. Please provide copies of licenses if applicable from the State of Florida authorizing the business to provide the good services or professional services contemplated in the bid documents.

By signing below, I hereby certify that under penalty of perjury I believe my business qualifies as a Palm Beach County, Western Community or subcontractor utilization business in accordance with Wellington's Local Preference Policy and that I have submitted current and accurate information and documents relating to my qualifications. I further acknowledge and agree that any fraudulent or duplicitous information submitted in furtherance of this application will be grounds for disqualification from bidding on this project and doing business with Wellington in the future.

Applicants Federal Tax ID Number - 59-2278618 Applicants Business Address 2635 NW 4th Street
Ft. Lauderdale, FL 33311

Signature of Authorized Representative of Corporation, Partnership, or other business entity:

Southland Painting Corp.

Print Name: Jozef Verhelst

Title: President

Date: August 13, 2014

CITY OF: Ft. Lauderdale

COUNTY OF: Broward

SUBSCRIBED AND SWORN TO (or affirmed) before me on this 12th day of August, 2014, by Jozef Verhelst. He/She is personally known to me or has presented

[Signature] as identification.

[Signature]
(Signature of Notary)

(Print or Stamp Name of Notary)

Notary Public Florida

(State)



LIZETH M. FOSTER
MY COMMISSION # EE 099715
EXPIRES: June 13, 2015
Bonded Thru Budget Notary Services

Notary Seal

Signature of Individual if Sole Proprietor:

Print Name: _____

Date: _____

CITY OF: _____

COUNTY OF: _____

N/A

SUBSCRIBED AND SWORN TO (or affirmed) before me on this ____ day of _____, 201__, by _____. He/She is personally known to me or has presented

_____ as identification.

(Signature of Notary)

(Print or Stamp Name of Notary)

Notary Public _____

(State)

Notary Seal



ANNE M. GANNON
 CONSTITUTIONAL TAX COLLECTOR
 Serving Palm Beach County

Serving you.

P.O. Box 3353, West Palm Beach, FL 33402-3353
 www.pbctax.com Tel: (561) 355-2264

****LOCATED AT****

2635 NW 4TH STREET
 FT LAUDERDALE, FL 33311

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0066 PAINTING CONTRACTOR	VERHELST JOZEF K	U13390	B13.1521743 - 08/20/13	\$27.50	B40122444

This document is valid only when receipted by the Tax Collector's Office.

B3 - 21

SOUTHLAND PAINTING CORPORATION
 SOUTHLAND PAINTING CORPORATION
 2635 NW 4TH ST
 FORT LAUDERDALE, FL 33311-8624



**STATE OF FLORIDA
 PALM BEACH COUNTY
 2013/2014 LOCAL BUSINESS TAX RECEIPT**

**LBTR Number: 199900365
 EXPIRES: SEPTEMBER 30, 2014**

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and MUST be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.

Posted: 8/20/2013 2:21:31 PM

Description

Business Receipt for 199900365

Amount

\$27.50

Sub total:

\$27.50

Convenience fee:

\$2.35

Transaction total:

\$29.85

SOUTHLAND PAINTING CORP.
 2635 N.W. 4th Street
 Ft. Lauderdale, FL 33311



ANNE M. GANNON
CONSTITUTIONAL TAX COLLECTOR
Serving Palm Beach County

P.O. Box 3353, West Palm Beach, FL 33402-3353
www.pbctax.com Tel: (561) 355-2264

LOCATED AT

2635 NW 4TH STREET
FT LAUDERDALE, FL 33311

Serving you.

TYPE OF BUSINESS	OWNER	CERTIFICATION #	RECEIPT #/DATE PAID	AMT PAID	BILL #
23-0116 CW PAINTING CONTRACTOR	VERHELST JOZEF K	U13390	B13 1521746 - 08/20/13	\$185.85	B40122443

This document is valid only when receipted by the Tax Collector's Office.

B1 - 22

SOUTHLAND PAINTING CORPORATION
SOUTHLAND PAINTING CORPORATION
2635 NW 4TH ST
FORT LAUDERDALE, FL 33311-8624



STATE OF FLORIDA
PALM BEACH COUNTY
2013/2014 LOCAL BUSINESS TAX RECEIPT

LBTR Number: 199900386
EXPIRES: SEPTEMBER 30, 2014

This receipt grants the privilege of engaging in or managing any business profession or occupation within its jurisdiction and MUST be conspicuously displayed at the place of business and in such a manner as to be open to the view of the public.

Posted: 8/20/2013 2:31:17 PM

Description

Business Receipt for 199900386

Amount

\$185.85

Sub total:

\$185.85

Convenience fee:

\$4.37

Transaction total:

\$190.22

SOUTHLAND PAINTING CORPORATION
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G34786

Entity Name: SOUTHLAND PAINTING CORP.

Current Principal Place of Business:

2635 NW 4TH STREET
FORT LAUDERDALE, FL 33311

FILED
May 01, 2014
Secretary of State
CC8015524564

Current Mailing Address:

2635 NW 4TH STREET
FORT LAUDERDALE, FL 33311

FEI Number: 59-2278618

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, JEFFREY ROY
297 SUNNY ISLES BLVD.
NORTH MIAMI BEACH, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name VERHELST, JOZEF
Address 3245 ABANA PATH
City-State-Zip: THE VILLAGES FL 33163

Title ST
Name VERHELST, NANCY
Address 3245 ABANA PATH
City-State-Zip: THE VILLAGES FL 32163

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 907, Florida Statutes, and that my name appears above, or on an attachment with an other like empowered.

SIGNATURE: JOZEF VERHELST

PRESIDENT

05/01/2014

Electronic Signature of Signing Officer/Director Detail

Date

WELLINGTON LOCAL PREFERENCE #11

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311



FLORIDA DEPARTMENT OF STATE

George Firestone
Secretary of State

Mrs. Nettie Sims, Chief
Bureau of Corporate Records
904/488-9383

D.W. McKinnon, Director
Division of Corporations
904/488-9636

April 22, 1983

Jeffery R. Cohen, Esq.
633 N.E. 167 St., #601
N. Miami Bch., Fla. 33162

Ref. #: 139

Dear Mr. Cohen:

The Articles of Incorporation for SOUTHLAND PAINTING CORP., were filed on April 14, 1983, and assigned charter number G34786.

Your check for \$48.00 covering the various fees has been received.

Should you have any questions regarding this certification, please telephone (904)487-1322, the Word Processing Section, Mrs. Bobbie Cox, Supervisor.

Sincerely,

A handwritten signature in dark ink, appearing to read "D.W. McKinnon".

D. W. McKinnon, Director
Division of Corporations

DWM/ag

Division of Corporations • P.O. Box 6327 • Tallahassee, Florida 32301

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311



I certify that the attached is a true and correct copy of Articles of Incorporation of SOUTHLAND PAINTING CORP., a corporation organized under the laws of the State of Florida, filed on April 14, 1983, as shown by the records of this office.



Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
20th
day of June, 1983.


George Firestone
Secretary of State

CER-101

934786

ARTICLES OF INCORPORATION

OF

SOUTHLAND PAINTING CORP.ARTICLE I - NAME

The name of the Corporation is Southland Painting Corp.

ARTICLE II - DURATION

This Corporation shall have perpetual existence.

ARTICLE III - PURPOSE

The purpose of this Corporation is to engage in the transaction of any and all business permitted under the laws of the United States and of this State.

ARTICLE IV - CAPITAL STOCK

The maximum number of stock that this Corporation is authorized to have outstanding at any time is One Thousand (1000) shares of common stock, each share having the par value of One Dollar (\$1.00).

ARTICLE V - ADDRESS

The initial registered office of this Corporation is 633 N.E. 167th Street, Suite 601, North Miami Beach, Florida. The name of the initial registered agent at such address is Jeffrey Roy Cohen.

ARTICLE VI - DIRECTORS

The Corporation shall one director initially, whose name and street address are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Jozef Verhelst	6664 West Commercial Boulevard Tamarac, Florida 33319

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT SOUTHLAND PAINTING CORP.
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF TAMARAC
(CITY)

STATE OF FLORIDA, HAS NAMED Jeffrey Roy Cohen, Esq.
(STATE) (NAME OF RESIDENT AGENT)

LOCATED AT 633 N.E. 167th Street, Suite 601
(STREET ADDRESS AND NUMBER OF BUILDING,
POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)

CITY OF North Miami Beach, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT.
(CITY)

SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE [Signature]
(CORPORATE OFFICER)

TITLE Incorporator

DATE 4-12-83

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE [Signature]
(RESIDENT AGENT)

DATE 4-12-83

CORP. 25
1/1/76

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

ARTICLE VII - SUBSCRIBER

The name and street address of the incorporator of this Corporation are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Jeffrey Roy Cohen	633 N.E. 167th Street
	North Miami Beach, Florida 33162

IN WITNESS WHEREOF, the undersigned subscriber has executed the foregoing Articles of Incorporation this 17th day of April, 1983.



(SEAL)

STATE OF FLORIDA)
COUNTY OF DADE) SS

Before me personally appeared Jeffrey Roy Cohen, to me well known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same for the purposes therein expressed.

Witness my hand and official seal in the County and State named this 17th day of April, 1983.


NOTARY PUBLIC STATE
OF FLORIDA AT LARGE

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JULY 20 1988
Beverly Corra GENERAL INS. UNDERWRITER

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

MINUTES OF SPECIAL MEETING
OF THE STOCKHOLDERS AND DIRECTORS OF
SOUTHLAND PAINTING CORP.

July —, 2007

A special meeting of the Stockholders and Directors of SOUTHLAND PAINTING CORP. was held at the corporate offices, 2635 NW 4th Street, Ft. Lauderdale, FL on July —, 2007. Present at the meeting were Jozef (Jef) Verhelst, President and Director, and Nancy Verhelst, Secretary and Director, both parties representing the owners of 100% of the issued and outstanding shares of the corporation. Jozef (Jef) Verhelst presided as Chairman and Nancy Verhelst recorded the minutes.

The meeting was called to order by the Chairman. The parties present acknowledged their respective waivers of notice of the meeting. The Chairman then announced that the agenda of the meeting was as follows:

To appoint Cliff Dykes as Vice President of Southland Painting Corp.

After discussion, and upon motion duly made, seconded and carried, the following resolution was adopted:

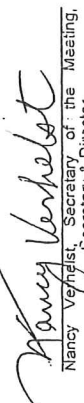
RESOLVED THAT, Cliff Dykes shall serve as Vice President of the corporation for the current year, and shall remain in office until such time as new corporate officers are elected or appointed; and,

RESOLVED THAT, during the absence or unavailability of the President, Cliff Dykes is hereby granted full authority and power to act on behalf of the corporation in all matters pertaining to the ongoing and regular day to day operations of the Corporation, which shall be meant to include, but not be limited to execution of any and all documents required to be signed by a corporate officer, authority to bind the corporation to any and all obligations that the Vice President deems necessary or desirable in furtherance of the corporate purposes as they presently exist.

RESOLVED THAT, all third parties are hereby notified that they may act in reliance of the authority of Cliff Dykes, without further confirmation by any other officer or director of the corporation

There being no further business to come before the meeting, on motion duly made, seconded and carried, the meeting was adjourned.


JOZEF VERHELST, Chairman,
President & Director


Nancy Verhelst, Secretary of the Meeting,
Secretary & Director

CERTIFICATE OF RESOLUTION

OF

SOUTHLAND PAINTING CORP.

I, JOZEF VERHELST, President of SOUTHLAND PAINTING CORP., a Corporation organized under the laws of Florida, hereby certify that the following is a true and correct copy of the resolutions duly adopted by the Board of Directors and Stockholders of said Corporation and that the said resolutions are in accordance with the Articles of Incorporation and By-Laws of said corporation, do not violate any contract or agreement to which the corporation is a party or is bound, and have not been modified or rescinded and are still in full force and effect.

RESOLVED THAT, Cliff Dykes shall serve as Vice President of the corporation for the current year, and shall remain in office until such time as new corporate officers are elected or appointed; and,

RESOLVED THAT, during the absence or unavailability of the President, Cliff Dykes is hereby granted full authority and power to act on behalf of the corporation in all matters pertaining to the ongoing and regular day to day operations of the Corporation, which shall be meant to include, but not be limited to execution of any and all documents required to be signed by a corporate officer, authority to bind the corporation to any and all obligations that the Vice President deems necessary or desirable in furtherance of the corporate purposes as they presently exist.

RESOLVED THAT, all third parties are hereby notified that they may act in reliance of the authority of Cliff Dykes, without further confirmation by any other officer or director of the corporation

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal of said Corporation this _____ day of July, 2007.

SOUTHLAND PAINTING CORP.

By JOZEF VERHELST, President

ATTEST:

Nancy Verhelst
NANCY VERHELST, Secretary

SEAL

IMPORTANT!
THIS IS YOUR CERTIFICATE OF COMPETENCY
PALM BEACH COUNTY, FLORIDA

WELLINGTON LOCAL
PREFERENCE #12

**PALM BEACH COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY**

CERTIFICATE #
U-13390



EXPIRATION
09/30/2015

CERTIFIED CONTRACTOR
PAINTING

NAME : JOZEF K VERHELST
FIRM : SOUTHLAND PAINTING CORP

DBA :

2635 4TH ST
FT LAUDERDALE, FL 33311

FEE : 250.00
ISSUED BY : SMATTHES **ON :** 09/10/2013
ID #0000000

Signature:

Contractor Signature Required

Detach card from this form

1) PLEASE CHECK ALL INFORMATION TO
ENSURE THAT IT IS CORRECT

2) CERTIFICATE MUST BE SIGNED

3) FOLD THE CARD WHERE INDICATED
FOR EASE IN CARRYING

SOUTHLAND PAINTING CORP.
2635 N.W. 4th Street
Ft. Lauderdale, FL 33311

CONFLICT OF INTEREST STATEMENT

This Proposal/Agreement (whichever is applicable) is subject to the conflict of interest provisions of the policies and Code of Ordinances of WELLINGTON, the Palm Beach County Code of Ethics, and the Florida Statutes. During the term of this Agreement and any renewals or extensions thereof, the VENDOR shall disclose to WELLINGTON any possible conflicts of interests. The VENDOR's duty to disclose is of a continuing nature and any conflict of interest shall be immediately brought to the attention of WELLINGTON. The terms below shall be defined in accordance with the policies and Code of Ordinances of WELLINGTON, the Palm Beach County Code of Ethics, and Ch. 112, Part III, Florida Statutes.

CHECK ALL THAT APPLY.

☒ To the best of our knowledge, the undersigned business has no potential conflict of interest for this Agreement due to any other clients, contracts, or property interests.

☒ To the best of our knowledge, the undersigned business has no employment or other contractual relationship with any WELLINGTON employee, elected official or appointed official.

☒ To the best of our knowledge, the undersigned business has no officer, director, partner or proprietor that is a WELLINGTON purchasing agent, other employee, elected official or appointed official. The term "purchasing agent", "elected official" or "appointed official", as used in this paragraph, shall include the respective individual's spouse or child, as defined in Ch. 112, Part III, Florida Statutes.

☒ To the best of our knowledge, no WELLINGTON employee, elected official or appointed official has a material or ownership interest (5% ownership) in our business. The term "employee", "elected official" and "appointed official", as used in this paragraph, shall include such respective individual's relatives and household members as described and defined in the Palm Beach County Code of Ethics.

☒ To the best of our knowledge, the undersigned business has no current clients that are presently subject to the jurisdiction of WELLINGTON's Planning, Zoning and Building Department.

☒ The undersigned business, by attachment to this form, submits information which may be a potential conflict of interest due to any of the above listed reasons or otherwise.

THE UNDERSIGNED UNDERSTANDS AND AGREES THAT THE FAILURE TO CHECK THE APPROPRIATE BLOCKS ABOVE OR TO ATTACH THE DOCUMENTATION OF ANY POSSIBLE CONFLICTS OF INTEREST MAY RESULT IN DISQUALIFICATION OF YOUR BID/PROPOSAL OR IN THE IMMEDIATE CANCELLATION OF YOUR AGREEMENT, WHICHEVER IS APPLICABLE.

Southland Painting Corp.
COMPANY NAME


AUTHORIZED SIGNATURE

Jozef Verhelst
NAME (PRINT OR TYPE)

President
TITLE

NON-COLLUSION AFFIDAVIT

State of Florida

County of Broward

Being duly sworn deposes and says:


That he/she is an officer of the parties making the forgoing bid submittal, that such bid submittal is genuine and not collusive or sham, that said Bidder has not colluded, conspired, connived or agreed, directly or indirectly with any bidder or person, to put in a sham bid or to refrain from bidding and has not in any manner, directly, or indirectly, sought by agreement of collusion or communication or conference with any person, to fix the price of affiant or any other bidder, or to fix any overhead, profit of cost element of said price, or that of any other bidder, or to secure any advantage against the authority, of any person interested in the proposed contract and that all statements in said bid is true.

Southland Painting Corp.

Name of Bidder

Jozef Verhelst

Print name of designated signatory


Signature

President

Title

On this 12th day of August, 2014, before me appeared Jozef Verhelst personally known to me to be the person described in and who executed this Affidavit and acknowledged that (she/he) signed the name freely and voluntarily for the uses and purposes therein described.
In witness thereof, I have hereunto set my hand and affixed seal the day and year last written above.


Signature

Notary Public in and for the State of Florida



LIZETH M. FOSTER
MY COMMISSION # EE 099715
EXPIRES: June 13, 2015
Bonded Thru Budget Notary Services

(Affix Seal Here)

(Name Printed)

Residing at 5890 NW 74TH, LdL, FL 33311

My commission expires 6/13/2015