"SAMPLE"

CERTIFICATE OF LIABILITY INSURANCE

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		
Insurance Agency Name and Address	Agent Name FAX (A/C, No):	
	Carrier Name Listed Here	NAIC #
Tenants Name and Address		

COVERAGES **CERTIFICATE NUMBER:** 65549242 **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.

TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER			LIMITS	
COMMERCIAL GENERAL LIABILITY							
x CLAIMS-MADE x OCCUR	x	x	Policy#			EACH OCCURRENCE	$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
						MED EXP (Any one person)	$ 10,000
						PERSONAL & ADV INJURY	$ 1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
OTHER:							$
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
x ANY AUTO	x	x	Policy#			BODILY INJURY (Per person)	$
OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
							$
x UMBRELLA LIAB x OCCUR	x	x	Policy#			EACH OCCURRENCE	$ 5,000,000
EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 5,000,000
DED RETENTION $							$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						PER STATUTE OTH-ER	
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N / A	x	Policy#			E.L. EACH ACCIDENT	$ 500,000
(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	$ 500,000
If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	$ 500,000

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

Goldenrod III Warren, LP is Additional Insured on the General Liability, Auto Liability and Umbrella as required by written contract with the insured, per policy terms and conditions. The General Liability, Auto Liability, Workers' Compensation and Umbrella Liability policy includes a Waiver of Subrogation in favor of Gold Dog III Warren, LP as required by written contract with the insured per policy terms and conditions.

CERTIFICATE HOLDER

Goldenrod III Warren, LP

6100/6120 S Yale Ave Tulsa,

OK 74136

USA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

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