

CIVANA

L O G I S T I C S

CUSTOMER AGREEMENT

PREPARED BY:
CIVANA LOGISTICS, LLC
MEXICO-USA-CANADA



Please complete fully and email back to CIVANA Logistics

Request Date	Terminal Code Requesting Credit	Credit Limit Requested
Must have complete company name and address for credit report.		
Company Name	Phone w/ area code	
Actual Address		
City, State Zip	MC #	

Commodity:

Type of Business:

Business Established:

Ship Hazardous Materials? Y or N

USDOT#

Circle Applicable Classes:

(1.1)(1.2)(1.3)(1.4)(1.5)(1.6)(2.1)(2.2)(2.3)(3)(4.1)(4.2)(4.3)(5.1)(5.2)(6.1)(7)(8)(9)(ORM-D)(Waste)

IMPORTANT NOTE: <u>Please supply proper billing address, if different from above:</u>	
Billing Address	
City, State, Zip	
Actual Phone w/ area code	
Toll-free Phone Number:	
Accounts Payable Contact:	
	Name -
	Email -
	Phone -



Billing Requirements

(specific information which must be with the freight or invoice.)

Need three (3) current U.S. or C.N. TRANSPORTATION or TRADE credit references.

Name	Name	Name
Address	Address	Address
City/St/ Zip	City/St/ Zip	City/St/ Zip
Phone	Phone	Phone

In applying for credit, we understand and will comply with CIVANA Logistics terms of payment for freight charges within fifteen (15) days of receipt of invoice or thirty (30) days from date of invoice.

DUNS#	Date	Signature
		Title:
Bank:	Branch:	
Account #	Phone:	
Contact	Branch Fx:	Title:

Company Officers & Title

1.)	Title
2.)	Title

If applying for credit in excess of \$50,000 please supply financial statement.

Website or internet address

Analyst	Credit Limit	Account #
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TERMS AND CONDITIONS

Pursuant to the agreed upon rates and charges, CIVANA LOGISTICS, LLC will arrange transportation of Customer's shipment from pickup to the place of destination via authorized motor carrier(s), and will provide cargo claim assistance, shipment tracking and other logistics services and all in accordance with this Agreement. CIVANA LOGISTICS, LLC will comply with all laws and regulations applicable to CIVANA LOGISTICS, LLC relating to Customer's freight and shipment; and will perform its obligations as an independent contractor and not as the agent or employee of Customer. CIVANA LOGISTICS, LLC will arrange transportation of Customer's shipment via authorized motor carriers who have submitted proof of authority and insurance, and whom have agreed to comply with applicable laws, to deliver shipments promptly, to employ competent, able and legally licensed personnel, to maintain their equipment in good repair, and to perform their transportation services in compliance with DOT regulations in a businesslike manner. The Customer's shipment, handled by CIVANA LOGISTICS, LLC, while this Agreement is in effect will be considered contract (not common) carriage, subject to and governed by the terms of this Agreement, and any legal rights or remedies contrary to this Agreement's provisions are hereby waived to the extent permitted by applicable law. CIVANA LOGISTICS, LLC agrees at all times to carry contingent cargo liability insurance in the amount of Two Million Dollars (\$2,000,000.00) with reliable insurance companies. Customer may request additional services or the forwarding of specific instructions to Carriers and other contractors assisting in the movement of Customers property, however the agreement to perform any additional services, or to forward along any additional special requests or instructions, shall in no way change the agreed contracted relationship of CIVANA LOGISTICS, LLC as an independent contractor and transportation broker or required any added supervisory responsibilities or liabilities for the carrier or other contractor's performance of such transportation related services. CIVANA LOGISTICS, LLC shall not be liable for the acts or omissions of custom officials, customs brokers, loading personnel or other third parties who may be involved in the loading or handling of cargo at pickup, delivery, including pickup and/or delivery or near the USA-Mexican border; nor for incidental, consequential or other special damages of any type.

Further, CIVANA LOGISTICS, LLC shall not be liable under any circumstances for losses or claims occurring or arising outside the U.S.A. and/or Canada. Customer shall hold harmless and defend CIVANA LOGISTICS, LLC from any claims liabilities arising out of the negligence of Customer relating to said shipment and from any claims arising to of or related to Customer's instructions or requests or any allegation that such instructions added supervisory responsibilities or liabilities for the carrier or other contractor's performance of transportation related services. Customer acknowledges and understands that cargo liability (loss, damaged, delay, etc.) for shipments under this Agreement will be affected and may be substantially limited by application of various countries laws, treaties, conventions, etc. Customer specifically understands that insurance in Mexico is **NOT** available, unless Customer arranges to purchase its own cargo insurance. Neither Customer nor CIVANA LOGISTICS, LLC shall be liable for damages for any transportation delay or failure, nor any delay or failure to perform any of this Agreement's terms and provisions, arising from causes beyond its control, including but not limited to acts of God or public enemies, acts of authority, labor disputes, fires, riots, war, embargoes, accidents, epidemics, unusually severe weather, closing or obstruction go highways, bridges or ferries, or shortage of raw materials or power, any of which have a material, substantial and adverse effect on either party's ability to perform pursuant to the terms of this Agreement. Customer warrants that it is or will be the owner of the shipment tendered hereunder and/or that it otherwise is fully authorized to agree to all terms herein with respect to said shipment; that the person signing on Customer's behalf is fully authorized to do so and to bind Customer hereto; and that this Agreement's terms shall be binding upon Customer's successors and assigns and all consignees, customers, subrogees or others persons claiming any interest in said shipment. A shipping receipt, bill of lading or comparable documentation in a generally

accepted form will be issued for each shipment, but the absence or loss of such shipping documentation, in and of itself, shall not relieve either party of its obligations or responsibilities hereunder with respect to any shipment. CIVANA LOGISTICS, LLC freight bills shall be paid by Customer within thirty (30) days after receipt by Customer. Customer acknowledges that invoices for shipments shall be treated separately for any and all claims. Customer shall pay CIVANA LOGISTICS, LLC shipment invoices in full and not offset invoices due to outstanding claims. Carrier, not CIVANA LOGISTICS, LLC, is responsible for any and all charges (i.e., crane charges) necessitated by Carrier's failure to timely deliver any and all shipments. Customer agrees to pay collection costs, including reasonable attorney's fees, and interest at the highest legal rate on past due accounts. No modification of this Agreement and no waiver of its terms or provisions shall be effective unless and until made in writing and signed by authorized representatives of both parties. This Agreement may not be assigned, in whole or in part, by either party without the written consent of the other.

Customer shall be responsible for draining all fluids and lubricates from machinery before loading. Customer shall be responsible for any related clean up costs, lost productivity, fines, penalties and driver detention in the event fluids are not properly and completely drained.

CROSS BORDER RESPONSABILITY. If northbound or southbound cross border service to or from Mexico is provided to Customer or to Customer's consignee, Customer expressly agrees that Customer is liable for any damages or losses, including theft, relating to Carrier's or CIVANA LOGISTICS, LLC equipment or to cargo while in the possession of third parties hired by Customer, by Customer's consignee, or hired by Customer's or Customer's consignee's broker or freight forwarder. Such third parties include but are not limited to freight forwarders, brokers, and drayage companies hired by Customer, Customer's consignee, or Customer's or Customer's consignee's broker or freight forwarder. Customer shall incur such liability regardless of whether Customer or Customer's consignee pays carrier directly for its services under this Agreement.

Except as otherwise provided herein, all transportation is governed by and subject to the CIVANA LOGISTICS, LLC Agreement; terms of the Standard Truck Load Bill of Lading and incorporated herein as if fully set forth herein; and Route Miles, city to city calculation and supplements to or reissues of any of the foregoing. Scanned / Faxed signatures are effective as originals.

Rates are subject to change at any time in the absence of a signed contract and subject to availability and approved credit.

CIVANA LOGISTICS, LLC

CUSTOMER

Signature:

Signature:

Date: _____

Date: _____



U.S. Department of Transportation
Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E.
Washington, DC 20590

SERVICE DATE
July 18, 2019

LICENSE
MC-1047313-B
U.S. DOT No. 3301747
CIVANA LOGISTICS LLC
LAREDO, TX

This License is evidence of the applicant's authority to engage in operations, in interstate or foreign commerce, as a **broker, arranging for transportation of freight (except household goods)** by motor vehicle.

This authority will be effective as long as the broker maintains insurance coverage for the protection of the public (49 CFR 387) and the designation of agents upon whom process may be served (49 CFR 366). The applicant shall also render reasonably continuous and adequate service to the public. Failure to maintain compliance will constitute sufficient grounds for revocation of this authority.

A handwritten signature in black ink, appearing to read "Jeffrey L. Secrist".

Jeffrey L. Secrist, Chief
Information Technology Operations Division

BPO



WIRE & BANK ACCOUNT INFORMATION

Routing# 111000614

Account# 579253011

Swift Code: CHASUS33

JPMorgan Chase Bank, N.A.

270 Park Ave

New York, NY 10017

CREDIT REFERENCES

COMPANY NAME: SUGA EXPRESS SA DE CV
ADDRESS: CARR. 57 25675, MONCLOVA, COAH
CONTACT: HERMILO SUAREZ
EMAIL: operacion@sugaexpress.com.mx
TEL. NO: 52.866.172.4266

COMPANY NAME: HI-VALLEY TRANSPORT
ADDRESS: 5952 TX-359, LAREDO, TX 78043
CONTACT: CLAUDIA CISNEROS
EMAIL: dispatch@hivalleytrans.com
TEL. NO: 956.725.0084

COMPANY NAME: AC TRADE & LOGISTICS LLC
ADDRESS: 12014 SARA RD, LAREDO, TX 78045
CONTACT: ALEJANDRO CAMPERO JR
EMAIL: alejandroj@laredofreight.com
TEL. NO: 956.722.3603

COMPANY NAME: MCQUEEN HEAVY TRANSPORT INC
ADDRESS: 1014 SANTO TOMAS ST, LAREDO, TX 78045
CONTACT: DAVID GUTIERREZ
EMAIL: davidgtz@transmcqueen.com
TEL. NO: 52.811.976.7970





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/7/2024

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

Creekside Risk Management
100 Wood Ave South, 4th Floor

Iselin

NJ 08830

INSURED

Civana Logistics, LLC
7019 W VILLAGE BLVD, Unit #105

LAREDO

TX 78041-2223

CONTACT NAME: Jennyfer Jimenez

PHONE (A/C, No, Ext): (713) 984-2410

FAX (A/C, No):

E-MAIL ADDRESS: Coi@creeksiderisk.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: LLOYDS OF LONDON

A1122J

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 INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y Y	24TAP04-0349-TCB	10/05/2024	10/05/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ Excluded
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> Contingent		24TAP04-0281-TCB	08/31/2024	08/31/2025	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Contingent Liability \$ 1,000,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Motor Truck Cargo		24TAP04-0348-TCB	10/05/2024	10/05/2025	Cargo Deductible 100,000 1,000

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

Contingent Transit endorsement is included.

Contingent Auto Liability is included under policy #24TAP04-0281-TCB - Limits \$1,000,000/\$2,000,000 Aggregate Contingent Transit endorsement is included.

CERTIFICATE HOLDER**CANCELLATION**

FOR INSURANCE VERIFICATION PURPOSES

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

Jason Cart

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)

Civana Logistics LLC

2 Business name/disregarded entity name, if different from above.

3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate

☒ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) **P**
Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.

☐ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any)

Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any)

(Applies to accounts maintained outside the United States.)

3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐

5 Address (number, street, and apt. or suite no.). See instructions.

7019 W Village Blvd Ste 105

Requester's name and address (optional)

6 City, state, and ZIP code

Laredo, Texas 78041

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

- - - - -

or

Employer identification number

8 4 - 2 1 2 2 8 6 7

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of
U.S. person

Date 11/01/2024

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION



**HAZARDOUS MATERIALS
CERTIFICATE OF REGISTRATION
FOR REGISTRATION YEAR(S) 2022-2025**

Registrant: CIVANA LOGISTICS LLC
ATTN: CYNTHIA MALDONADO
7019 W.VILLAGE BLVD STE 105
LAREDO , TX 78041

This certifies that the registrant is registered with the U.S. Department of Transportation as required by 49 CFR Part 107, Subpart G.

This certificate is issued under the authority of 49 U.S.C. 5108. It is unlawful to alter or falsify this document.

Reg. No: 041823550019EG Effective: July 1, 2022 Expires: June 30, 2025
HM Company ID: 323633

Record Keeping Requirements for the Registration Program

The following must be maintained at the principal place of business for a period of three years from the date of issuance of this Certificate of Registration:

- (1) A copy of the registration statement filed with PHMSA; and
- (2) This Certificate of Registration

Each person subject to the registration requirement must furnish that person's Certificate of Registration (or a copy) and all other records and information pertaining to the information contained in the registration statement to an authorized representative or special agent of the U. S. Department of Transportation upon request.

Each motor carrier (private or for-hire) and each vessel operator subject to the registration requirement must keep a copy of the current Certificate of Registration or another document bearing the registration number identified as the "U.S. DOT Hazmat Reg. No." in each truck and truck tractor or vessel (trailers and semi-trailers not included) used to transport hazardous materials subject to the registration requirement. The Certificate of Registration or document bearing the registration number must be made available, upon request, to enforcement personnel.

For information, contact the Hazardous Materials Registration Manager, PHH-52, Pipeline and Hazardous Materials Safety Administration, U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, DC 20590, telephone (202) 366-4109.

WBENC

WOMEN'S BUSINESS ENTERPRISE
NATIONAL COUNCIL

JOIN FORCES. SUCCEED TOGETHER.

hereby grants

National Women's Business Enterprise Certification

to

CIVANA LOGISTICS LLC

who has successfully met WBENC's standards as a Women's Business Enterprise (WBE).
This certification affirms the business is woman-owned, operated and controlled and is valid through the date herein.

Certification Granted: September 19, 2023

Expiration Date: September 30, 2024

WBENC National Certification Number: WBE2302641

WBENC National WBE Certification was processed and validated by Women's Business Enterprise Alliance, a WBENC Regional Partner Organization.



Authorized by April Day, President Women's
Business Enterprise Alliance

NAICS: 488510
UNSPSC: 78141500



Great Lakes
Women's
Business
COUNCIL



WBECMETRONY
WOMEN'S BUSINESS ENTERPRISE COUNCIL METRONY

WBECALABAMA
WOMEN'S BUSINESS ENTERPRISE COUNCIL ALABAMA

WBEC SOUTH
WOMEN'S BUSINESS ENTERPRISE COUNCIL SOUTH

WBEC EAST
WOMEN'S BUSINESS ENTERPRISE COUNCIL EAST

WBEC ORY
WOMEN'S BUSINESS ENTERPRISE COUNCIL OREGON

WBEC PACIFIC
WOMEN'S BUSINESS ENTERPRISE COUNCIL PACIFIC



WBEC WEST
WOMEN'S BUSINESS ENTERPRISE COUNCIL WEST

WBEC FLORIDA
WOMEN'S BUSINESS ENTERPRISE COUNCIL FLORIDA



WOMEN'S BUSINESS ENTERPRISE
NATIONAL COUNCIL

JOIN FORCES. SUCCEED TOGETHER.

**HEREBY GRANTS
WOMAN OWNED SMALL BUSINESS (WOSB) CERTIFICATION TO**

CIVANA LOGISTICS LLC

The identified small business is an eligible WOSB for the WOSB Program, as set forth in 13 C.F.R. part 127 and has been certified as such by an SBA approved Third Party Certifier pursuant to the Third Party Agreement, dated June 30, 2011, and available at www.sba.gov/wosb.

The WOSB Certification expires on the date herein unless there is a change to the SBA's regulation that makes the WOSB ineligible or there is a change in the WOSB that makes the WOSB ineligible. If either occurs, this WOSB Certification is immediately invalid. The WOSB must not misrepresent its certification status to any other party, including any local or State government or contracting official or the Federal government or any of its contracting officials.

Majority Female Owner: Cynthia Maldonado

NAICS: 488510
UNSPSC: 78141500

Certification Number: WOSB231492

Renewal Date: September 30, 2024

WOSB Regulation Expiration Date: 09/30/2026



April Day, Women's Business Enterprise
Alliance President

Pamela Prince-Easton, WBENC President & CEO

LaKesha White, Vice President, Certification