

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/10/2025

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).

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PRODUCER Lakenan					NAME:						
890 Rozier Street					(A/C, No, Ext): 5/3-883-7446 (A/C, No): 5/3-883-3981						
Sainte Genevieve MO 63670					ADDRESS: coi@lakenan.com						
								RDING COVERAGE		NAIC#	
10 10 10 10 10 10 10 10 10 10 10 10 10 1					INSURER A : PHILADELPHIA INSURANCE COMPANY					6777	
INSURED ADJ Baseball, LLC DBA Rawlings Tigers ADJBASE-01					INSURER B:						
NTJ Baseball LLC/Balls-N-Strikes LLC/44 Baseball LLC					INSURER C:						
18018 Eads Avenue					INSURER D :						
Chesterfield MO 63005-1101					INSURER E :						
					INSURER F:						
CO	/ERAGES CER	NUMBER: 337222342				REVISION NUMBER:					
IN CI	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY ICLUSIONS AND CONDITIONS OF SUCH	QUIREI PERTAI	MEN <sup>*</sup> IN, TI	T, TERM OR CONDITION HE INSURANCE AFFORDI	OF ANY	CONTRACT THE POLICIES	OR OTHER I	DOCUMENT WITH RESPE	CT TO	WHICH THIS	
INSR LTR TYPE OF INSURANCE			UBR VVD			POLICY EFF POLICY EXP (MM/DD/YYYY)		LIMIT	LIMITS		
A				PHPK2632045		1/1/2025	1/1/2026	EACH OCCURRENCE \$1,00		000	
	CLAIMS-MADE X OCCUR	Y		111112002010		17 172020	., ., 2020	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500.000		
	CLAIMS-MADE 11 OCCOR	GEANNO-WABE GOODIN						MED EXP (Any one person)	\$ 0	00	
								PERSONAL & ADV INJURY	\$ 1.000	000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 3.000	,	
	V PRO-								\$ 3,000	,	
								PRODUCTS - COMP/OP AGG	\$ 3,000	,000	
Α	OTHER: AUTOMOBILE LIABILITY		-	PHPK2632045		1/1/2025	1/1/2026	COMBINED SINGLE LIMIT	\$ 1,000	000	
,,	ANY AUTO		'	1 TII 1(20320 <del>4</del> 3		1/1/2023	1/1/2020	(Ea accident) BODILY INJURY (Per person)	\$	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	OWNED SCHEDULED							BODILY INJURY (Per accident)	\$		
	AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAGE (Per accident)	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
A	X UMBRELLA LIAB X OCCUR			DI II ID000470		4/4/0005	4/4/0000				
A		OCCOR I I I I I I I I I I I I I I I I I I I		PHUB0921/3		1/1/2025	1/1/2026	EACH OCCURRENCE	\$ 3,000	,	
	CEAIWS-WADE							AGGREGATE	\$ 3,000	,000	
	DED X RETENTION \$ 10,000							PER OTH-	\$		
	AND EMPLOYERS' LIABILITY Y / N							PER OTH- STATUTE ER			
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDENT	\$		
	(Mandatory in NH)  If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$		
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	00	
A A	Accident Medical Expense Abusive Conduct Liability Participant Legal Liability			PHPA150833 PHPK2632045 PHPK2632045		1/1/2025 1/1/2025 1/1/2025	1/1/2026 1/1/2026 1/1/2026	Per Occurrence Aggregate Aggregate	100,0 3,000 1,000	,000	
AU.	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI FOMATIC ADDITIONAL INSURED: OW PROMOTERS SUBJECT TO A WRITT!	NERS	AND	) / OR LESSORS OF PRE					S OR		
CERTIFICATE HOLDER						CANCELLATION					
Five Tool LLC 1540 Keller Parkway Suite 108-409						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					
	Suite 108-409 Keller TX 76248							1 16			

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

## ADDITIONAL INSURED: OWNERS AND / OR LESSORS OF PREMISES, LESSORS OF LEASED EQUIPMENT, SPONSORS OR CO-PROMOTERS

This endorsement modifies insurance provided under the following:

## **COMMERCIAL GENERAL LIABILITY COVERAGE PART**

This policy is amended to include as an additional Insured any person or organization of the types designated below, but only with respect to liability arising out of your operations:

- 1. Owners and / or lessors of the premises leased, rented, or loaned to you, subject to the following additional exclusions:
  - This insurance applies only to an "occurrence" which takes place while you are a tenant in the premises;
  - b. This insurance does not apply to "bodily injury" or "property damage" resulting from structural alterations, new construction or demolition operations performed by or on behalf of the owner and / or lessor of the premises;
  - c. This insurance does not apply to liability of the owners and / or lessors for "bodily injury" or "property damage" arising out of any design defect or structural maintenance of the premises or loss caused by a premises defect.

With respect to any additional insured included under this policy, this insurance does not apply to the sole negligence of such additional insured.

- 2. Lessor of Leased Equipment, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person(s) or organization(s) subject to the following additional exclusions:
  - a. This insurance does not apply to any "occurrence" which takes place after the equipment lease expires.
- 3. Sponsors
- 4. Co-Promoters