ORIGINAL

BID FORM #1

CITY OF AVON PARK, FLORIDA Bid Cover Sheet Page 1 of 2

| Bidder/Company Name (Capitalize): L. Cobb Construction, Inc. | |
|---|-------|
| Date Submitted: 4/17/24 Bid Opening Date: 4/17/24 | |
| Project Identification: BID # 24-07 | |
| Formal Bid Name: Fire Station Hardening Project | |
| As per sunbiz.org: | |
| Entity Name: L. Cobb Construction, Inc. | |
| Business Address: 401 S. 6th Ave, Wauchula, Fl, 33873 | |
| Authorized Signor: Clay Cobb Title: CEO | |
| Phone Number: 863-773-3839 E-Mail Address: Operations@Lcobbconstruction.com | |
| Bidder's rep: Clay Cobb Business phone: 863-773-3839 Cell phone: | |
| In submitting this Bid, Bidder makes all representations required by the Bid Documents and further warrants and represents that Bidder has examined copies of all the Bid Documents and of the following addenda: | |
| No Dated: No Dated: | |
| No. 2 Dated: | |
| No Dated: No Dated: | |
| | |
| WILL PROVIDE CONTINUITY OF OPERATION DURING EMERGENCY? Yes No | |
| The undersigned, as Bidder, hereby declares that no person or persons other than the undersigned are interested in this | |
| Invitation To Bid as Principal, and that this bid is made without collusion with others; and that we have carefully read | |
| and examined all the Bid Documents and with full knowledge of all conditions under which the goods or services herein | |
| are contemplated must be furnished, hereby propose and agree to furnish the goods or services according to the requirements set out in the Bid Documents for said goods or services for the prices as listed on the subsequent pages. | |
| Taxpayer Identification Number: 59-2628213 | |
| (l) Employer Identification Number -or- (2) Social Security Number* | |
| * The City of Avon Park collects your social security number/or tax reporting purposes | |
| | |
| ALL BIDS MUST BE SIGNED. SEALED AND EXECUTED BY AN AUTHORIZED CORPORATE | |
| AUTHORITY. If that person is not the President, CEO, or Partner, this form shall be accompanied by the Company's | |
| CORPORATE RESOLUTION authorizing the signor. Signed this 17th day of April , 2024 : | |
| Witnesses: L. Cobb Construction, Inc. | |
| Signed: Cole Buchanan Corporate Name Printed | |
| Print name: Cole Buchanan | 63 |
| hal III I | 10 |
| Signed: By: By: | |
| Print name: Michaele Thomas | 1 |
| Printed name and title: Clay Cobb / CEO | : 0 |
| G. C. I. ivi. Pil. I. Cabb Construction Inc. | 0 |
| Company Submitting Bid: L. Cobb Construction, Inc. | 11112 |
| Bid # 24-07 Bid Name: Fire Station Hardening | |
| | |

CITY OF AVON PARK, FLORIDA Bid Cover Sheet Page 2 of 2

For providing the construction services stated in the Bid Documents, the bid is:(\$659,247.07) Six Hundred Fifty Nine Thousand Two Hundred Fourty Seven dollars and 07/100.

| | Details, caveats and limitations (reference separate sheet if necessary): | | | | | | | |
|----|--|--|--|--|--|--|--|--|
| 1. | 2,400 SF of deck replacement included in bid, additional deck replacement at \$15 per SF | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| | | | | | | | | |

SIGNATURE ACKNOWLEDGEMENT (SUBMITTAL PAGE)

To The City of Avon Park, a Political Subdivision of the State of Florida

Date: 04/17/2024

| 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 construction, service or material and is in all respects fair and withou |
| collusion or fraud. I agree to abide by all conditions of this bid and certify that I have read and understand the |
| bidding documents. I have completed and submitted all bid submittal forms, and I am authorized to sign this |
| bid for the bidder. In submitting a bid to the City, the bidder offers and agrees that if the bid is accepted, the |
| bidder will convey, sell, assign or transfer to the City all rights, titles and interests in and to all causes of action |
| it may now or hereafter acquire under the Anti-Trust Laws of the United States and the State of Florida for price |
| fixing relating to the particular commodities or services purchased or acquired by the City. At the City's |
| discretion, such assignment shall be made and become effective at the time the City tenders final payment to the |
| bidder. |

01111

| L. Cobb Construction | Julia |
|------------------------------|----------------------------------|
| VENDOR NAME | AUTHORIZED SIGNATURE (MANUAL) |
| 401 S 6th Ave | Clay Cobb |
| MAILING ADDRESS | NAME (TYPED OR PRINTED) |
| Wauchula, Fl, 33873 | CEO |
| CITY, STATE AND ZIP CODE | TITLE (TYPED OR PRINTED) |
| 863-773-3839 | 863-773-3839 |
| (AREA CODE) TELEPHONE NUMBER | TOLL FREE NUMBER |
| | |
| 863-773-2006 | Operations@Lcobbconstruction.com |

NOTE: If Bidder checks "yes" above, Bidder agrees that the City will use a City check for the payment of any and all invoices submitted as a result of the performance of this bid.

Melanie S. Griffin, Secretary



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION STATE OF FLORIDA

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

COBB, KERMIT LAVON

L COBB CONSTRUCTION INC 401 S 6TH AVE WAUCHULA FL 33873 LICENSE NUMBER: CGC031692

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



(Rev. October 2018) Department of the Treasury

Request for Taxpayer Identification Number and Certification

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

| internal | Revenue Service Go to www.irs.gov/FormW9 for ins | structions and the late | est inform | nati | ion. | | | | | | | | | |
|--|--|--|------------------------|----------|----------|--------|------------------|---------|---------------|---|---------------|---------|--|--|
| | 1 Name (as shown on your income tax return), Name is required on this line; of | lo not leave this line blank. | | | | | | | | | | | | |
| - | L. COBB CONSTRUCTION, INC | | | | | | | | | | | | | |
| | 2 Business name/disregarded entity name, if different from above | | | | | | | | | | | | | |
| Print or type. Specific Instructions on page 3. | 3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check | | | | | | | | | 4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) Exemption from EATCA reporting | | | | |
| Print fic Inst | LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LI another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LL is disregarded from the owner should check the appropriate box for the tax classification of its owner. | | | | | | | | code (if any) | | | | | |
| ecif | ☐ Other (see instructions) ▶ | | | | | (Appli | es to acco | ounts | maintaine | ed outsid | de the t | J.S.J | | |
| Sp | 5 Address (number, street, and apt. or suite no.) See instructions. | | Requeste | er's | name a | nd a | ddress | (opt | ional) | | | | | |
| See | 401 SOUTH 6TH AVE | | | | | | | | | | | | | |
| | 6 City, state, and ZIP code | | | | | | | | | | | | | |
| | WAUCHULA, FL 33873 7 List account number(s) here (optional) | | | _ | | | | | | | | | | |
| | 7 List account number(s) here (optional) | | | | | | | | | | | | | |
| Part | Taxpayer Identification Number (TIN) | | 711 | - Marine | | | | _ | | | | | | |
| Branch Services | our TIN in the appropriate box. The TIN provided must match the nan | ne given on line 1 to av | roid | Soc | cial sec | urity | numbe | er | | | | | | |
| backup | withholding. For individuals, this is generally your social security nunted alien, sole proprietor, or disregarded entity, see the instructions for | nber (SSN). However, f | or a | | | 7 | | | | T | T | \Box | | |
| | it allen, sole proprietor, or disregarded entity, see the instructions for , it is your employer identification number (EIN). If you do not have a i | | ta L | | | | | | - | | | | | |
| TIN, lat | | Carlos de la Carlos de Car | | or | | | | _ | | | | 7 | | |
| | f the account is in more than one name, see the instructions for line 1 or To Give the Requester for guidelines on whose number to enter. | . Also see What Name | and [| Em | ployer | ident | ificatio | n n | umber | _ | _ | 1 | | |
| 74011100 | TO GIVE the helpester for galdelines on whose hamber to offer. | | | 5 | 9 | - 2 | 6 | 2 | 8 2 | 1 | 3 | | | |
| Part | II Certification | | | | | | | | | | | | | |
| | penalties of perjury, I certify that: | | | | | | | | | | | | | |
| 2. I am Serv | number shown on this form is my correct taxpayer identification numl not subject to backup withholding because: (a) I am exempt from bac ice (IRS) that I am subject to backup withholding as a result of a failur onger subject to backup withholding; and | ckup withholding, or (b) | I have no | ot b | een n | otifie | d by th | he l | nterna | ne t | /enu hat I | e am | | |
| | a U.S. citizen or other U.S. person (defined below); and | | | | | | | | | | | | | |
| | FATCA code(s) entered on this form (if any) indicating that I am exempton | | | | | | | | | | | | | |
| you hav | eation instructions. You must cross out item 2 above if you have been not be failed to report all interest and dividends on your tax return. For real estation or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification, be | tate transactions, item 2 ons to an individual retir | does not ement arra | ap | ply. Fo | r moi | rtgage), and | integen | erest p | aid, payn | nents | 3 | | |
| Sign Here | Signature of U.S. person ▶ | | Date ▶ 5 | 5 | 26 | 12 | 02 | 2 | | | | | | |
| Gen | eral Instructions | Form 1099-DIV (dir funds) | vidends, i | incl | luding | thos | e from | sto | cks o | r mul | tual | | | |
| Section noted. | n references are to the Internal Revenue Code unless otherwise | Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) | | | | | | | | | | | | |
| related | developments. For the latest information about developments to Form W-9 and its instructions, such as legislation enacted | Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) | | | | | | | | | | | | |
| | ey were published, go to www.irs.gov/FormW9. | Form 1099-S (proceeds from real estate transactions) | | | | | | | | | | | | |
| Purp | ose of Form | Form 1099-K (mer | | | | * | 25 | | | | | | | |
| informa | vidual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer cation number (TIN) which may be your social security number | Form 1098 (home mortgage interest), 1098-E (student loan interest 1098-T (tuition) | | | | | | t), | | | | | | |
| (SSN), | individual taxpayer identification number (ITIN), adoption | Form 1099-C (can Form 1099-A (acqu | | | andon | ment | of sec | cure | d pro | perty/ | 1 | | | |
| (EIN), t | er identification number (ATIN), or employer identification number o report on an information return the amount paid to you, or other t reportable on an information return. Examples of information | Use Form W-9 on alien), to provide you | ly if you a | are a | a U.S. | | | | | | | | | |
| returns | include, but are not limited to, the following. 1099-INT (interest earned or paid) | If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later. | | | | | | | | | | | | |

SWORN STATEMENT PURSUANT TO SECTION 287.133(3)(a), FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES

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

| 1. | This sworn statement is submitted to | City of Avon Park | | | | | | |
|--|---|---|--|--|--|--|--|--|
| | | [print name of the public entity] | | | | | | |
| by | Clay Cobb / CEO | | | | | | | |
| | [print individual's nam | e and title] | | | | | | |
| for_ | L Cobb Construction, Inc. | | | | | | | |
| | [print name of entity submitting | ng sworn statement] | | | | | | |
| whos | e business address is 401 S 6th ave, Wau | chula, FL 33873 | | | | | | |
| and (| if applicable) its Federal Employer Identific | ration Number (FEIN) is <u>59-2628213</u> | | | | | | |
| (if the entity has no FEIN, include the Social Security Number of the individual | | | | | | | | |
| signing this sworn statement:) | | | | | | | | |

- 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 to be provided to any public entity or an agency or political subdivision or 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 a jury verdict, non-jury 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" included 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.

I understand that a "person" as defined in Paragraph 287.133(1)(e), 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. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. [indicate which statement applies] X Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the 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 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

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. [attached is 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]

STATE OF FLORIDA COUNTY OF HIGHLANDS

| The foregoing instrument | was acknowledged | before me this | 17th day of April 2024 |
|--------------------------|------------------|----------------|------------------------|
| | | | |

Clay Cobb who is personally known to me and who did X did not

take an oath.

No.: My

Commission HH 136752

Expires: 06/02/25

Cole Buchanan

(printed name)



COLE BUCHANAN Commission # HH 136752 Expires June 2, 2025 Bonded Thru Budget Notary Services

INSURANCE (SUBMITTAL PAGE)

By signing below the Proposer is stating that they fully understand the insurance requirements for the project and if awarded the proposal will provide all insurance coverage as required in Bid #24-07.

The requirements are as follows:

- Proposer is insured with a company licensed to do business in the State of Florida
- The insurance company is rated A VIII or better by A.M. Best Rating Company (Workers Compensation, General and Automobile policies)
- The City will be named as an additional insured for general and automobile liability

 The certificate will contain a 30-day written notice of cancellation and a 10-day written notice
- of non- payment
 The General Liability and Worker's Compensation policies will contain waiver of subrogation in favor of The City

| L Cobb Construction, Inc. | |
|---------------------------|--|
| Company Name | |
| All | |
| Bidder (signature) | |

NON-COLLUSIOIN AFFIDAVIT OF PRIME BIDDER (SUBMITTAL PAGE)

| State o | of <u>Florida</u> | | | | | | | | |
|---------|---|---------------|--|--|--|--|--|--|--|
| County | y of Hardee | | | | | | | | |
| | y Cobb | , Being first | | | | | | | |
| Duly sv | worn, deposes and says that: | | | | | | | | |
| 1. | he/she is CEO of L. Cobb Construction, Inc. Bidder that has submitted the attached Bid; | , the | | | | | | | |
| 2. | he/she is fully informed respecting the preparation and contents of the attached Bid and of all pertinent circumstances respecting such Bid; | | | | | | | | |
| 3. | Such Bid is genuine and is not a collusive or sham Bid; | | | | | | | | |
| 4. | Neither the said Bidders nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiliate has in any way colluded, conspired, connived or agreed, directly or indirectly, with any other Bidder, firm or person to submit a collusive or sham Bid in connection with such Contract or has in any manner, directly or indirectly, sought by agreement or collusion of communication or conference with any other Bidder, firm or person to fix the price or prices in the attached bid of any other Bidder, or to fix any overhead, profit or cost element of the Bid Price or the Bid Price of any other Bidder, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the City or any person interested in the proposed Contract; and | | | | | | | | |
| 5. | The price or prices quoted in the attached Bids are fair and proper and are not tainted conspiracy, connivance or unlawful agreement on the part of the Bidder or representatives, owners, employees or parties in interest, including this affiliate. | | | | | | | | |
| | Signed: | | | | | | | | |
| | Title: CEO | u | | | | | | | |
| Subscr | Subscribed and sworn to before me this 17day of <u>April</u> , 2024 | | | | | | | | |
| Co | Cole Bucharan | | | | | | | | |
| | COLE BUCHANAN Commission # HH 136752 | | | | | | | | |
| (Title) | Witness Witness Expires June 2, 2025 Bonded Thru Budget Notary Services | | | | | | | | |
| Му Со | mmission Expires: 06/02/25 | | | | | | | | |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/24/2024

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 | 1-813-229-8021 | CONTACT NAME: | Feather Wright | | | | |
|----------------------------|----------------|---|-----------------------|-----------------------|-----------|--|--|
| M. E. Wilson Company, LLC | | PHONE (A/C, No. Ext | 1): 813-984-3609 | FAX (A/C, No): 813 | -434-2431 | | |
| 300 W. Platt St. | | E-MAIL ADDRESS: fwright@mewilson.com | | | | | |
| Ste 200 | | | INSURER(S) AFFORDING | COVERAGE | NAIC# | | |
| Tampa, FL 33606 | | INSURER A : | 2005-00 (1905-09) (CC | 24147 | | | |
| INSURED | | INSURER B: MARKEL AMER INS CO | | | 28932 | | |
| L. Cobb Construction, Inc. | | INSURER C : | | | | | |
| 401 South 6th Avenue | | INSURER D : | | | | | |
| | | INSURER E : | | | | | |
| Wauchula, FL 33873 | | INSURER F : | | | | | |
| 001/2010 | | | | OLON MUNICED | | | |

COVERAGES CERTIFICATE NUMBER: 70463490 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.

| ISR TR | | TYPE OF INSURANCE | ADDL | SUBR | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMIT | S |
|-----------|--------------------------|---|------|------|-----------------|----------------------------|----------------------------|--|---|
| A | X | CLAIMS-MADE X OCCUR | х | х | MWZY31794224 | 02/01/24 | 02/01/25 | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE | \$ 1,000,000 \$ 1,000,000 \$ 10,000 \$ 1,000,000 \$ 2,000,000 |
| | GEN | VL AGGREGATE LIMIT APPLIES PER: POLICY X PRO- JECT LOC OTHER: | | | | | | PRODUCTS - COMP/OP AGG | \$ 2,000,000 |
| A | AUT | OMOBILE LIABILITY | х | Х | MWTB31794324 | 02/01/24 | 02/01/25 | COMBINED SINGLE LIMIT (Ea accident) | \$ 2,000,000 |
| | X ANY AUTO | | | | | | | BODILY INJURY (Per person) | \$ |
| | | OWNED SCHEDULED AUTOS ONLY | | | | | | BODILY INJURY (Per accident) | \$ |
| | X | HIRED X NON-OWNED AUTOS ONLY | | | | | | PROPERTY DAMAGE (Per accident) | \$ |
| | | 10.000 | | | | | | PIP | \$ 10,000 |
| 3 | х | UMBRELLA LIAB X OCCUR | х | x | MKLV2EUL105732 | 09/01/23 | 09/01/24 | EACH OCCURRENCE | \$ 5,000,000 |
| Ī | | EXCESS LIAB CLAIMS-MADE | | | | | | AGGREGATE | \$ 5,000,000 |
| - | | DED RETENTIONS | | | | | | | s |
| | | RKERS COMPENSATION | | х | MWC31794124 | 02/01/24 | 02/01/25 | X PER OTH- | |
| | ANY | PROPRIETOR/PARTNER/EXECUTIVE | | | | | | E.L. EACH ACCIDENT | \$ 1,000,000 |
| | OFFICER/MEMBER EXCLUDED? | | N/A | | | | | E.L. DISEASE - EA EMPLOYEE | \$ 1,000,000 |
| | If yes | s, describe under CRIPTION OF OPERATIONS below | | | | | 7 146 | E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 |
| - | | land Marine | | | MKLM21IM0001990 | 09/01/23 | 09/01/24 | Leased/Rented Eqp | 500,000 |
| | | | | | | | | Deductible | 2,500 |

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

30 Days notice of cancellation applies except 10 days for non-payment of premium per policy terms and conditions.

| CERTIFICATE HOLDER | CANCELLATION |
|---------------------------------|--|
| For Informational Purposes Only | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| 401 6th Avenue | AUTHORIZED REPRESENTATIVE |
| Wauchula, FL 33873 | Had Walter |

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DRUG-FREE WORKPLACE FORM (SUBMITTAL PAGE)

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies

| That L. Cobb Construction, Inc. does | | | | |
|--------------------------------------|--------------------|---|--|--|
| | | : (Name of Business) | | |
| 1. | | 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 employee for violations of such prohibition. | | |
| 2. | | 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 programs, employee assistance programs and the penalties that may be imposed upon employees for drug abuse violations. | | |
| 3. | | 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. | | In the statement specified in subsection (1), notify the employee 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, plea of guilty or nolo contender to, any violation of Chapter 1893 or of any controlled substance law of United States any state, for a violation occurring in the workplace no later than five (5) days after such Conviction. | | |
| | 16. | 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. | | |
| | 17. | Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section. | | |
| | | person authorized to sign the statement, I certify that this firm complies fully with the above ments. | | |
| | | Colle 1 | | |
| | Bidder's Signature | | | |
| | | 04/17/24 | | |

Date

DRUG-FREE WORKPLACE FORM (SUBMITTAL PAGE)

The successful Bidder, simultaneously with the execution of the Agreement, shall furnish a Performance and Payment Bond in an amount equal to 100 percent (100%) of the Contract Price. The Bond shall be secured from a Surety Company listed on the Treasury Department's most current list and acceptable to the Owner.

Performance and Payment Bonds may be submitted on a standard form used by the Bidder's Surety Company. The Owner reserves the right to accept or reject the style and content of the Performance Bond Form submitted by the Bidder.

Performance and Payment Bonds shall be submitted with the executed Agreement.

Attorneys-in-fact who sign BID BONDS or PAYMENT BONDS and PERFORMANCE BONDS must file with each BOND a certified and effective dated copy of their Power of Attorney.

END OF SECTION

INDEMNIFICATION

To the fullest extent permitted by laws and regulations, and in consideration of the amount stated on any Purchase Order, the Contractor shall defend, indemnify, and hold harmless the City, its officers, directors, agents, guests, invitees, and employees from and against all liabilities, damages, losses, and costs, direct, indirect, or consequential (including but not limited to reasonable fees and charges of engineers, architects, attorneys, and other professionals and court and arbitration costs) arising out of or resulting from any acts of negligence, recklessness or intentional wrongful misconduct in the performance of the work by the Contractor, any Subcontractor, or any person or organization directly or indirectly employed by any of them to perform or furnish any of the work or anyone for whose acts any of them may be liable.

In any and all claims against the City, or any of its officers, directors, agents, or employees by any employee of the Contractor, any Subcontractor, any person or organization directly or indirectly employed by any of them to perform or furnish any of the work or anyone for whose acts any of them may be liable, this indemnification obligation shall not be limited in any way by any limitation on the amount or type of damages, compensation, or benefits payable by or for the Contractor or any Subcontractor or other person or organization under workers' or workmen's compensation acts, disability benefit acts, or other employee benefit acts, nor shall this indemnification obligation be limited in any way by any limitation on the amount or type of insurance coverage provided by the City, the Contractor, or any of his Subcontractors. To the extent this Indemnification conflicts with any provision of Florida Law or Statute, this indemnification shall be deemed to be amended in such manner as to be consistent with such Law or Statute.

Subrogation: The Contractor and his Subcontractors agree by entering into this contract to a Waiver of Subrogation for each required policy herein. When required by the insurer, or should a policy condition not permit Contractor or Subcontractor to enter into a preloss agreement to waive subrogation without an endorsement, then Contractor or Subcontractor agrees to notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy, which includes a condition specifically prohibiting such an endorsement, or voids coverage should Contractor or Subcontractor enter into such an agreement on a pre-loss basis.

Release of Liability: Acceptance of the Contractor of the last payment shall be a release to the City and every officer and agent thereof, from all claims and liability hereunder for anything done or furnished for, or relating to the work, or for any act or neglect of the City or of any person relating to or affecting the work.

Savings Clause: The parties agree that to the extent the written terms of this Indemnification conflict with any provisions of Florida laws or statutes, in particular Sections 725.06 and 725.08 of the Florida Statutes, the written terms of this indemnification shall be deemed by any court of competent jurisdiction to be modified in such a manner as to be in full and complete compliance with all such laws or statutes and to contain such limiting conditions, or limitations of liability, or to not contain any unenforceable, or prohibited term or terms, such that this Indemnification shall be enforceable in accordance with and to the greatest extent permitted by Florida Law.

| ву: | |
|--|---|
| Signature of Owner or Officer | |
| DATE: 4/17/24 | ATTEST: Ole Busharan Corporate Secretary or Witness |
| STATE OF: Florida | 863-773-3839 |
| COUNTY OF: Hardee | Organization Phone Number |
| Printed Name Company Name He/She is personally known to me or ha | |
| | State Drivers License |
| Number Identification, and did_x_/d Signature of Person Taking Acknowledg | |
| Princed Name of Person Taking Acknow Commission # HH 136752 Expires June 2, 2025 Bonded Thru Budget Notary Services | vledgment |

Notary Seal



CAPACITY AND AVAILABILITY

L Cobb Construction is currently staffed with a General Manager, General Superintendent, and 15+ Superintendents who oversee 100+ employees—including carpenters, concrete crews, and general laborers.

L Cobb Construction is partnered with Waldorff Insurance and Bonding for all our bonding needs. We have a capacity of \$50 million for single projects and an excess of \$100 million aggregate. This capacity is not a limit for our company but is more of a guide for our future growth.

L Cobb Construction also owns its own line of construction equipment. If any other type of equipment is needed, LCC could obtain it through the sister company, Florida Sales & Rental, Inc. A current list of all the construction equipment owned by LCC is also provided in the attachments.





Approach to the Project

L Cobb Construction approaches each project based on its unique requirements. The foundation of each project is the schedule and the budget based off the plans. Using the bidding as the start of the budget and adding the timeline of tasks that are associated to cover all aspects of the project to build a guideline of what should be taking place.

As the project progresses, there are always steppingstones that come along the way. Documentation and communication are the keys to keeping a working relationship with the customer. RFI's and Submittals with logs are kept and updated with each entry. Progress meetings either with the customer or subcontractors are held covering key issues of the project.

When an issue arises, we believe the contractor should first gather all the facts and identify all aspects of the problem and then utilize the it's team to come up with solutions to present that are in the best interest of the owner and the project. L Cobb will work to minimize all cost and keep the project on schedule while working with the project Team.

During the process of the project the closeout documents are being amassed for the final submittal of the project. Neatly bound and presented for future reference. Cobb has found this process to be successful and is the guideline for all projects. The company, from the field to the office works with the one goal which is a satisfied customer.



LICENSES & CERTIFICATIONS

Licenses:

FL State License: Certified General Contractor (CGC) FL State License: Home and Property Inspector

Certifications:

MSHA Certificate

Florida Phosphate Producer Certificate (FPP card)

LAVON COBB

President

PROFILE

LAVON COBB STARTED THE BUSINESS IN 1979 AND INCORPORATED AS A GENERAL CONTRACTOR (L. COBB CONSTRUCTION, INC.) IN 1985. OWNED BY LAVON, LINDA, AND CLAY COBB, THE COMPANY HAS ACHIEVED STEADY GROWTH OVER THE PAST 42 YEARS. LAVON CONTINUES TO INSPIRE WITH HIS ENTREPRENEURIAL SPIRIT AND LEADERSHIP ABILITIES, AND HIS ATTENTION TO DETAIL ASSURE A REFINED CLIENT EXPERIENCE. THE COMPANY WAS FOUNDED UPON WHILE ALWAYS UTILIZING SELF-EVALUATION TO ENSURE THAT WE ARE BETTER TOMORROW THAN WE WERE TODAY.

Contact

PHONE:

0:863-773-3839

WEBSITE:

https://cobbsitedevelopment.com https://lcobbconstruction.com

EMAIL:

Lavon@LCobbConstruction.com

WORK EXPERIENCE

L Cobb Construction Inc. & Cobb Site Development - President 1984 - Present

Has established and continued to grow commercial construction company specializing in design/build and construction management projects. Projects completed have included multi-million dollar vertical and site construction projects, utilizing various funding sources including FAA and FDOT. All projects to date have been completed and without liquidated damages. Project completion and accelerated scheduling has been accomplished through utilization of internal self-performance of all site, concrete, and carpentry aspects of the projects.

Lavon Cobb Construction Inc. - Owner

1979 - 1984

Established concrete and masonry business specializing in foundation construction and CMU wall construction. Work during this period included various residential and commercial construction projects as sub-contractor

COMMUNITY INVOLVEMENT

- · City of Wauchula Airport Authority, Chairman
- Florida's First Assembly of God Church, Deacon, 13 Years
- · Hardee County Chamber of Commerce, Past Vice-Chair
- Hardee County Economic Development Council, Past Board Member
- Hardee County Industrial Development Authority, Past Board Chair
- Hardee County Licensing Board, Board Member
- Hardee County YMCA, Past Chair 2 Terms
- Rotary Club of Hardee County, Charter Member, Past President 2 Terms – Rotarian of the Year in 2013



CLAY COBB

Chief Executive Officer (CEO)

PROFILE

My goal is to have satisfied customers by completing projects on schedule and within budget. Relationships are the key, and a satisfied customer is our best advertisement. Key components I bring to every project are:

- Formulating strategy
- Improving performance
- Procuring resources
- Securing compliance

CONTACT

PHONE:

0:863-773-3839

WEBSITE:

https://cobbsitedevelopment.com https://lcobbconstruction.com

EMAIL:

Clay@LCobbConstruction.com

LICENSES & CERTIFICATIONS

Licenses:

FL State License: Certified General Contractor (CGC)

FL State License: Certified Underground Utility and Excavation Contractor FL State License: Building Contaminant (Mold) Remediator and Assessor

FL State License: EPA/RRP Lead Renovator FL State License: Home and Property Inspector

Certifications:

OSHA Construction Safety & Health Certification MSHA Certificate

FL Advanced Work Zone Traffic Control Certificate

FL DOT Office of Motor Carrier Compliance Safety Training Certificate

Powered Industrial Lift Truck Trainer Certification Florida Phosphate Producer Certificate (FPP card)

TWIC Card

WORK EXPERIENCE

Cobb Site Development Inc. - CEO

2005 - Present

Responsible to oversee the company's ongoing operations and procedures. Works directly with other management teams members. Assists with decision making regarding the over-all strategy and direction of the company.

L Cobb Construction Inc. - CEO

2005 - Present

Responsible for over-all strategy and direction of the Company, developing and supporting the day-to-day management team. Decision making concerning allocating capital and the company's priorities.

Florida Sales and Rental, Inc. dba Grand Rental - CEO

2008 - Present

Responsible for over-all strategy and direction of the Company, developing and supporting the day-to-day management team including the General Manager. Decision making concerning allocating capital and the company's priorities.

COMMUNITY INVOLVEMENT

- Hardee County YMCA Board of Directors since 2008 President since 2013
- Hardee County Chamber of Commerce since 2008 President from 2015 – 2016
- Fort Meade Chamber of Commerce Board of Directors since 2015
- Sarasota Family YMCA, Board of Directors since 2013
- Member Florida's First Assembly of God Church in Wauchula



EDUCATION & CERTIFICATIONS

University of South Florida Muma College of Business

2008 - 2011

Bachelor of Science: Marketing & Management

Certifications:

MSHA Certificate - 2012 Florida Phosphate Producer Certificate (FPP card) - 2012 TWIC Card - 2012

Community Involvement:

Hardee County YMCA, Board Member Hardee County Youth Sports – Vice President

WORK EXPERIENCE

Cobb Site Development Inc. / L Cobb Construction Inc. COO & Project Manager

2012 - Present

I coordinate and oversee scheduling and progress of projects. Assist with estimates to customers for L. Cobb Construction and Cobb Site development. I am also responsible for budgets and job costs associated with L. Cobb Construction and Cobb Site Development projects. I personally assist Clay Cobb with day-to-day operations-scheduling of manpower and equipment. Assist project superintendents with all aspects of onsite project coordination and supervision. I am a liaison between field operations and clients. Other duties and responsibilities include procurement and sub-contract coordination.

KYLE COBB

Chief Operating Officer (COO)

PROFILE

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Key components I bring to every project are:

- Formulating strategy
- Improving performance
- Procuring resources
- Securing compliance

CONTACT

PHONE:

0:863-773-3839

WEBSITE:

https://cobbsitedevelopment.com

EMAIL:

Kyle@LCobbConstruction.com

MAJOR PROJECTS COMPLETED

- Seminole Tribe of Florida Lakeland Trust Infrastructure & Land Development Entryway
- Amazon KLAL Gateway
- City of Winter Haven Downtown Streetscape Improvements
- Mosaic Ona Compound Phase 1 & 2



EDUCATION & CERTIFICATIONS

Education:

B.S. University of Florida

Certifications:

MSHA Certificate

Florida Phosphate Producer Certificate (FPP card)

BILL **JERNIGAN**

Project Coordinator/ Estimator

PROFILE

My goal is to have satisfied customers by completing projects on schedule and within budget. Relationships are the key, and a satisfied customer is our best advertisement.

Key components I bring to every project are:

- Formulating strategy
- Improving performance
- Procuring resources
- Securing compliance

Contact

PHONE:

0:863-773-3839 C: 863-781-0439

WEBSITE:

https://cobbsitedevelopment.com https://lcobbconstruction.com

Bill@lcobbconstruction.com

WORK EXPERIENCE

L Cobb Construction Inc. - Project Coordinator/Estimator 2005 - Present

Management of company resources to establish new projects through owner contact, negotiations, estimating and bidding, Responsibilities also include establishment of budgets, schedules, interpretation of technical specifications and adherence to these items within all projects.

Helena Chemical Company - Sales representative 2003-2005

Managed client relations acquired through purchase of Lykes Agri Sales, Inc. within central Florida region. Established utilization of GEO reference data collection for various aspects of business.

Overlook Groves, Inc - Management Consultant

1998 - 2005

Guided management team in all aspects of business to create improved efficiency and increased profitability.

Lykes Agri Sales, Inc - Sales Representative

1995-2003

Established and managed client base through out West Central Florida through personal contact and implementation of improved technical additions to current business programs.

Ward's Nursery, Inc - Management Consultant

1998-2001

Worked with owner to evaluate current business programs, also to establish and train new management team.

C. Elton Crews, Inc - Production Manager

1985-1995

Managed all aspects of business production including personnel management, planning, budgeting, equipment needs/maintenance and adherence to rules of regulatory agencies.



EDUCATION & CERTIFICATIONS

Hardee Senior High School 1996 - 2000 United States Air Force 2001

Certifications:

Thermology Certification SWPPP Inspector Certification OSHA 30

CHRIS BARTON

Project Coordinator

PROFILE

My goal is to have satisfied customers by completing projects on schedule and within budget. Relationships are the key, and a satisfied customer is our best advertisement.

Key components I bring to every project are:

- Formulating strategy
- Improving performance
- Procuring resources
- Securing compliance

CONTACT

PHONE:

0: 863-773-3839 C: 863-445-4713

WEBSITE:

https://cobbsitedevelopment.com https://lcobbconstruction.com

EMAIL:

Cbarton@LCobbConstruction.com

WORK EXPERIENCE

Cobb Site Development Inc. / L Cobb Construction Inc. Project Coordinator

2019 - Present

Responsible for company business development, project estimating and management. Managing an array of large-scale commercial, industrial, and civil projects from design to delivery. Implementation of company dynamics including hierarchy awareness, job descriptions, and backlog documentation.

Lennar Homes – Director of Construction Operations 2017 - 2019

Oversight of all construction activities, reduced cycle time 26% from Q1 to Q4, Improved H2 surveys from 30% from Q1 to Q3, reduced sale to start cycle time by 14% during Q4.

Beazer Homes - Director of Construction (Tampa Division) 2015 - 2017

Improved Customer Satisfaction scores by 27% year over year through Q1 of 2017. Guild Quality construction surveys Tampa division went from worst in the company in Q1 2016 to #2 in Q4 2016.

Adams Homes – General Manager (Central FL Div.) & Production Manager (Ft. Myers to Ocala Div.)

2011 - 2015

Responsible for all aspects regarding construction, sales and land acquisition. Full P&L responsibilities for one of Adams largest divisions. Managed high profile potentially litigious projects throughout Central Florida, including Chinese drywall and allegedly improper stucco applications.



EDUCATION & CERTIFICATIONS

Education:

- B.S. Warner University Organizational Management
- A.A. Central Florida College General Studies

Certifications:

- 214 License Life Insurance & Annuities
- Real World Negotiating Bennedict Negotiating
- Quality Management Certificate Learning Tree University
- Advanced Safety Awareness Training Safe Start / Safe Track
- (MHSA) Safety Training 2021 Mine Safety and Health Administration
- Florida Phosphate Producers 2021

PETER POPE

Operations Director

PROFILE

My goal is to have satisfied customers by completing projects on schedule and within budget. Relationships are the key, and a satisfied customer is our best advertisement.

Key components I bring to every project are:

- Formulating strategy
- · Improving performance
- Procuring resources
- Securing compliance

CONTACT

PHONE:

0: 863-773-3839 C: 863-670-0288

WEBSITE:

https://cobbsitedevelopment.com https://lcobbconstruction.com

EMAIL:

Peter@cobbsitedevelopment.com

WORK EXPERIENCE

Cobb Site Development Inc. / L Cobb Construction Inc. Operations Director

2018 - Present

- Oversee Operations, Procurement, IT and Estimating functions.
- Executive team member, contributing to company revenue growth of 50%.
- Job Cost, AR reporting, PO's and Subcontract agreements developed and reviewed.
- Instrumental in conversion/update to company operating system, implementation, training, and SME.
- As Executive Team Member, drove need for Company Business Plan.
- Organized and developed information in spread sheet form/new software program for bidding, costing for project profitability and cost reduction.
- Positive & influential Liaison between company and customer. Negotiated solutions when problems arose.

CCC Group, Inc. Florida Fabrication Division - Project Manager 2014 - 2016

- Responsible for scope, schedule, and budget for fabrication projects with the Florida Division.
- Lead weekly production meetings, review KPI's and planning.
- Negotiated service contracts with subcontractors to increase profits.
- Reduced overhead spending through competitive bidding for materials.
- Planning for revitalization, sustainability and 5S implementation to increase production and output.
- Broadened our customer base and sourcing of new suppliers.
- Participated in training and assisting with implementation of Fabtrol software.

Mosaic Fertilizer, LLC. - Senior Buyer

2008 - 2013

- Services site buyer for Mining, Concentrate and Land Management divisions.
- Development of bid packages for repairs and turnarounds for plant and equipment
- Procurement core team leader for Maximo 7.1 software upgrade company wide, US and Canada. Upgrade, redesign, education, and implementation to all divisions.
- Streamsong Project buyer from conception to handing off to management company. World class golf resort project within Mosaic.
- Multiple sourcing projects and service agreement for mine sites.
- Co-designed folder structure and naming conventions for Procurement Livelink system.

CONTRACTOR/VENDOR REFERENCES

| Name of company submitting bid: L. Cobb Construction, Inc. | | | | | | | |
|--|--------------------------|---------|--|--|--|--|--|
| Name of Company Co | ontact Person: Clay Cobb | | | | | | |
| | | | | | | | |
| References | | | | | | | |
| Contact Person: Ple | ease See Attached | Title: | | | | | |
| Phone Number: | E-Mail: | 2 11 | | | | | |
| Company Name: | | | | | | | |
| Address: | | | | | | | |
| | | | | | | | |
| Contact Person: | | Title: | | | | | |
| Phone Number: | E-Mail: | | | | | | |
| Company Name: | | | | | | | |
| Address: | | | | | | | |
| | | | | | | | |
| Contact Person: | | Title: | | | | | |
| | E-Mail: _ | | | | | | |
| Company Name: | | | | | | | |
| Address: | | | | | | | |
| | | | | | | | |
| Contact Person: | E-Mail: _ | Title: | | | | | |
| Phone Number: | E-Mail: _ | | | | | | |
| Company Name: | | | | | | | |
| Address: | | | | | | | |
| Contact Dorson | | Title | | | | | |
| Phone Number: | E Mail. | 1 itie: | | | | | |
| | E-Mail: _ | | | | | | |
| Address: | | | | | | | |
| MUULESS | | | | | | | |



License No. CGC031692 Tel: 863-773-3839/Fax: 863-773-3214 401 South Sixth Avenue, Wauchula, Florida 33873

PROJECT REFERENCES

LAKE PLACID ELEMENTARY - CAFETERIA EXPANSION

LOCATION: LAKE PLACID

Site development and addition to cafeteria at school.

OWNER: HIGHLANDS COUNTY SCHOOL BOARD

ENGINEER: PMS ARCHITECTS AMOUNT: \$2,797,785.05 COMPLETION: 31%

SCHEDULED COMPLETION: AUGUST 2022

CONTACT: FRANK BROWN (863) 471-5645 426 SCHOOL ST SEBRING, FL 33870

FARM WORKER HOUSING PROJECT

LOCATION: SEBRING, FL

Construction of new bunk houses for a labor camp.

OWNER: LOMAS DEL SOL ENGINEER: COOL & COBB AMOUNT: \$2,060,401.27 COMPLETION: 95%

CONTRACT COMPLETION: JULY 2022

CONTACT: CARL COOL (863) 657-2323 8415 STATE RD 62

BOWLING GREEN, FL 33834

HARDEE SENIOR HIGH SCHOOL & NORTH WAUCHULA ELEMENTARY – BATHROOM REMODEL

LOCATION: WAUCHULA, FL

Remodeling all bathrooms and upgrading plumbing & electrical for schools

OWNER: HARDEE COUNTY SCHOOL BOARD ENGINEER: HARDEE COUNTY SCHOOL BOARD

AMOUNT: \$213,375.00

COMPLETION DATE: AUGUST 2022

CONTACT: ROB KRAHL (863) 735-2055

1120 NORTH FLORIDA AVE WAUCHULA, FL 33873



License No. CGC031692 Tel: 863-773-3839/Fax: 863-773-3214 401 South Sixth Avenue, Wauchula, Florida 33873

PROJECT REFERENCES (CONTINUED)

FISHEATING CREEK CAMPGROUND IMPROVEMENTS

LOCATION: PALMDALE, FL

Site development and utilities for upgrade of RV Park Expansion.

OWNER: FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION

ENGINEER: FFWCC AMOUNT: \$1,563,209.44 COMPLETION: 100%

SCHEDULED COMPLETION: APRIL 2020

CONTACT: CYNDI VOLZ (352) 685-6195 620 S. MERIDIAN ST. TALLAHASSEE, FL 32301

AVON PARK STREETSCAPE INFRASTRUCTURE IMPROVEMENTS

LOCATION: AVON PARK, FL

CDBG streetscape improvements, which included new drainage, road reconstruction, sidewalk and curb, pavilion, site lighting and site furnishings

OWNER: CITY OF AVON PARK ENGINEER: COOL & COBB AMOUNT: \$983,188.00 COMPLETION: 100%

CONTRACT COMPLETION: APRIL 2017

CONTACT: CARL COOL (863) 657-2323 8415 STATE RD 62 BOWLING GREEN, FL 33834

CONSTRUCTION OF GRIT RAMP SWWRF

LOCATION: BRADENTON, FL

Install concrete ramp and sump at wastewater treatment facility

OWNER: MANATEE COUNTY

ENGINEER: MANATEE COUNTY PUBLIC WORKS

AMOUNT: \$326,017.86

COMPLETION DATE: MAY 2019 CONTACT: GARY PHILLIPS

> (941) 792-8811 EXT. 5292 1112 MANATEE AVENUE WEST BRADENTON, FL 34205

EXHIBIT "E"

BID BOND PUBLIC CONSTRUCTION BOND

| By this bond, we L Cobb Construction, Inc. as Principal and Pennsylvania Insurance Company as Surety, a corporation chartered and existing under the laws of the State of New Mexico, with principal offices located at PO Box 3646, Omaha, NE 68103, are bound to the City of Avon Park, herein called Owner, in the full and just sum of FIVE percent of amount bid dollars (\$ 5%), good and lawful mone of the United States of America, to be paid upon demand by the Owner, to which payment well and truly to be made, we bind ourselves, our heirs, personal representatives, successors, and assigns jointly and severally arrivable. |
|--|
| THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the Principal has submitted the attached solicitation for a project contract entitled Fire Station Hardening Project (hereinafter "Solicitation") Name of City Project or Bid Package |
| NOW, THEREFORE, if the Principal shall withdraw said Solicitation prior to the date of opening same, o shall within ten (10) days after the prescribed forms are presented to him for signature enter into a written Agreement with City of Avon Park, Florida, in accordance with the Solicitation as accepted, and give a Performance and Payment Bond with good and sufficient Surety or Sureties as may be required, for the faithful performance and proper fulfillment of such Agreement and for the prompt payment of all persons furnishing labor or materials in connection therewith; or, in the event of failure to enter into such Contract and give such Bond within the time specified, if the Principal shall pay the City of Avon Park the difference between the amount specified in said Solicitation and the amount for which the City of Avon Park may procure the required work and/or supplies, provided the latter amount to be in excess the amount specified in said Solicitation, then the above obligations shall be void; otherwise, to remain in full force and effect. |
| DATED THIS 17 DAY OF April , 20 24 Principal |
| By: Clay Cobb / CEO Print name and title |
| STATE OF Florida COUNTY OF Hardee |
| The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 17 day of April , 20 24 , by Clay Cobb as CEO for L Cobb Construction, Inc. Title corporation name |
| WITNESSETH my hand and official seal in the state and county named below. |
| COLE BUCHANAN Seal Commission # HH 136752 Signature: Expires June 2, 2025 Bonded Thru Budget Notary Services Signature: Cole Buchanan Commission No. HH 136752 My Commission Expires: 06/02/25 |
| |
| DATED THIS <u>17</u> DAY OF <u>April</u> , 20 <u>24</u> |

Pennsylvania Insurance Company

Surety

Paul A. Locascio, Attorney-in Fact for Surety & Fl Resident Agent

A corporate resolution authorizing signature by the any of the above corporate signors shall accompany this document to make it valid.

10805 Old Mill Road · Omaha, Nebraska 68154

POWER OF ATTORNEY NO. WALFWB01_0523

KNOW ALL MEN BY THESE PRESENTS: That the California Insurance Company, duly organized and existing under the laws of the State of California and having its principal office in the County of San Mateo, California, and Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company, corporations duly organized and existing under the laws of the State of New Mexico and having their principal office in the County of Santa Fe, New Mexico does herby nominate, constitute and appoint:

Benjamin H. French, Brenda Waldorll Neill, K. Wayne Walker L. Dale Waldorll, Rebekah F. Sharp, Ronald J Hays, Trava Ridlon, William Scott Neill, Paul A. Locascio, Joshua T. Morgan

Its true and lawful agent and attorney-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and its act and deed any and all bonds, contracts, agreements of indemnity and other undertakings in suretyship (NOT INCLUDING bonds without a fixed penalty or financial guarantee) provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed the sum of:

"Unlimited"

This Power of Attorney is granted and is signed and sealed under and by the authority of the following Resolution adopted by the Board of Directors of California Insurance Company, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company.

"RESOLVED, That the President, Senior Vice President, Vice President, Assisted Vice President, Secretary, Treasurer and each of them hereby is authorized to execute powers of attorney, and such authority can be executed by use of facsimile signature, which may be attested or acknowledged by any officer or attorney of the Company, qualifying the attorney or attorneys named in given power of attorney, to execute in behalf of, and acknowledge as the act and deed of the California Insurance Company, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company, all bond undertakings and contracts of suretyship, and to affix the corporate seal thereto."

IN WITNESS WHEREOF, California Insurance Company, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company, has caused its official seal to be hereunto affixed and these presents to be signed by its duly authorized officer the 16th day of August 2023.

California Insurance Company, Continental Indemnity Company, Illinois Insurance Company, Pennsylvania Insurance Company

Jeffrey A

Jeffrey A. Silver, Secretary

STATE OF NEBRASKA COUNTY OF DOUGLAS SS:

and effect and has not been revoked.

On this 16th day of August A.D. 20 23, before mea Notary Public of the Sate of Nebraska, in and for the County of Douglas, duly commissioned and qualified, came THE ABOVE OFFICER OF THE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposed and said that he is the officer of the said Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said corporation, and that Resolution adopted by the Board of Directors of said Company, referred to in the preceding instrument is now in force.

IN TESTIMONY WHEREOF, I have hereunto set my hand, and affixed my Official Seal at the County of Do needs, the day and year fift above written.

GENERAL NOTARY - State of Nebraska
LINDA S. DAVIS
My Comm. Exp. September 1, 2027

I, the undersigned Officer of the California Insurance Company, a California Corporation of Foster City, California, Continental Indemnity Company, Illinois Insurance Company and Pennsylvania Insurance Company, New Mexico Corporations of Santa Fe, New Mexico, do herby certify that the original POWER OF ATTORNEY of which the foregoing is full, true and correct copy is still in full force

IN WITNESS WHEREOF, I have hereunto set my hand, and affixed the Seal of said Company, on the

Apri

(Notary Public)

day of

L CC A COLON STATEMENT

ALLEGED NEGLIGENCE OR BREACH OF CONTRACT DISCLOSURE FORM

Please fill in the form below. Provide a sheet for each incident that has occurred over the past 10 years. Please compete in chronological order with the most recent incident on starting on page 1. Please do not modify this form or submit your own variation.

| 1. Your Company Name | L. Cobb Construction | |
|--|----------------------|------------------------------|
| Type of Incident (check appropriate box) | □ Alleged Negligence | □ Alleged Breach of Contract |
| 3. Date of Incident | N/A | |
| 4. Who Took Action Against Your Company? (Include name, state, and City.) | N/A | |
| 5. What was the initial circumstance for this action? | N/A | |
| 6. What was the final outcome of this action? | N/A | |

Receipt of Addenda Acknowledgement

| Bidder shall acknowledge below th | e receipt of any and all Addenda, if any, to the Plans and |
|--|---|
| Specifications, listing the Addenda b | y number and date. |
| Addendum No.: 1 Date: 4/8/2 | 24 Signature: |
| Addendum No.: 2 Date: 4/8/ | 24 Signature: |
| Addendum No.:Date: | Signature:/ |
| Addendum No.:Date: | Signature: |
| Addendum No.:Date: | Signature: |
| Bid Acknowledgement | |
| This acknowledgment shall be signed | , in blue ink, by a corporate officer, partner, or proprietor: |
| corporation, firm, or person submitted and is in all respects fair and without this bid and certify that I have read | ting a bid for the same construction, service, or material it collusion or fraud. I agree to abide by all conditions of and understand the bidding documents in their entirety. bid submittals and I am authorized to sign this bid for the |
| Khlin | 4/17/24 |
| Authorized Signature | Date |
| Name of Authorized Person:Ky | le Cobb |
| Title / Position of Authorized Person | : |

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H86725

Entity Name: L. COBB CONSTRUCTION, INC.

Current Principal Place of Business:

401 S 6TH AVE

WAUCHULA FL 33873

Current Mailing Address:

401 S 6TH AVE

WAUCHULA, FL 33873 US

FEI Number: 59-2628213

Certificate of Status Desired: No.

FILED Apr 13, 2023

Secretary of State

5491344246CC

Name and Address of Current Registered Agent:

COBB. LAVON 401 S 6TH AVE

WAUCHULA, FL 33873 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 Name D. T. P

COBB. LAVON

Address 401 S SIXTH AVE

City-State-Zip: WAUCHULA FL

Title

D, S, CEO

COBB. JAMES C

Name Address

401 S. 6TH AVE

City-State-Zip: WAUCHULA FL 33873

Title

Title

Name

COBB. LINDA Name

D, V

Address

401 S SIXTH AVE

City-State-Zip: WAUCHULA FL

COO

COBB, JUSTIN K

Address

401 S 6TH AVE

WAUCHULA FL 33873 City-State-Zip:

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; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES C COBB

CEO

04/13/2023

Electronic Signature of Signing Officer/Director Detail

Date



Diana Weems Welcome

■ MENU

Company Information

Company Name L. Cobb Construction, Inc

Company ID Number 450690

Doing Business As (DBA) Name

DUNS Number 147434872 Physical Location

Address 1 401 South Sixth Ave

Address 2

city Wauchula

State FL

Zip Code 33873

County HARDEE



126 S 7th Ave WAUCHULA, FL 33873

Business No.- 2007

BUSINESS TAX

October 1, 2023 - September 30, 2024

This authorizes
L. COBB CONSTRUCTION, INC
to conduct business as a

GENERAL CONTRACTOR at the following location:

401 S 6TH AVE

within the city limits of Wauchula, Florida

Signed. Manthan Jelux

)ate 9/27/2023