

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/20/2022

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).

MILIS Environmental Insurance Services LLC 4411 Suwanee Dam Rd Ste 410 Suwanee GA 30024 MEDICAL MARKET STATISHAM STEP SERVICATE NUMBER: MEDICAL MARKET STATISHAM STATISHAM STEP SERVICATE NUMBER: MEDICAL MARKET STATISHAM STAT	th	this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).											
MILE ENVIRONMENTAL INSURANCE DATE AND	PRO	DUCER				IVANIC.							
### A411 Swamee Dam Rd Stel 410 Swamee GA 30024 **Swamee GA 30024 *	Mills Environmental Insurance Services LLC						ONE (A/C. No): (404) 4-					43-0649	
SUMBRED Georgia GeoSciences LLC 4065 Winterberry Road Cumming GA 30040 COVERAGES COVERAGES COVERAGES CERTIFICATE NUMBER: SUBJECT 1 NUMBER 1: NUMBER 2: NUMBER 3: NUMBER 5: NUMBER 6: NUMBER 6: NUMBER 7: NUMBER 7: NUMBER 8: NUM	441	1 Suwanee Dam Rd Ste 410				È-MAIL notricio millo millo com							
MISURER 2:	Suv	/anee GA 30024										NAIC#	
NSURER 8: ***AGREED COVERAGES** **COVERAGES** **COVERAGES** **CENTIFICATE NUMBER:** **REVISION NUMBER:						INSURE							
Georgia GeoSciences LLC 4055 Winterberry Road Cumming GA 30040 COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICY SO INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ANAMED ABOVE FOR THE POLICY PERIOD MINICATED. NOTIVITY-BY TAMBONG ANY RECUltERMENT, TEAM OR CONDITION OF ANY CONTRACT OR OTHER DOLUMENT HERSECT TO HIGH THIS EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. EXCULSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CONDITIONS OF SUCH POLICIES. EXPERIENCE LIMITARY SUCH PAID CONDITIONS OF SUCH POLICIES. EXPERIENCE LIMITS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY CONDITIONS OF SUCH POLICIES. EXPERIENCE LIMITARY SUCH PAID CONDITIONS OF SUCH POLICIES. EXPERIENCE LIMITS OF SUCH POLICI	INSU	RED											
A985 Winterberry Road Cumming GA 30040 INSURER D INSURER D		Georgia GeoSciences LLC											
COVERAGES CERTIFICATE NUMBER: NISURER E: NISURER F: NISURE F: NISURER F: NISURER F: NISURER F: NISURER F: NISURER F:		<u> </u>											
COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURANCE DATED AGOVE FOR THE POLICY PERIOD. INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURANCE DATED AGOVE FOR THE POLICY PERIOD. INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURANCE DATED AGOVE FOR THE POLICY PERIOD. INSURANCE AFFORDED BY THE POLICIES OF SCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITION OF ANY CONTRACT OF STORY PAID CLAIMS. COMMENCAL GRAND CANDIDATE OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDITIONAL HAVE BEEN REDUCED BY PAID CLAIMS. COMMENCAL GRAND CANDIDATE AND CONTRACT OF STORY BEEN REDUCED BY PAID CLAIMS. COMMENCAL GRAND CANDIDATE AND CONTRACT OF STORY BY POLICY PERIOD. IN CONTRACT PERI		•											
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 TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD CLAIMS. COMMERCIAL GENERAL LIMITATION OF THE ORIGINAL CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE LIMIT SHOWN MAY HAVE BEEN REDUCED BY PAD CLAIMS. COMMERCIAL GENERAL LIMITATION OF THE ORIGINAL CONTRACT OR OTHER DOCUMENT. IN THE TERMS. IN THE TE													
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURD 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 PADI CLAIMS. TYPE OF RISURANCE AND COLLIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PADI CLAIMS. COMMERCIAL GREEAL LIBITY COMMERCIAL GREEAL LIBITY GEN. AGGREGATE LIMIT APPLIES PER POLICY NUMBER POLICY INFO POLICY PRODUCED BY PADI CLAIMS. AND VINJEY SOME PRODUCTION. GEN. AGGREGATE LIMIT APPLIES PER PRODUCTS. COMMON AND ALL ADD VINJEY. SOME PRODUCTS. SOME	CO	/ERAGES CER	TIFIC	CATE	NUMBER:	INSURE	жг.		REVISION NUM	MBER:			
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 REQUEDED BY PAID CLAMS. PROJECT FOR MANDER POLICY FOR MANDER PRODUCT	_					VE BEE	N ISSUED TO				IE POL	ICY PERIOD	
NSR TYPE OF INSURANCE ADDL.SUBR POLICY NUMBER POLICY PER POLIC	CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,												
COMMERCIAL GENERAL LIABILITY CLAIRS-MADE OCCUR													
DAMAGE TO RENTED PERMASS (ER COURTENANCE) S GEN! AGGREGATE LIMIT APPLIES PER POLICY SECT LOC OTHER ANY AUTO OCUMEN OLLY AUTOS ONLY AUTOS ONL	LTR						(MM/DD/YYYY)	(MM/DD/YYYY)					
DEEMISES (Labourimone) S									DAMAGE TO RENTED				
PERSONAL & ADV INJURY \$ GENERAL AGGREGATE UNIT APPLIES PER: PRODUCY PRO. OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS ONL		CLAIMS-MADE OCCUR								urrence)			
GENT AGGREGATE LIMIT APPLIES PER PRODUCTS - COMPOP AGG \$									MED EXP (Any one person)		\$		
POLICY ROLL OTHER AUTOMOBILE LABBLITY ANY AUTO OWNED AUTOS ONLY HIED AUTOS ONLY AUTOS								PERSONAL & ADV INJURY \$					
PRODUCY JECT TOC OTHER AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY AUTOS											\$		
AUTOMOBILE LIABILITY ANY AUTO ONNEL AUTOS ONLY AUT		POLICY JECT LOC							PRODUCTS - COM		•		
ANY AUTO OWNED AUTOS ONLY AUTOS		·							COMBINED SINGLE	LINALT			
OWNED AUTOS ONLY AUTOS		├							(Ea accident)				
AUTOS ONLY NON-OWNED AUTOS ONLY AUTOS ONLY NON-OWNED AUTOS ONLY SON-OWNED AUTOS ONLY AUTOS ONLY AUTOS ONLY SON-OWNED SON-OWNED AUTOS ONLY SON-OWNED SON-OWNE		-					` ' '						
AUTOS ONLY BELLACIDED CCCUR EXCESS LIAB CLAIMS-MADE DED RECHTION S WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTIMENE/EXECUTIVE OFFICE/RMEMBER EXCLUDED? (Mandator) in Hi) If yes, describe under the properties of the properti		AUTOS ONLY AUTOS							DDODEDTY DAMA OF				
UMBRELLA LIAB OCCUR EXCESS LIAB OCCUR EXCESS LIAB OCCUR CAIMS-MADE OCCUR EXCESS LIAB OCCUR CAIMS-MADE OCCUR													
EXCESS LIAB CLAIMS-MADE Ded											\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIET ORPARTINER EXECUTIVE OF A PROPRIET OR PARTINER OR PARTINER OF A PROPRIET OR PARTINER OR PARTI									EACH OCCURREN	CE	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY AND REPROPRIETOR PARTINER/EXECUTIVE OF Mandatory in NHT If yes, describe under DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CERTIFICATE HOLDER Evidence of Insurance CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE KEL. DISEASE - POLICY LIMIT \$ EL. LISEASE - POLICY LIMIT \$ EL. LISEASE - POLICY LIMIT \$ EL. LISEASE - POLICY LIMIT \$ EL. DISEASE - POLICY LIMIT \$		EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$		
ANY PROPRIETOR PARTNER/EXECUTIVE N/A E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ E.L. DISEASE - POLICY LI									l DED		\$		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (IMANDATORY IN IN) If yes, describe under DESCRIPTION OF OPERATIONS below DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) DESCRIPTICATE HOLDER CANCELLATION CERTIFICATE HOLDER E.L. DISEASE - POLICY LIMIT \$ 1,000,000 Aggregate \$1,000,000 Professional Liability Retro Date: 07/01/2021 CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE KDM>	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE								STATUTE	ER ER			
(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Description of Operations Made Description of Operations / Locations / Loca									E.L. EACH ACCIDE	NT	\$		
DESCRIPTION OF OPERATIONS below A Professional Liab-Claims Made D96261366 S1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,000 DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Professional Liability Retro Date: 07/01/2021 CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE SKDM>	(Mandatory in NH)								E.L. DISEASE - EA	EMPLOYEE	\$		
A Professional Liab-Claims Made D96261366 07/01/2022 07/01/2023 Aggregate \$1,000,000 DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Professional Liability Retro Date: 07/01/2021 CERTIFICATE HOLDER CANCELLATION Evidence of Insurance 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 KDM>	DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POL	LICY LIMIT	<u> </u>		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Professional Liability Retro Date: 07/01/2021 CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE KDM>												•	
Professional Liability Retro Date: 07/01/2021 CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <kdm></kdm>	A Professional Liab-Claims Made				D96261366		07/01/2022	07/01/2023	Aggregate		\$1,0	00,000	
CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE KDM>	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE KDM>													
Evidence of Insurance 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 KDM>		•											
Evidence of Insurance 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 KDM>													
Evidence of Insurance 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 KDM>													
Evidence of Insurance 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 KDM>													
Evidence of Insurance 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 KDM>													
Evidence of Insurance 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 KDM>	CEF	RTIFICATE HOLDER				CANCELLATION							
THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE KDM>													
	Evidence of Insurance						THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN						
(Totalicia Milla		,				AUTHO	RIZED REPRESI	ENTATIVE					
							(Interior Mills						