CERTIFICATE OF LIABILITY INSURANCE

EFF DATE 01/01/2021
END DATE 12/31/2021

THIS CERTIFICATES 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 be endorsed. If SUBROGATION 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	CONTACT NAME:	Grace Q. Dedios R	
Elegant Empire LLC (805)914-4520 5117 Longfellow Way OXNARD CA 93033	PHONE (A/C, No, EXT):	(805)910-5749	Website: www.elegantempire.co
	EMAIL ADDRESS:	service@elegantempire.net	

INSURED		INSURER(S) AFFORDING COVERAGE	NAIC#
Elegant Empire LLC (805)914-4520 5117 LONGFELLOW WAY OXNARD CA 93033	INSURER A:	Elegant Empire LLC (805)914-4520	Self Fund
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES **CERTIFICATE NUMBER: EELLC2021** **REVISION NUMBER: NA**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN INSURED TO THE INSURED NAME ABOVE FOR THE POLICY PERIOD INDICATED. NOT WITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	START DATE	EXP. DATE	LIMITS	
COMMERCIAL GENERAL LIABILITY	EELLC202102022 Covered State CA	01/01/21	12/31/21	Each event	$10,000
TYPE OF LIABILITY INSURANCE				Med Expense	$50,000
GENERAL AGGREGATE				Adv Injury	$1,000,000
PER LOCATION				Damage	$10,000
OTHER				*Each accident	$75,000
*WORKER'S COMPENSATION	WCLLC2021 CALIFORNIA	1/1/2021	12/31/2021	*Policy Limit	$500,000

DESCRIPTION OF LIABILITY INSURANCE

Those usual to the Insured's Operations. Certificate Holder is an Additional Insured per the Business Liability Coverage Policy# EELLC202102022 attached to this policy as requested.

CERTIFICATE HOLDER	ADDITIONALLY INSURED	CANCELLATION
Elegant Empire LLC, 5117 Longfellow Way Oxnard CA 93033		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:** Gene Ramirez