

All Public Work Projects are required to use the Louisiana Uniform Public Work Bid Form

All prices must be held firm unless an escalation provision is requested in this bid. Jefferson Parish will allow one escalation during the term of the contract, which may not exceed the U.S. Bureau of Labor Statistics National Index for all Urban Consumers, unadjusted 12 month figure. The most recently published figure issued at the time an adjustment is requested will be used. A request must be made in writing by the vendor, and the escalation will only be applied to purchases made after the request is made.

Are you requesting an escalation provision?

YES _____ NO ✓MAXIMUM ESCALATION PERCENTAGE REQUESTED N/A %INITIAL BID PRICES WILL REMAIN FIRM THROUGH THE DATE OF END OF CONTRACT

For the purposes of comparison of bids when an escalation provision is requested, Jefferson Parish will apply the maximum escalation percentage quoted by the bidder to the period to which it is applied in the bid. The initial price and the escalation will be used to calculate the total bid price. It will be assumed, for comparison of prices only, that an equal amount of material or labor is purchased each month throughout the entire contract.

DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

N/A

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable)

44882

THIS SECTION MUST BE COMPLETED BY BIDDER:

FIRM NAME: FORET CONTRACTING GROUP, L.L.C.ADDRESS: PO BOX 70CITY, STATE: THIBODAUX, LA ZIP: 70302TELEPHONE: (985) 492-3323 FAX: (985) 449-4060EMAIL ADDRESS: bforet@foretgroup.com

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: _____

NUMBER: _____

NUMBER: _____

NUMBER: _____

TOTAL PRICE OF ALL BID ITEMS: \$ 48,870.00AUTHORIZED SIGNATURE: [Signature]BENJAMIN A. FORET

Printed Name

TITLE: MANAGER, MEMBER

SIGNING INDICATES YOU HAVE READ AND COMPLY WITH THE INSTRUCTIONS AND CONDITIONS.

NOTE: All bids should be returned with the BID NUMBER and BID OPENING DATE indicated on the outside of the envelope submitted to the Purchasing Department.

INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00125860

SEALED BID

| ITEM NUMBER | QUANTITY | U/M | DESCRIPTION OF ARTICLES | UNIT PRICE QUOTED | TOTALS |
|----------------|----------|-----|---|----------------------|-----------------------|
| | | | TWO (2) YEAR CONTRACT FOR GRASS CUTTING AND HORTICULTURAL SERVICES FOR VARIOUS LOCATIONS FOR THE JEFFERSON PARISH ANIMAL SHELTER | | |
| 1 | 24.00 | MO | 0010 - GRASS CUTTING AND HORTICULTURAL SERVICES, PER ATTACHED SPECIFICATIONS LOCATION: EAST BANK SHELTER #1 HUMANE WAY JEFFERSON, LA 70123 | 545. ⁰⁰ | 13,080. ⁰⁰ |
| 2 | 24.00 | MO | 0020 - GRASS CUTTING AND HORTICULTURAL SERVICES, PER ATTACHED SPECIFICATIONS LOCATION: WEST BANK LOCATION 2701 LAPALCO BLVD HARVEY, LA 70058 | 817. ⁰⁰ | 19,608. ⁰⁰ |
| 3 | 24.00 | MO | 0030 - GRASS CUTTING AND HORTICULTURAL SERVICES, PER ATTACHED SPECIFICATIONS LOCATION: ANIMAL SHELTER PROPERTY 128 WRIGHT AVE TERRYTOWN, LA 70056 | 85.50 | 2,052. ⁰⁰ |
| 4 | 24.00 | MO | 0040 - GRASS CUTTING AND HORTICULTURAL SERVICES, PER ATTACHED SPECIFICATIONS LOCATION: WEST BANK ANIMAL SHELTER / FIELD (FIELD OUTSIDE OF THE FENCE AND ALL THE WAY TO THE CANAL) 2701 LAPALCO BLVD HARVEY, LA 70058 | 588.75 | 14,130. ⁰⁰ |

CORPORATE RESOLUTION

EXCERPT FROM MINUTES OF MEETING OF THE BOARD OF DIRECTORS OF

FORET CONTRACTING GROUP, L.L.C.
INCORPORATED.

AT THE MEETING OF DIRECTORS OF FORET CONTRACTING GROUP, L.L.C.
INCORPORATED, DULY NOTICED AND HELD ON APRIL 16 2019,
A QUORUM BEING THERE PRESENT, ON MOTION DULY MADE AND SECONDED. IT
WAS:

RESOLVED THAT BENTON A. FORET, BE AND IS HEREBY
APPOINTED, CONSTITUTED AND DESIGNATED AS AGENT AND ATTORNEY-IN-
FACT OF THE CORPORATION WITH FULL POWER AND AUTHORITY TO ACT ON
BEHALF OF THIS CORPORATION IN ALL NEGOTIATIONS, BIDDING, CONCERNS
AND TRANSACTIONS WITH THE PARISH OF JEFFERSON OR ANY OF ITS AGENCIES,
DEPARTMENTS, EMPLOYEES OR AGENTS, INCLUDING BUT NOT LIMITED TO, THE
EXECUTION OF ALL BIDS, PAPERS, DOCUMENTS, AFFIDAVITS, BONDS, SURETIES,
CONTRACTS AND ACTS AND TO RECEIVE ALL PURCHASE ORDERS AND NOTICES
ISSUED PURSUANT TO THE PROVISIONS OF ANY SUCH BID OR CONTRACT, THIS
CORPORATION HEREBY RATIFYING, APPROVING, CONFIRMING, AND ACCEPTING
EACH AND EVERY SUCH ACT PERFORMED BY SAID AGENT AND ATTORNEY-IN-
FACT.

I HEREBY CERTIFY THE FOREGOING TO BE
A TRUE AND CORRECT COPY OF AN
EXCERPT OF THE MINUTES OF THE ABOVE
DATED MEETING OF THE BOARD OF
DIRECTORS OF SAID CORPORATION, AND
THE SAME HAS NOT BEEN REVOKED OR
RESCINDED.



SECRETARY-TREASURER

April 16 2019
DATE

Non-Public Works Bid

AFFIDAVIT

STATE OF LouisianaPARISH/COUNTY OF Lafayette

BEFORE ME, the undersigned authority, personally came and appeared: BENTON A. FORET, (Affiant) who after being by me duly sworn, deposed and said that he/she is the fully authorized MANAGER/MEMBER of FORET CONTRACTING GROUP, L.L.C. (Entity), the party who submitted a bid in response to Bid Number 5000125860 to the Parish of Jefferson.

Affiant further said:

Campaign Contribution Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all campaign contributions, including the date and amount of each contribution, made to current or former elected officials of the Parish of Jefferson by Entity, Affiant, and/or officers, directors and owners, including employees, owning 25% or more of the Entity during the two-year period immediately preceding the date of this affidavit or the current term of the elected official, whichever is greater. Further, Entity, Affiant, and/or Entity Owners have not made any contributions to or in support of current or former members of the Jefferson Parish Council or the Jefferson Parish President through or in the name of another person or legal entity, either directly or indirectly.

Choice B ✓ there are NO campaign contributions made which would require disclosure under Choice A of this section.

Debt Disclosures

(Choose A or B, if option A is indicated please include the required attachment):

Choice A _____ Attached hereto is a list of all debts owed by the affiant to any elected or appointed official of the Parish of Jefferson, and any and all debts owed by any elected or appointed official of the Parish to the Affiant.

Choice B ✓ There are NO debts which would require disclosure under Choice A of this section.

Affiant further said:

That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and


[The remainder of this page is intentionally left blank.]

That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.


Signature of Affiant

BENTON A. FORET
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME
ON THE 15th DAY OF April, 2019.


Notary Public

Printed Name of Notary Eugene N. Roth
Notary #008409

Notary/Bar Roll Number

My commission expires lifetime commission

Print

Notary Search - Detail

Name: MR. EUGENE N. ROTH
Address: P. O. BOX 306
THIBODAUX, LA 70302-0306

Phone: (985) 447-3909
Phone 2: (985) 446-3100

Notary ID Number: 8409

Parish: LAFOURCHE with authority in the following parishes:
ASSUMPTION, ST. MARY, TERREBONNE

Agency: N/A

Notary Type: Non Attorney

Status: Active

Commission Date: 02/11/1999

Oath Date: 02/03/1999

Surety Expiration Date: 01/05/2024

Annual Report Current: Yes

Notary Events

Suspension From: 04/12/2012 To: 01/06/2013

Parish Change Previous Parish: TERREBONNE
Previous Commission Date: 01/11/1984

Deceased, Inactivated, Leave of Absence, Pre-Assessment Registration, Pre-Assessment Taken, Resigned, Retirement, and Revoked events are not available prior to February 11, 2012.

[Back to Search Results](#)[New Search](#)

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.

Print or type.
See Specific Instructions on page 3.

| | |
|--|---|
| 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Foret Contracting Group, LLC | |
| 2 Business name/disregarded entity name, if different from above | |
| 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. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► S <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small> <input type="checkbox"/> 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 FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small> |
| 5 Address (number, street, and apt. or suite no.) See instructions. P.O. Box 70 | Requester's name and address (optional) |
| 6 City, state, and ZIP code Thibodaux, LA 70302 | |
| 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. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

| | | | | | | | | | |
|--------------------------------|---|---|---|---|---|---|---|---|---|
| Social security number | | | | | | | | | |
| | | | - | | | | | | |
| or | | | | | | | | | |
| Employer identification number | | | | | | | | | |
| 2 | 0 | - | 0 | 4 | 9 | 0 | 1 | 6 | 9 |

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 ► Ryan Blout | Date ► 1/24/19 |
|-----------|--|-----------------------|

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.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

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.



FORLA-1

OP ID: JG

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/31/2018

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 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
Paul's Insurance Services, LLC
P O Box 1599
Gray, LA 70359
Jeremy J. Clement

CONTACT NAME: Jeremy Clement/Jessica Guillot
PHONE (A/C, No, Ext): 985-868-0715 FAX (A/C, No): 985-851-7447
E-MAIL ADDRESS: JGuillot@paulsagency.com

INSURED
Foret Contracting Group, LLC
dba Foret Land & Tree
P.O. Box 70
Thibodaux, LA 70302

| INSURER(S) AFFORDING COVERAGE | NAIC # |
|---|--------|
| INSURER A: Houston Specialty Insurance Co | 12936 |
| INSURER B: Silver Oak Casualty, Inc | |
| INSURER C: Scottsdale Insurance Co. | 41297 |
| 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 type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: | | HSLR18-00670-07 | 06/01/2018 | 06/01/2019 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ |
| | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS | | HSLR18-00670-07 | 06/01/2018 | 06/01/2019 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| C | UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$ | | XLS0107532 | 06/01/2018 | 06/01/2019 | EACH OCCURRENCE \$ 6,000,000 AGGREGATE \$ 6,000,000 \$ |
| B | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N <input type="checkbox"/> N/A | SVWCLA2705432018 | 06/01/2018 | 06/01/2019 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |
| A | Equipment Floater | | HSLR18-00670-07 | 06/01/2018 | 06/01/2019 | Scheduled |

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

CERTIFICATE HOLDER

CANCELLATION

SAMPLE-

SAMPLE -

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

© 1988-2014 ACORD CORPORATION. All rights reserved.

General Liability:

- Certificate Holder is named as an Additional Insured and provided Waiver of Subrogation as required by written contract, but limited to the operations of the insured under said contract and always subject to the policy terms, conditions and exclusions.
- Contractual Liability as required by written contract, but limited to the operations of the insured under said contract and always subject to the policy terms, conditions and exclusions.
- General Liability insurance is primary and all others are non contributory.

Auto Liability:

- Certificate Holder is named as an Additional Insured and provided Waiver of Subrogation as required by written contract, but limited to the operations of the insured under said contract and always subject to the policy terms, conditions and exclusions.
 - Includes Primary Endorsement.
- Equipment Floater also includes Rented and Leased Equipment for a Limit of \$100,000.

Umbrella Liability:

- Certificate Holder is named as an Additional Insured and provided Waiver of Subrogation as required by written contract, but limited to the operations of the insured under said contract and always subject to the policy terms, conditions and exclusions.
- Policy is follow form

The Workers Compensation Policy:

- Certificate Holder is provided Waiver of Subrogation as required by written contract, but limited to the operations of the insured under said contract and always subject to the policy terms, conditions and exclusions.
- Blanket Alternate Employer as required by written contract.

BID BOND
FOR

Two (2) Year Contract for Grass Cutting and Horticultural Services for Various Locations for the Jefferson Parish Animal Shelter

Date: 4/16/2019

KNOW ALL MEN BY THESE PRESENTS:

That Foret Contracting Group, LLC of Thibodaux, Louisiana, as Principal, and Philadelphia Indemnity Insurance Company, as Surety, are held and firmly bound unto the Jefferson Parish Government (Obligee), in the full and just sum of five (5%) percent of the total amount of this bid, including all alternates, lawful money of the United States, for payment of which sum, well and truly be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

Surety represents that it is listed on the current U. S. Department of the Treasury Financial Management Service list of approved bonding companies as approved for an amount equal to or greater than the amount for which it obligates itself in this instrument or that it is a Louisiana domiciled insurance company with at least an A - rating in the latest printing of the A. M. Best's Key Rating Guide. If surety qualifies by virtue of its Best's listing, the Bond amount may not exceed ten percent of policyholders' surplus as shown in the latest A. M. Best's Key Rating Guide.

Surety further represents that it is licensed to do business in the State of Louisiana and that this Bond is signed by surety's agent or attorney-in-fact. This Bid Bond is accompanied by appropriate power of attorney.

THE CONDITION OF THIS OBLIGATION IS SUCH that, whereas said Principal is herewith submitting its proposal to the Obligee on a Contract for:

Two (2) Year Contract for Grass Cutting and Horticultural Services for Various Locations for the Jefferson Parish Animal Shelter

NOW, THEREFORE, if the said Contract be awarded to the Principal and the Principal shall, within such time as may be specified, enter into the Contract in writing and give a good and sufficient bond to secure the performance of the terms and conditions of the Contract with surety acceptable to the Obligee, then this obligation shall be void; otherwise this obligation shall become due and payable.

Foret Contracting Group, LLC
PRINCIPAL (BIDDER)

BY: 
AUTHORIZED OFFICER-OWNER-PARTNER

Philadelphia Indemnity Insurance Company
SURETY

BY: 
AGENT OR ATTORNEY-IN-FACT (SEAL)

Meghann Catherine Turner, Attorney-in-Fact

PHILADELPHIA INDEMNITY INSURANCE COMPANY

One Bala Plaza, Suite 100
Bala Cynwyd, PA 19004-0950

Power of Attorney

KNOW ALL PERSONS BY THESE PRESENTS: That **PHILADELPHIA INDEMNITY INSURANCE COMPANY** (the Company), a corporation organized and existing under the laws of the Commonwealth of Pennsylvania, does hereby constitute and appoint **Garrett Turner, Mary Catherine Turner, Meghann Catherine Turner & Ronald T. Turner of Surety Bond Brokers of LA, Inc.**, its true and lawful Attorney-in-fact with full authority to execute on its behalf bonds, undertakings, recognizances and other contracts of indemnity and writings obligatory in the nature thereof, issued in the course of its business and to bind the Company thereby, in an amount not to exceed **\$50,000,000**.

This Power of Attorney is granted and is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of PHILADELPHIA INDEMNITY INSURANCE COMPANY on the 14th of November, 2016.

RESOLVED: That the Board of Directors hereby authorizes the President or any Vice President of the Company: (1) Appoint Attorney(s) in Fact and authorize the Attorney(s) in Fact to execute on behalf of the Company bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof and to attach the seal of the Company thereto; and (2) to remove, at any time, any such Attorney-in-Fact and revoke the authority given. And, be it

FURTHER RESOLVED: That the signatures of such officers and the seal of the Company may be affixed to any such Power of Attorney or certificate relating thereto by facsimile, and any such Power of Attorney so executed and certified by facsimile signatures and facsimile seal shall be valid and binding upon the Company in the future with respect to any bond or undertaking to which it is attached.

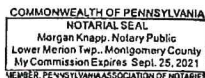
IN TESTIMONY WHEREOF, PHILADELPHIA INDEMNITY INSURANCE COMPANY HAS CAUSED THIS INSTRUMENT TO BE SIGNED AND ITS CORPORATE SEAL TO BE AFFIXED BY ITS AUTHORIZED OFFICE THIS 27TH DAY OF OCTOBER, 2017.

(Seal)



Robert D. O'Leary Jr., President & CEO
Philadelphia Indemnity Insurance Company

On this 27th day of October, 2017, before me came the individual who executed the preceding instrument, to me personally known, and being by me duly sworn said that he is the therein described and authorized officer of the **PHILADELPHIA INDEMNITY INSURANCE COMPANY**; that the seal affixed to said instrument is the Corporate seal of said Company; that the said Corporate Seal and his signature were duly affixed.



(Notary Seal)

Notary Public:

residing at:

Bala Cynwyd, PA

My commission expires:

September 25, 2021

I, Edward Sayago, Corporate Secretary of PHILADELPHIA INDEMNITY INSURANCE COMPANY, do hereby certify that the foregoing resolution of the Board of Directors and the Power of Attorney issued pursuant thereto on the 27th day of October, 2017 are true and correct and are still in full force and effect. I do further certify that Robert D. O'Leary Jr., who executed the Power of Attorney as President, was on the date of execution of the attached Power of Attorney the duly elected President of PHILADELPHIA INDEMNITY INSURANCE COMPANY.

In Testimony Whereof I have subscribed my name and affixed the facsimile seal of each Company this 16th day of April, 20 19.



Edward Sayago, Corporate Secretary
PHILADELPHIA INDEMNITY INSURANCE COMPANY

LOUISIANA DEPARTMENT OF
AGRICULTURE & FORESTRY

CERTIFICATION CARD

COMMERCIAL PESTICIDE APPLICATOR

RYAN FORET
PO BOX 70
THIBODAUX LA 70302

00051176

Exp. Date: 12/31/2019



Mike Strain

MIKE STRAIN, DVM COMMISSIONER



CERTIFIED, LICENSED OR REGISTERED AS

CATEGORY

3-Ornamental & Turf Pest Control
6-Right-Of-Way & Industrial Pest
GS-General Standards

RECERTIFY BY

4/26/2021
1/9/2021
1/9/2021

SIGNATURE:

LDAF EMERGENCY HOTLINE: 855-452-5323
LA POISON CONTROL CENTER: 800-222-1222



MIKE STRAIN DVM, COMMISSIONER

Agricultural & Environmental Sciences, 5825 Florida Blvd., Suite 3002, Baton Rouge, LA 70806, (225) 952-8100, FAX (225) 925-3760

HORTICULTURE REGISTRATION: BENTON FORET

Date: 01/29/2019

LDAF ID: 112186

LICENSE(S): LANDSCAPE HORTICULTURIST 19-1981

Please verify information for correctness. If changes are necessary, make corrections and promptly return to issuing agency.

9

LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY

MIKE STRAIN DVM, COMMISSIONER

Agricultural & Environmental Sciences, 5825 Florida Blvd., Suite 3002, Baton Rouge, LA 70806, (225) 952-8100, FAX (225) 925-3760

Be it known, that effective 02/01/2019 through 01/31/2020 having complied with all relevant requirements of the Louisiana Revised Statutes, the individual named below is hereby licensed in the following profession(s):

LICENSE(S): LANDSCAPE HORTICULTURIST 19-1981

BENTON FORET
P.O. BOX 70
THIBODAUX LA 70302



Mike Strain
Commissioner

DISPLAY IN A PROMINENT PLACE

LDAF ID: 112186



LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY

MIKE STRAIN DVM, COMMISSIONER

Agricultural & Environmental Sciences, 5825 Florida Blvd., Suite 3003, Baton Rouge, LA 70806, (225) 925-3787, FAX (225) 925-3760

License No. 00094809

Date: 03/01/2019

FORET CONTRACTING GROUP LLC

15

Please verify information for correctness. If changes are necessary, make corrections and promptly return to issuing agency.

LOUISIANA DEPARTMENT OF AGRICULTURE & FORESTRY

MIKE STRAIN DVM, COMMISSIONER

Agricultural & Environmental Sciences, 5825 Florida Blvd., Suite 3003, Baton Rouge, LA 70806, (225) 925-3787, FAX (225) 925-3760

Be it known, that effective **February 28, 2019** through **December 31, 2019** having complied with all relevant requirements of the Louisiana Revised Statutes, the entity named below is hereby authorized to engage in the business of **GROUND APPLICATOR**
OWNER-OPERATOR

FORET CONTRACTING GROUP LLC
354 W MAIN STREET
THIBODAUX LA 70301

DISPLAY IN A PROMINENT PLACE


Commissioner
License No. 00094809



State Licensing Board for Contractors

This is to Certify that:

FORET CONTRACTING GROUP, LLC
354 West Main Street
Thibodaux, LA 70301

is duly licensed and entitled to practice the following classifications

BUILDING CONSTRUCTION; ELECTRICAL WORK (STATEWIDE); HEAVY CONSTRUCTION; HIGHWAY,
STREET AND BRIDGE CONSTRUCTION; SPECIALTY: LANDSCAPING, GRADING AND BEAUTIFICATION



Expiration Date: February 9, 2020

License No: 44882

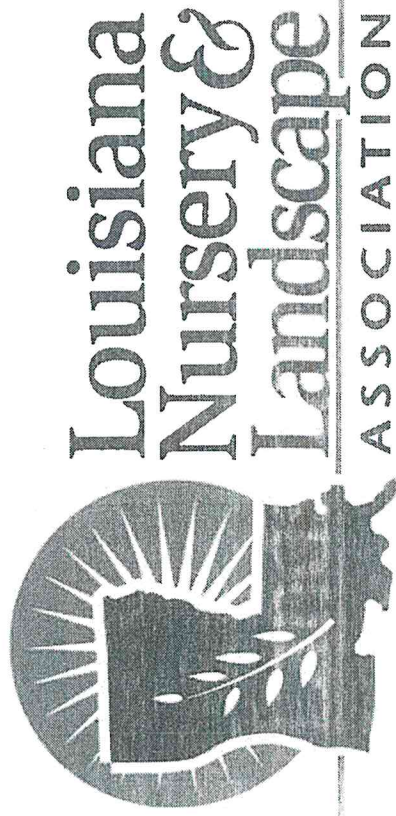
Witness our hand and seal of the Board dated,
Baton Rouge, LA 10th day of February 2019

Will B. McCP
Director

Lee Mallett
Chairman

Andy Dumas
Treasurer

This License Is Not Transferrable



Benton & Ryan Foret
Foret Contracting Goup
Member
2019

*“Enhance the quality of life for people, conserve and protect the
global environment, and promote the professionalism and
profitability of the nursery and landscape industry in Louisiana.”*



Chris Herrmann, President



Cari Jane Murray, Executive Secretary



Tom Schedler
SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that
the attached document(s) of

FORET CONTRACTING GROUP, LLC

are true and correct and are filed in the Louisiana Secretary of State's Office.
40559435 NMCHG 07/22/2011 2 pages

In testimony whereof, I have hereunto set my
hand and caused the Seal of my Office to be
affixed at the City of Baton Rouge on,

July 22, 2011

Secretary of State

JL 35448665K



Certificate ID: 10186490#WAR93

To validate this certificate, visit the following
web site, go to **Commercial Division**,
Certificate Validation, then follow the
instructions displayed.

www.sos.louisiana.gov

STATE OF LOUISIANA
PARISH OF LAFOURCHE

**AMENDMENT TO THE
ARTICLES OF ORGANIZATION OF
FORET LAND AND TREE COMPANY, LLC
A LIMITED LIABILITY COMPANY**

BE IT KNOWN that on the 21st day of July, 2011, before me, a Notary Public duly commissioned and qualified, and in the presence of the undersigned witnesses, personally came and appeared:

BENTON FORET (SSN: ___-__-8109), who is of the full age of majority, who is domiciled in Lafourche Parish, whose address is 1048 Canal Boulevard, Thibodaux, Louisiana 70301, AND

RYAN FORET (SSN: ___-__-2587), who is of the full age of majority, who is domiciled in Lafourche Parish, whose address is 1048 Canal Boulevard, Thibodaux, Louisiana 70301;

who after being duly sworn, did depose and say:

1. The Articles of Organization were filed and recorded with the Secretary of State on March 19, 2003.
2. Appearers are executing this Amendment to formally change the name of the limited liability company from Foret Land and Tree Company, L L C to **Foret Contracting Group, LLC**.
3. Appearers swear that Appearers are the only members of this limited liability company.
4. THEREFORE, Article I of the Articles of Organization is hereby amended to read:
The name of this Limited Liability Company is: **Foret Contracting Group, LLC**.

5. The remaining Articles shall remain the same.

THUS DONE AND SIGNED on the day and date set forth above at the City of Thibodaux,
Parish of Lafourche, State of Louisiana, the parties hereto having affixed their signatures, together
with me, Notary, after due reading of the whole.

WITNESSES:

FORET LAND AND TREE COMPANY,
L L C , now FORET CONTRACTING
GROUP, LLC

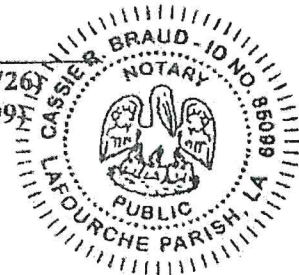
Bryette M. Ledet
Bryette M. Ledet

Benton A. Foret
By: Benton Foret, its Member

Wendy Freeman
Wendy Freeman

Ryan Foret
By: Ryan Foret, its Member

Cassie R. Braud
WOODY FALGOUST, NOTARY PUBLIC (#23726)
CASSIE R. BRAUD, NOTARY PUBLIC (#85099)



Certificate of Registration of Assumed Business Name

Name of Corporation applying for registration:
FORET CONTRACTING GROUP, LLC

State of Incorporation:
LOUISIANA

Post Office Address of Corporation:
**P. O. BOX 70
THIBODAUX, LOUISIANA 70302**

Name under which the business is to be conducted:
FORET LAND AND TREE COMPANY

THUS DONE AND PASSED in City of Thibodaux, Parish of Lafourche, State of Louisiana,
on this 1st day of November, 2011 in the presence of the undersigned competent
witnesses and me, Notary, after due reading of the whole.

WITNESSES:

Bryette G. Ledet
Bryette G. Ledet

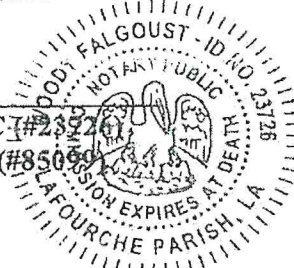
Mary Ellen Whitford
Mary Ellen Whitford

Benton A. Foret
BENTON FORET

Ryan Foret
RYAN FORET

Woody Falgoust
WOODY FALGOUST, NOTARY PUBLIC (#23926)

Cassie R. Braud
CASSIE R. BRAUD, NOTARY PUBLIC (#85069)



📍 2525 Quail Drive, Baton Rouge, 70808 📞 (225) 765-2301 🗨 Text-To-Verify: 1 (855) 999-7896



Louisiana State Licensing Board for Contractors

Contractor Information

Business Name FORET CONTRACTING GROUP, LLC ✓
Mailing Address P.O. Box 70
Thibodaux, LA 70302
Phone Number (985) 447-5296
Fax Number (985) 449-4060
Email Address bforet@foretgroup.com
Website http://www.foretgroup.com

Active Licenses

License Number 44882 ✓
Type Commercial License
Status LICENSED
Effective 02/10/2019
Expiration 02/09/2020
First Issued 02/09/2006

License Number 883700
Type Residential License
Status LICENSED
Effective 10/01/2018
Expiration 09/28/2019
First Issued 09/28/2016

Classifications

| Class | Qualifying Party | Parishes |
|--|--------------------|----------|
| BUILDING CONSTRUCTION | Benton Andre Foret | ALL |
| BUSINESS AND LAW | Benton Andre Foret | ALL |
| BUSINESS AND LAW | Benton Andre Foret | ALL |
| ELECTRICAL WORK (STATEWIDE) | Benton Andre Foret | ALL |
| HEAVY CONSTRUCTION | Benton Andre Foret | ALL |
| HIGHWAY, STREET AND BRIDGE CONSTRUCTION | Benton Andre Foret | ALL |
| RESIDENTIAL BUILDING CONTRACTOR | Benton Andre Foret | ALL |
| SPECIALTY: LANDSCAPING, GRADING AND BEAUTIFICATION | Benton Andre Foret | ALL |