/	4 <i>C</i> (	0	RD,	CE	RT	IFIC	CATE OF LIABIL	ITY INS	URANCE		D	ATE (MM/DD/YYYY) 04/30/2011	
PRODUCER R.V. Nuccio & Associates, Inc. 10148 Riverside Drive									THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
Toluca Lake, CA 91602								INSURERS A	INSURERS AFFORDING COVERAGE				
INSURED								INSURER A: Fir	INSURER A: Firemans Fund Insurance Company				
Music For Dancing								INSURER B:	INSURER B:				
171 Eads Street #C								INSURER C:	INSURER C:				
West BAbylon, NY 11704								INSURER D:					
COVERAGES								INSURER E:					
Al M. Po	NY RE AY PE OLICIE	QUI RT/	REMENT, AIN, THE I	TERM NSURAN	OR CO	NDITIO	OW HAVE BEEN ISSUED TO THE IN ON OF ANY CONTRACT OR OTHER ED BY THE POLICIES DESCRIBED H AY HAVE BEEN REDUCED BY PAID O	R DOCUMENT WITH HEREIN IS SUBJEC CLAIMS.	H RESPECT TO WI T TO ALL THE TER	HICH THIS CERTIFICATE MS, EXCLUSIONS AND C	MAY	BE ISSUED OR	
NSR ADD'L LTR INSRD TYPE OF INSURANCE							POLICY NUMBER	POLICY EFFECTIVE DATE(MM/DD/YY)	POLICY EXPIRATION DATE(MM/DD/YY)	LIM	ITS		
Α	"	GEN	COMMERC		FRALLIA	ВШТҮ	XPK80923162	5/6/2011	5/6/2012	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurence)	\$	\$1,000,000 \$100,000	
		CLAIMS MADE COCUR					Certificate #:ADJA031127			MED EXP (Any one person)	\$	\$5,000	
										PERSONAL & ADVINJURY	\$	\$1,000,000	
										GENERAL AGGREGATE	\$	\$2,000,000	
		GEN	POLICY	PRO JECT		S PER:	4			PRODUCTS - COMP/OP AGG	\$	\$2,000,000	
			OMOBILE L	LIABILITY		1200	XPK80923162 Certificate #:ADJA031127	5/6/2011	5/6/2012	COMBINED SINGLE LIMIT (Ea accident)	\$		
		ALL OWNED AUTOS SCHEDULED AUTOS					Octanidate #.AbdAdd1121			BODILY INJURY (Per person)	\$		
		~	NON-OWN		s					BODILY INJURY (Per accident)	\$	\$1,000,000	
										PROPERTY DAMAGE (Per accident)	\$	\$1,000,000	
		GAF	RAGE LIABI	LITY			**			AUTO ONLY - EA ACCIDENT	\$		
			ANY AUTO	)			1.			OTHER THAN AUTO ONLY: AGG			
		EXC	ESS/UMBR	ELLA LIAI	BILITY					EACH OCCURRENCE	\$		
			OCCUR		CLAIMS	MADE		-		AGGREGATE	\$		
											\$		
			DEDUCTIE	BLE							\$		
			RETENTIC							WCSTATU- OTH	\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY								1	TORY LIMITS   ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?									E.L. EACH ACCIDENT	\$		
If yes, describe under SPECIAL PROVISIONS below										E.L. DISEASE - EA EMPLOYE  E.L. DISEASE - POLICY LIMIT			
	OTHE	-		2000							1		
DESC	CRIPTIO	N OI	FOPERATION	ONS/LOC	ATIONS	VEHICL	ES/EXCLUSIONS ADDED BY ENDORSEMI	ENT/SPECIAL PROVIS	IONS				
									The state of the s				
CEI	RTIFIC	CAT	TE HOLD	ER					CANCELLATION				
								DATE THEREOF NOTICE TO THE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL $30$ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR				
									REPRESENTATIVES. AUTHORIZED REPRESENTATIVE				
									Robert V. Nuccio Cobert V. Justio				
ACI	) DD	DE /	2001/08)							@ ACODD C	ODI	DORATION 1088	