

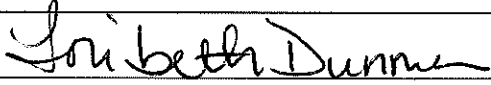


INVITATION TO BID

NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS

Bid Title: Restroom Painting Interior and Exterior – Beach Front Parks	
Bid Number: NC17-005	
Requesting Department: Facilities Maintenance	Bid Contact: David J. Pensante, Procurement Manager
Contact Address: 96135 Nassau Place, Suite 6, Yulee, FL 32097	Contact Number and Email: 904-530-6040 dpensante@nassaucountyfl.com
Bid Due Date or Closing Date/Time: Wednesday, March 15, 2017 @ 4:00 p.m.	Bid Opening Date/Time: Thursday, March 16, 2017 @ 10:00 or soon there after
Location to Deliver Bid: Nassau County Board of County Commissioners, John A. Crawford, Ex-Officio Clerk, 76347 Veterans Way, Suite 456, Yulee, FL 32097	

In accordance with the intent and content of this Invitation to Bid (ITB), we the undersigned do hereby offer to perform as stipulated in this response. Failure to do so may result in the forfeiting of bid security, removal from the County's bidder list, or other remedies available to the County under the laws of the State of Florida.

Legal Name of Bidder: Dunmar Group, Inc.		
Business Address 85101 Commercial Park Drive, Yulee, FL 32097		
Phone Number 904-849-7346	Fax Number 904-849-7571	E-Mail Address: info@dunmargroup.com
Contractor's Florida License Number (as applicable): CGC1522817		
Authorized Signature (manual) 		Date: 03/15/2017
Printed Signature: Loribeth Dunman		Title: President

BIDDER DECLARATION / ACKNOWLEDGMENT

1. Bids will be opened by a representative of the Clerk's Office in the Clerk's Small Conference Room (76347 Veterans Way, Yulee, FL 32097) on the appropriate date and time as shown above. Bid documents will be available upon notice of an intended decision or after 30 days after bid opening (whichever is earliest), pursuant to FS 119.071 (b).
2. Bids must be SUBMITTED ON THE FORM FURNISHED BY THE COUNTY and in accordance with specifications and list of quantities desired.
3. Page One must be completed and submitted as the top sheet of your bid response.
4. It is the intent and purpose of Nassau County that this Invitation to Bid promotes competitive bidding. It shall be the bidder's responsibility to advise the Contract Management Office at the address noted above, if any language, requirements, etc., or any combination thereof, inadvertently restricts or limits the requirements stated in this Invitation to Bid to a single source. Such notification must be submitted in writing and must be received by the Contract Management Office not later than seven (7) calendar days prior to the bid closing date.
5. **THERE WILL BE A MANDATORY PRE-BID CONFERENCE FOR THIS BID (SEE ARTICLE A19).**

(THIS PAGE MUST BE RETURNED WITH YOUR BID)

ATTACHMENT “B”

BID PRICE SHEET

RESTROOM PAINTING – BEACH FRONT PARKS
BID NUMBER NC17-005

Location/Description	Lump Sum Bid
BURNEY PARK: Provide all necessary materials, labor, insurances and permits required for the interior and exterior restroom painting project in accordance with the scope of work and terms and conditions detailed in the bid documents referenced above.	\$ <u>19,950.00</u>
PETERS POINT PARK: Provide all necessary materials, labor, insurances and permits required for the interior and exterior restroom painting project in accordance with the scope of work and terms and conditions detailed in the bid documents referenced above.	\$ <u>42,392.05</u>
TOTAL BID:	\$ <u>62,342.05</u>

(Total bid amount in words)

The projects shall be completed within 120 days from the date Contractor receives a Purchase Order.

Note: All Products shall be the listed Sherwin Williams Products or an equivalent or greater product. Vendors who choose to quote an alternate product shall provide submittals on product **NO LATER THAN 10 days prior to bid close date** for review by Facilities Maintenance Department to determine if product substitution is acceptable. Data Sheets are to be provided to Nassau County for all products to be used. All products are to be applied as listed in manufacturer submittal directions at the rate listed for coverage, at a minimum, to provide a clean neat finish.

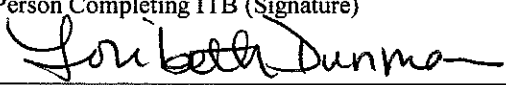
The undersigned declares that they have examined the Notice to Bidders, Instructions to Bidders, and Technical Specifications/Scope of Work and is informed fully with regard to all terms and conditions pertaining thereto and agrees under these specifications at the prices set forth above.

Company: Dunmar Group, Inc.Address: 85101 Commercial Park DriveCity, State, Zip: Yulee, FL 32097By: 
(Signature)Loribeth Dunman

(Above name printed or typed)

Phone: 904-849-7346 Fax: 904-849-7571Email: info@dunmargroup.com, ddunman@dunmargroup.com

ATTACHMENT “D”**Addenda Acknowledgment**

Acknowledgment is hereby made of receipt of addenda issued during the solicitation period. Bid Number NC17-005	Addendum # <u> 1 </u> through # <u> 1 </u> Initial: LD Date: 03/15/2017
Person Completing ITB (Signature) 	
Name (Printed): Loribeth Dunman	Title: President

>>>Failure to submit this form may disqualify your response<<<

ACKNOWLEDGMENT IS HEREBY MADE OF RECEIPT OF THIS ADDENDUM NO. 1, ISSUED DURING THE SOLICITATION PERIOD:

Vendor Signature: Trish Dunman **Date:** 3/15/17

NOTE: You are required to acknowledge receipt of this addendum by signing and submitting it with your bid/proposal (signature page only). In addition you are required to acknowledge receipt on the Addenda Acknowledgment (Attachment D).

End of Addendum #1

ATTACHMENT “E”

NASSAU COUNTY

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

THIS MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS

1. This sworn statement is submitted with Bid, Proposal or Contract for Restroom Painting Interior & Exterior - Beach Front Parks.
2. This sworn statement is submitted by Dunmar Group, Inc. (entity submitting sworn statement), whose business address is 85101 Commercial Park Drive, Yulee, FL 32097 and its Federal Employee Identification Number (FEIN) is 26-4834062. (if the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: _____).
3. My name is Loribeth Dunman (please print name of individual signing), and my relationship to the entity named above is as President.
4. 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 with the United States, including, but not limited to, any bid or contract for goods or services, any leases for real property, or any contract for the construction or repair of a public building or public work, to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5. I understand that “convicted” or “conviction” as defined in paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction or 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.
6. I understand that an “affiliate” as defined in paragraph 287.133(1)(a), Florida Statutes, means:
 - a) A predecessor or successor of a person convicted of a public entity crime; or
 - b) 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” includes 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 to fair market value under an arm’s length agreement, shall be 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 thirty-six (36) months shall be considered an affiliate.
7. 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 binding contract and which bids or applies to bid on contracts 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.
8. Based on information and belief, the statement, which I have marked below, is true in relation to the entity submitting this sworn statement. (Please 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 management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____ The entity submitting this sworn statement, or one of more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in 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, and (Please indicate which additional statement applies.)

_____ There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the Hearing Officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)

_____ The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)

_____ The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

Louise H. Dunman
(Signature)

03/15/2017
Date

STATE OF FLORIDA
COUNTY OF Nassau

PERSONALLY APPREARED BEFORE ME, the undersigned authority, Louise H. Dunman, who, after first being sworn by me, affixed his/her signature in the space provided above on this 15th day of March, 2017.

Christine E. Connery
(Notary Public)

My Commission Expires: October 1, 2018 (seal)



CHRISTINE E. CONNERY
NOTARY PUBLIC
STATE OF FLORIDA
Comm# FF155758
Expires 10/1/2018

ATTACHMENT "F" EXPERIENCE OF BIDDER

The following questionnaire shall be answered by the bidder for use in evaluating the bid to determine the lowest, responsive, and responsible bidder, meeting the required specifications.

1. **FIRM NAME:** Dunmar Group, Inc.
 Address: 85101 Commercial Park Drive
 City/State/Zip: Yulee, FL 32097
 Phone: 904-849-7346 Fax: 904-849-7571
 Name of primary contact responsible for work performance: Loribeth Dunman
 Phone: 904-849-7346 Cell Phone: 904-583-1946 Email loridunman@dunmargroup.com

2. **INSURANCE:**
 Surety Company: FCCI Insurance Company
 Agent Company: Bouchard Insurance Company
 Agent Contact: Mark Pichowski
 Total Bonding Capacity: \$ 5,000,000 Value of Work Presently Bonded: 300,000

3. **EXPERIENCE:**
 Years in business: 8 Years
 Years in business under this name: 8 Years
 Years performing this type of work: 8 Years
 Value of work now under contract: 100,000
 Value of work in place last year: 1.3 million
 Percentage (%) of work usually self-performed: 50%
 Name of subcontractors you may use: N/A
 Has firm: Failed to complete a contract: No
 Been involved in bankruptcy or reorganization: No
 Pending judgment claims or suits against firm: No

4. **PERSONNEL**
 How many employees does your company employ:

Management	<u>3</u> Full time	<u> </u> Part time
Site/Crew Supervisors	<u>3</u> Full time	<u> </u> Part time
Workers/Laborers	<u>6</u> Full time	<u> </u> Part time
Clerical	<u>1</u> Full time	<u> </u> Part time
Other	<u>1</u> Full time	<u> </u> Part time

5. WORK EXPERIENCE:

List your three (3) most significant commercial/governmental accounts where the contract was similar in scope and size to this bid.

Reference #1:

Company/Agency Name: Nassau County Board of County Commissioners
Address: 96135 Nassau Place, Suite 1, Yulee, FL 32097
Contract Person: Jeff Little
Phone: 904-530-6126 Fax: cell-904-753-4033 Email: j.little@nassaucountyfl.com
Project Description: Build & Paint Concession Stand & Football Press Box at Yulee Sports Complex
Contract \$ Amount: \$ 80,635.00
Date Completed: October 2016

Reference #2:

Company/Agency Name: Nassau County Board of County Commissioners
Address: 96135 Nassau Place, Suite 1, Yulee, FL 32097
Contract Person: Joe Novello- Animal Control
Phone: 904-530-6151 Fax: _____ Email: _____
Project Description: Paint & Carpet Offices at Animal Control
Contract \$ Amount: \$ 27,867.87
Date Completed: March 2016

Reference #3:

Company/Agency Name: Nassau County Board of County Commissioners
Address: 96135 Nassau Place, Suite 1, Yulee, FL 32097
Contract Person: Jeff Little
Phone: 904-530-6126 Fax: cell-904-753-4033 Email: j.little@nassaucountyfl.com
Project Description: Restore/Repaint Pavillion at Burney Park
Contract \$ Amount: \$ 9,341.98
Date Completed: September 2016

REMINDER:

THIS FORM IS TO BE INCLUDED WITH BID. FAILURE TO SUBMIT ALONG WITH BID MAY BE CAUSE FOR DISQUALIFICATION.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/15/2017

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 904-277-3495

T C Russo Associates Inc

608 S. 8th St.

Fernandina Beach, FL 32034

CONTACT NAME: T C Russo Associates Inc

PHONE (A/C, No, Ext): 904-277-3495

FAX (A/C, No):

E-MAIL ADDRESS: tcrinsurance@comcast.net

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : United Specialty Insurance Co.

INSURER B :

INSURER C :

INSURER D :

INSURER E :

INSURER F :

INSURED

Dunmar Group Inc.

85101 Commercial Park Way

Yulee, FL 32097

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DCG00985-02	01/31/2017	01/31/2018	EACH OCCURRENCE	\$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 100,000		
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		MED EXP (Any one person)				\$ 5,000		
			PERSONAL & ADV INJURY				\$ 1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 1,000,000	
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 1,000,000	
								\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$	
								\$	
B	UMBRELLA LIAB	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				EACH OCCURRENCE	\$	
	EXCESS LIAB	<input type="checkbox"/>	<input type="checkbox"/>				AGGREGATE	\$	
	DED		RETENTION \$					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS	OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>	N/A				E.L. EACH ACCIDENT	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	

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

licensed contractor

CERTIFICATE HOLDER

CANCELLATION

Nassau County Board of County Commissioners

96135 Nassau Pl., Suite 6

Yulee, FL 32097

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

© 1988-2010 ACORD CORPORATION. All rights reserved.



CERTIFICATE OF LIABILITY INSURANCE

DUNMA-1

OP ID: SH

DATE (MM/DD/YYYY)

03/15/2017

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 Brown & Brown of Florida, Inc. Building 100, Suite 100 10151 Deerwood Park Blvd Jacksonville, FL 32256 Pilar Willis Dixon, CIC	CONTACT NAME: Pilar Willis Dixon, CIC	
	PHONE (A/C, No, Ext): 904-565-1952	FAX (A/C, No): 904-565-2440
INSURED Dunmar Group, Inc. 85101 Commercial Park Drive Yulee, FL 32097	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Auto Owners Insurance	NAIC # 18988
	INSURER B: Owners Insurance Company	32700
	INSURER C:	
	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 INSR / WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY					
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
						MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					\$
B	AUTOMOBILE LIABILITY		5084070100	08/17/2016	08/17/2017	
	<input checked="" type="checkbox"/> ANY AUTO					COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (PER ACCIDENT) \$
						\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/> Y/N	78228857	08/17/2016	08/17/2017	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> N/A				WC STATUTORY LIMITS OTH-ER
	if yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT \$ 1,000,000
						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER**CANCELLATION**

Nassau County Board of County Commissioners
96135 Nassau Place, Suite 6
Yulee, FL 32097

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

Pilar Willis Dixon

© 1988-2010 ACORD CORPORATION. All rights reserved.



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD
2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783**

(850) 487-1395

**DUNMAN, DERRICK DEWAYNE
DUNMAR GROUP, INC.
85101 COMMERCIAL DR
YULEE FL 32097**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD**

LICENSE NUMBER	
CGC1522817	

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2018



**DUNMAN, DERRICK DEWAYNE
DUNMAR GROUP, INC.
85101 COMMERCIAL DR
YULEE FL 32097**

