

BID FORM
FIBER OPTIC INFRASTRUCTURE – ANNUAL CONTRACT
BID NO. 20250738

TO: Senior Division Manager - Purchasing
Board of County Commissioners
Charlotte County Administration Center
18500 Murdock Circle
Port Charlotte, Florida 33948-1094

The undersigned, as bidder, does hereby declare that he has read the Request for Bids, Instructions to Bidders, Technical Specifications & Conditions, Federal Provisions, Insurance, Safety & Health Requirements, Bid Form, and any other documentation for

FIBER OPTIC INFRASTRUCTURE – ANNUAL CONTRACT

and further agrees to furnish all items listed on the attached Bid Form in accordance with the unit price(s) submitted. The above specified documents are herein incorporated into the Bid Form and shall be defined as the contract documents.

TOTAL AMOUNT:

SIX THOUSAND, EIGHT HUNDRED NINETY-TWO DOLLARS AND SEVENTY CENTS \$ 6,892.70
(TYPE/PRINT) (NUMERIC)

Please indicate by (✓) that you have included the following documentation with your bid:

(✓) License Requirement: Certified/Registered General, Certified/Registered Master Electrician, Certified Specialty Structure, or Certified Low Voltage System Specialty
(✓) Proof of Certification all Warranty work shall be performed by certified technicians
(✓) Evidence the Contractor is a current, certified installer of the manufacturer

NOTE: In accordance with Florida Statues, Section 119.071(1)(b)2: Sealed bids, proposals, or replies received by an agency pursuant to a competitive solicitation are exempt from s. 119.071(1)(b)2 and s. 24(a), Art. I of the State Constitution, except as provided by Florida Statutes 255.0518, until such time as the agency provides notice of an intended decision or until 30 days after opening the bids, proposals, or final replies, whichever is earlier. Upon release of the intended decision, if you wish to obtain the quote results, you may do so by visiting our Website at <http://purchasingbids.charlottecountyfl.gov/> under "Purchasing Bids Online", document number 257384. No information regarding the submittal will be divulged over the telephone.

OPTIONAL ELECTRONIC BID SUBMISSIONS: If your firm would like to submit your bid electronically, please visit <http://bit.ly/3TYAyKa> and follow given instructions.

Name of Bidder: Intelligent Infrastructure Solutions, LLC
(This form to be returned)

SUMMARY OF PAY ITEMS FOR FIBER OPTIC INFRASTRUCTURE

All bidders must submit a price for each item listed to be considered responsive all unit prices must be annotated.

1. LABOR

DESCRIPTION	UNIT	UNIT PRICE
2-Man UG Crew & Truck, Straight Time	HR	\$ 180.00
2-Man UG Crew & Truck, Overtime	HR	\$ 205.00
3-Man UG Crew & Truck, Straight Time	HR	\$ 270.00
3-Man UG Crew & Truck, Overtime	HR	\$ 290.00
Fiber Optic Technician, Straight Time	HR	\$ 80.00
Fiber Optic Technician, Overtime	HR	\$ 105.00
CAD Technician	HR	\$ 75.00
Removal of existing cable	LF	\$ 0.80

2. FURNISH AND INSTALL: Defined as all material, labor, and all necessary hardware to complete each line item.

DESCRIPTION	UNIT	UNIT PRICE
6 strand outdoor dry-filled loose-tube single-mode fiber optic cable	LF	\$ 2.10
12 strand outdoor dry-filled loose-tube single-mode fiber optic cable	LF	\$ 2.35
24 strand outdoor dry-filled loose-tube single-mode fiber optic cable	LF	\$ 2.50
48 strand outdoor dry-filled loose-tube single-mode fiber optic cable	LF	\$ 2.95
72 strand outdoor dry-filled loose-tube single-mode fiber optic cable	LF	\$ 3.50
24 strand indoor plenum single-mode fiber optic cable	LF	\$ 3.50
48 strand indoor plenum single-mode fiber optic cable	LF	\$ 4.00
144 strand outdoor dry-filled loose-tube single-mode fiber optic cable	LF	\$ 4.75
24 strand indoor plenum 50-micron multi-mode fiber optic cable	LF	\$ 4.50
48 strand indoor plenum 50-micron multi-mode fiber optic cable	LF	\$ 6.95
Innerduct, Plenum 1" Orange corrugated with pull tape	LF	\$ 4.25
Innerduct, Plenum 1 1/4" Orange corrugated with pull tape	LF	\$ 4.50
Directional bore w/1 1/4" HDPE, SDR 13.5, orange/grey in color, continuous.	LF	\$ 17.50
Directional bore w/2" HDPE, SDR 13.5, orange/grey in color, continuous.	LF	\$ 18.00
Directional bore w/2 bundled 2" HDPE, SDR 13.5, each different in color, continuous.	LF	\$ 21.50
Directional bore w/4" HDPE, SDR 13.5, orange/grey in color, continuous.	LF	\$ 23.00
Trenching w/1 1/4" HDPE, SDR 13.5, orange/grey in color, sectional or continuous.	LF	\$ 12.50
Trenching w/2" HDPE, SDR 13.5, orange/grey in color, sectional or continuous.	LF	\$ 13.00
Trenching w/2 bundled 2" HDPE, SDR 13.5, each different in color, sectional or continuous.	LF	\$ 14.50
Trenching w/4" HDPE, SDR 13.5, orange/grey in color, sectional or continuous.	LF	\$ 15.00
Tracer Wire (AWG#10 Solid)	LF	\$ 1.05
FO Splice Closure- Tyco FOSC450-A4-4-24-1-AOV	EA	\$ 275.00
FO Splice Closure- Tyco FOSC450-BS-6-24-1-BOV	EA	\$ 450.00
FO Splice Closure- Tyco FOSC450-C6-6-24-1-BOV	EA	\$ 500.00
FO Splice Tray 24CT- Tyco	EA	\$ 55.00

Name of Bidder: Intelligent Infrastructure Solutions, LLC (i2 Solutions)

(This form to be returned)

2. FURNISH AND INSTALL CONTINUED: Defined as all material, labor and all necessary hardware to complete each line item.

DESCRIPTION	UNIT	UNIT PRICE
Corning LANscape (SPH-01P) and Populated	EA	\$ 150.00
Corning LANscape 12ct Fiber Panel Rack Mounted and Populated	EA	\$ 225.00
Corning LANscape 24ct Fiber Panel Rack Mounted and Populated	EA	\$ 250.00
Corning LANscape 48ct Fiber Panel Rack Mounted and Populated	EA	\$ 375.00
Corning LANscape 72ct Fiber Panel Rack Mounted and Populated	EA	\$ 450.00
ST connector single mode terminated	EA	\$ 60.00
SC connector single mode terminated	EA	\$ 60.00
LC connector single mode terminated	EA	\$ 60.00
SC connector multi-mode terminated	EA	\$ 60.00
LC connector multi-mode terminated	EA	\$ 60.00
Fusion Splice 1-24 Optical Fibers	EA	\$ 60.00
Fusion Splice 25-96 Optical Fibers	EA	\$ 55.00
Fusion Splice 97-144 Optical Fibers	EA	\$ 50.00
Mid-span setup fee for under 12 splices	EA	\$ 150.00
Quazite Pull box Part # PG1324BA12	EA	\$ 400.00
Quazite Pull box Part #PG1730BA12	EA	\$ 775.00
Quazite Pull box Part # PG2436BA24	EA	\$ 925.00
PolyDome Fiber Optic Cable Marker Post with County Label	EA	\$ 60.00
FOR BID EVALUATION PURPOSES, UNIT PRICE TOTAL:		\$ 6,892.70

EMERGENCY RESPONSE TIME – Response time required to report onsite to perform emergency service, after verbal or written service request, shall not exceed two (2) hours as indicated in TS-04, B.

NON-EMERGENCY RESPONSE TIME – Response time required to report onsite to perform non-emergency services, after verbal or written service request, shall not exceed 24 hours as indicated in TS-04, C.

Name of Bidder: Intelligent Infrastructure Solutions, LLC (i2 Solutions)
 (This form to be returned)

If notified of the acceptance of this bid form, the undersigned agrees to execute a Contract for the stated compensation in the form as prescribed by the County, within the time constraints outlined in Instructions to Bidders.

The signature below is a guarantee that the Bidder will not withdraw his/her bid for a period of 60 days after the scheduled time for opening the bids.

In accordance with section 287.135, Florida Statutes, the undersigned certifies that the company is not on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List and does not have business operations in Cuba or Syria (if applicable) or the Scrutinized Companies that Boycott Israel List or is not participating in a boycott of Israel.

All contract documents (i.e.; performance and payment bond, cashier's check, bid bond) shall be in the name of "Charlotte County".

The undersigned acknowledges receipt of the following addenda, and the cost, if any, of such revisions has been included in the price bid.

Addendum No. 1, Dated 11/12/25 Addendum No. _____, Dated _____ ; Addendum No. _____, Dated _____

Addendum No. _____, Dated _____ ; Addendum No. _____, Dated _____ ; Addendum No. _____, Dated _____

HOLD HARMLESS AGREEMENT: The bidding firm as indicated below, through the signing of this document by any authorized party or agent, indemnify, hold harmless and defend Charlotte County, a political subdivision of the State of Florida, its officers, agents, employees, and volunteers from all suits and actions, including attorney's fees and all costs of litigation and judgment of every name and description brought against the County as a result of loss, damage or injury to person or property by reason of any act or failure to act by the bidding firm, its agents, servants or employees.

Type of Organization (Please Check One): Individual Ownership Joint Venture
Partnership Corporation

Name of Bidding Firm Intelligent Infrastructure Solutions, LLC (i2 Solutions)

Mailing Address 7676 Jean Blvd., Fort Myers, FL 33967

Location Address Same as Above

City & State Fort Myers, FL ZIP 33967

Telephone: 239-494-7411 E-mail: tbeckman@i2solutionsllc.com

Signature of person authorized to bind the Company: 

Print Name/Title of person authorized to bind the Company: Tim Beckman / Vice President

Date: 11/14/2025

(This form to be returned)

SOURCE OF SUPPLY AND SUBCONTRACTORS

The following sources of supply and subcontractors shall be used for **FIBER OPTIC INFRASTRUCTURE – ANNUAL CONTRACT**. (If bidder does not have a source of supply or subcontractor, insert "to be determined". When source or subcontractor is determined, selection will be subject to County approval. If not applicable, please state N/A).

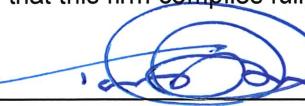
<u>Source of Supply</u>	<u>Subcontractor(s)</u>
1. <u>Graybar</u>	1. _____
2. <u>Anixter</u>	2. _____
3. <u>Accu-tech</u>	3. _____
4. _____	4. _____
5. _____	5. _____
6. _____	6. _____

DRUG FREE WORKPLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that Intelligent Infrastructure Solutions,LLC
(i2 Solutions)

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Signature 

Dated 11/14/2025

(This form to be returned)

**HUMAN TRAFFICKING AFFIDAVIT
for Nongovernmental Entities Pursuant To FS. §787.06**

Charlotte County Contract #20250738

The undersigned on behalf of the entity listed below, (the "Nongovernmental Entity"), hereby attests under penalty of perjury as follows:

1. I am over the age of 18 and I have personal knowledge of the matters set forth except as otherwise set forth herein.
2. I am an officer or representative of the Nongovernmental Entity and authorized to provide this affidavit on the Company's behalf.
3. Nongovernmental Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes.
4. This declaration is made pursuant to Section 92.525, Florida Statutes. I understand that making a false statement in this declaration may subject me to criminal penalties.

Under penalties of perjury, I declare that I have read the foregoing Human Trafficking Affidavit and that the facts stated in it are true.

Further Affiant sayeth naught.



Signature

Tim Beckman

Printed Name

Vice President

Title

Intelligent Infrastructure Solutions, LLC

Nongovernmental Entity

11/14/2025

Date

Name of Bidder: Intelligent Infrastructure Solutions, LLC (i2 Solutions)
(This form to be returned)

REFERENCES: FIBER OPTIC INFRASTRUCTURE – ANNUAL CONTRACT

Contractor shall submit a minimum of three (3) recent (within the past five (5) years) references of projects of similar size and scope. Each reference shall include a project description, project location, name and phone number of a contact person, total project amount, and completion date. The County reserves the right to contact references.

1. Project Owner / Company: Crown Castle, Inc.

Name of Contact Person: Chuck Ferguson Telephone #: 570-872-6637

Address: 13721 Jetport Commerce Pkwy, Suite 1

City & State: Fort Myers, FL Zip Code: 33913

Project Description: Currently hold a 3-year Fiber Construction Installation and Maintenance Contract

Total Project Amount: \$ 2M annually Completion Date: On-going

2. Project Owner / Company: Lee County DOT Traffic

Name of Contact Person: Michael Padgett Telephone #: 239-533-9500

Address: 5650 Enterprise Pkwy

City & State: Fort Myers, FL Zip Code: 33905

Project Description: Currently hold a 3-year Fiber Construction, Installation and Maintenance Contract

Total Project Amount: \$ 850,000.00 Annually Completion Date: Contract thru 2027

3. Project Owner / Company: Collier County DOT Traffic Operations

Name of Contact Person: Haris Domond Telephone #: 239-252-5151

Address: 2885 South Horseshoe Drive

City & State: Naples, FL Zip Code: 34104

Project Description: Currently hold a 3-year Fiber Construction, Installation and Maintenance Contract

Total Project Amount: \$ 1.4M Annually Completion Date: Contract thru 2027

4. Project Owner / Company: Collier County Public Schools

Name of Contact Person: Thomas Petry Telephone #: 239-377-0447

Address: 5775 Osceola Trail

City & State: Naples, FL Zip Code: 34109

Project Description: Currently hold a 5-year Fiber Construction, Installation and Maintenance Contract

Total Project Amount: \$ 900,000.00 Annually Completion Date: Contract thru 2028

Name of Bidder: Intelligent Infrastructure Solutions, LLC (i2 Solutions)

(This form to be returned)

BYRD ANTI-LOBBYING CERTIFICATION

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S.C. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

11/14/2025

Date

Tim Beckman

Type or Print Name



Signature

Vice President

Title

(This form to be returned)



ONPOINC-01

KSMITH

DATE (MM/DD/YYYY)

11/14/2025

CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS 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).

PRODUCER Zervos Insurety Services 4443 Lyons Road, Suite D-212 Coconut Creek, FL 33073	CONTACT NAME: Kenzie Smith	
	PHONE (A/C, No, Ext): (248) 278-8067	FAX (A/C, No):
	E-MAIL ADDRESS: Kenzie@zervosins.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: National Fire Insurance Hartford	20478
INSURED Intelligent Infrastructure Solutions LLC 7676 Jean Blvd Fort Myers, FL 33967-6015	INSURER B: Continental Casualty Company	20443
	INSURER C: Continental Insurance Company	35289
	INSURER D: RLI Insurance Company	13056
	INSURER E:	
	INSURER F:	

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		REVISION NUMBER:	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	7039923519	8/25/2025	8/25/2026	<input checked="" type="checkbox"/> EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/> CLAIMS-MADE							<input checked="" type="checkbox"/> X OCCUR	<input checked="" type="checkbox"/> DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<input checked="" type="checkbox"/> X, C, U								<input checked="" type="checkbox"/> MED EXP (Any one person)	\$ 15,000
	<input checked="" type="checkbox"/> Contractual								<input checked="" type="checkbox"/> PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	<input checked="" type="checkbox"/> GENERAL AGGREGATE	\$ 2,000,000							
	OTHER:	<input checked="" type="checkbox"/> PRODUCTS - COMP/OP AGG	\$ 2,000,000							
			\$							
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY		<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	7039923472	8/25/2025	8/25/2026	<input checked="" type="checkbox"/> COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY							<input checked="" type="checkbox"/> SCHEDULED AUTOS	<input checked="" type="checkbox"/> BODILY INJURY (Per person)	\$
	<input checked="" type="checkbox"/> Hired AUTOS ONLY							<input checked="" type="checkbox"/> X NON-OWNED AUTOS ONLY	<input checked="" type="checkbox"/> BODILY INJURY (Per accident)	\$
									<input checked="" type="checkbox"/> PROPERTY DAMAGE (Per accident)	\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB		<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	7039923486	8/25/2025	8/25/2026	<input checked="" type="checkbox"/> EACH OCCURRENCE	\$ 6,000,000	
	<input checked="" type="checkbox"/> EXCESS LIAB							<input checked="" type="checkbox"/> CLAIMS-MADE	<input checked="" type="checkbox"/> AGGREGATE	\$ 6,000,000
	<input checked="" type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000									\$
										\$
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		<input checked="" type="checkbox"/> Y/N	<input checked="" type="checkbox"/> N/A	7040013923	8/25/2025	8/25/2026	<input checked="" type="checkbox"/> X PER STATUTE	OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							<input checked="" type="checkbox"/> Y	<input checked="" type="checkbox"/> E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below								<input checked="" type="checkbox"/> E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
									<input checked="" type="checkbox"/> E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
D	Leased/Rented Equip				ILM0712401	8/25/2025	8/25/2026	Per Occ/Agg	250,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: BID NO. 20250738 FIBER OPTIC INFRASTRUCTURE

Annual Contract Charlotte County, a political subdivision of the State of Florida, its officers, agents, employees, and volunteers are included as additional insureds on a primary and non-contributory basis with respects to the General Liability and Auto Liability policies, when required by written contract. waiver of subrogation against the Charlotte County on the GL, Auto, and WC policies.

CERTIFICATE HOLDER

CANCELLATION

Charlotte County Purchasing Division
18500 Murdock Circle; Suite 18500
Port Charlotte, FL 33984

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



CNA PARAMOUNT

**Blanket Additional Insured - Owners, Lessees or Contractors -
with Products-Completed Operations Coverage Endorsement**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

It is understood and agreed as follows:

I. WHO IS AN INSURED is amended to include as an **Insured** any person or organization whom you are required by **written contract** to add as an additional insured on this **Coverage Part**, but only with respect to liability for **bodily injury, property damage or personal and advertising injury** caused in whole or in part by your acts or omissions, or the acts or omissions of those acting on your behalf:

- A.** In the performance of your ongoing operations subject to such **written contract**; or
- B.** In the performance of **your work** subject to such **written contract**, but only with respect to **bodily injury or property damage** included in the **products-completed operations hazard**, and only if:
 - 1. The **written contract** requires you to provide the additional insured such coverage; and
 - 2. This **Coverage Part** provides such coverage; and
- C.** Subject always to the terms and conditions of this policy, including the limits of insurance, the Insurer will not provide such additional insured with:
 - 1. Coverage broader than what you are required to provide by the **written contract**; or
 - 2. A higher limit of insurance than what you are required to provide by the **written contract**.

Any coverage granted by this Paragraph **I.** shall apply solely to the extent permissible by law.

II. If the written contract requires additional insured coverage under the 07-04 edition of CG2010 or CG2037, then paragraph **I.** above is deleted in its entirety and replaced by the following:

WHO IS AN INSURED is amended to include as an **Insured** any person or organization whom you are required by **written contract** to add as an additional insured on this **Coverage Part**, but only with respect to liability for **bodily injury, property damage or personal and advertising injury** caused in whole or in part by your acts or omissions, or the acts or omissions of those acting on your behalf:

- A.** In the performance of your ongoing operations subject to such **written contract**; or
- B.** In the performance of **your work** subject to such **written contract**, but only with respect to **bodily injury or property damage** included in the **products-completed operations hazard**, and only if:
 - 1. The **written contract** requires you to provide the additional insured such coverage; and
 - 2. This **Coverage Part** provides such coverage.

III. But if the **written contract** requires:

- A.** Additional insured coverage under the 11-85 edition, 10-93 edition, or 10-01 edition of CG2010, or under the 10-01 edition of CG2037; or
- B.** Additional insured coverage with "arising out of" language;

then paragraph **I.** above is deleted in its entirety and replaced by the following:

WHO IS AN INSURED is amended to include as an **Insured** any person or organization whom you are required by **written contract** to add as an additional insured on this **Coverage Part**, but only with respect to liability for **bodily injury, property damage or personal and advertising injury** arising out of **your work** that is subject to such **written contract**.

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CNA75079XX (3-22)

Page 1 of 3

Nat'l Fire Ins Co of Hartford

Insured Name: ONPOWER INC

Policy No: 7039923519

Endorsement No: 4

Effective Date: 08/25/2025



CNA PARAMOUNT

Blanket Additional Insured - Owners, Lessees or Contractors - with Products-Completed Operations Coverage Endorsement

IV. But if the **written contract** requires additional insured coverage to the greatest extent permissible by law, then paragraph **I.** above is deleted in its entirety and replaced by the following:

WHO IS AN INSURED is amended to include as an **Insured** any person or organization whom you are required by **written contract** to add as an additional insured on this **Coverage Part**, but only with respect to liability for **bodily injury, property damage or personal and advertising injury** arising out of **your work** that is subject to such **written contract**.

V. The insurance granted by this endorsement to the additional insured does not apply to **bodily injury, property damage, or personal and advertising injury** arising out of:

- A.** The rendering of, or the failure to render, any professional architectural, engineering, or surveying services, including:
 1. The preparing, approving, or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; and
 2. Supervisory, inspection, architectural or engineering activities; or
- B.** Any premises or work for which the additional insured is specifically listed as an additional insured on another endorsement attached to this **Coverage Part**.

VI. Under **COMMERCIAL GENERAL LIABILITY CONDITIONS**, the Condition entitled **Other Insurance** is amended to add the following, which supersedes any provision to the contrary in this Condition or elsewhere in this **Coverage Part**:

Primary and Noncontributory Insurance

With respect to other insurance available to the additional insured under which the additional insured is a named insured, this insurance is primary to and will not seek contribution from such other insurance, provided that a **written contract** requires the insurance provided by this policy to be:

1. Primary and non-contributing with other insurance available to the additional insured; or
2. Primary and to not seek contribution from any other insurance available to the additional insured.

But except as specified above, this insurance will be excess of all other insurance available to the additional insured.

VII. Solely with respect to the insurance granted by this endorsement, the section entitled **COMMERCIAL GENERAL LIABILITY CONDITIONS** is amended as follows:

The Condition entitled **Duties In The Event of Occurrence, Offense, Claim or Suit** is amended with the addition of the following:

Any additional insured pursuant to this endorsement will as soon as practicable:

1. Give the Insurer written notice of any **claim**, or any **occurrence** or offense which may result in a **claim**;
2. Send the Insurer copies of all legal papers received, and otherwise cooperate with the Insurer in the investigation, defense, or settlement of the **claim**; and
3. Make available any other insurance, and endeavor to tender the defense and indemnity of any **claim** to any other insurer or self-insurer, whose policy or program applies to a loss that the Insurer covers under this **coverage part**. However, if the **written contract** requires this insurance to be primary and non-contributory, this paragraph **3.** does not apply to other insurance under which the additional insured is a named insured.

The Insurer has no duty to defend or indemnify an additional insured under this endorsement until the Insurer receives written notice of a **claim** from the additional insured.



CNA PARAMOUNT

**Blanket Additional Insured - Owners, Lessees or Contractors -
with Products-Completed Operations Coverage Endorsement**

VIII. Solely with respect to the insurance granted by this endorsement, the section entitled **DEFINITIONS** is amended to add the following definition:

Written contract means a written contract or written agreement that requires you to make a person or organization an additional insured on this **Coverage Part**, provided the contract or agreement:

A. Was executed prior to:

1. The **bodily injury or property damage**; or
2. The offense that caused the **personal and advertising injury**;

for which the additional insured seeks coverage; and

B. Is still in effect at the time of the **bodily injury or property damage occurrence** or **personal and advertising injury** offense.

All other terms and conditions of the Policy remain unchanged.

This endorsement, which forms a part of and is for attachment to the Policy issued by the designated Insurers, takes effect on the effective date of said Policy at the hour stated in said Policy, unless another effective date is shown below, and expires concurrently with said Policy.

30020001970396235197024



CNA75079XX (3-22)

Page 3 of 3

Nat 'l Fire Ins Co of Hartford

Insured Name: ONPOWER INC

Policy No: 7039923519

Endorsement No: 4

Effective Date: 08/25/2025

Ron DeSantis, Governor



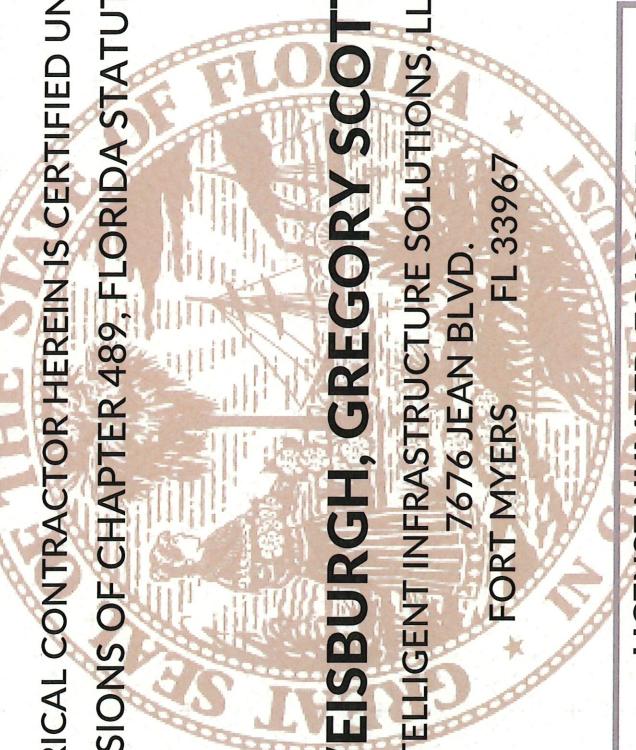
Melanie S. Griffin, Secretary



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

ELECTRICAL CONTRACTORS' LICENSING BOARD

THE ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES



WEISBURGH, GREGORY SCOTT

INTELLIGENT INFRASTRUCTURE SOLUTIONS, LLC
7676 JEAN BLVD.
FORT MYERS FL 33967

LICENSE NUMBER: EC13004797

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 07/24/2024

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



MEMBERSHIP CERTIFICATE

This Certifies that

Intelligent Infrastructure Solutions LLC
is a BICSI Member in good standing through

17 January 2027



David M. Richards, RCDD, NTS, OSP, TECH, CT
BICSI President



John H. Daniels, CNM, FACHE, FHIMSS
BICSI Chief Executive Officer



MEMBERSHIP CERTIFICATE

This Certifies that

Timothy E. Beckman RCDD

is a BICSI Member in good standing through

17 January 2027



David M. Richards, RCDD, NTS, OSP, TECH, CT
BICSI President



John H. Daniels, CNM, FACHE, FHIMSS
BICSI Chief Executive Officer



BICSI
advancing the information and
communications technology profession

Industry Consulting Service International
Buildings

THE PROFESSIONAL DESIGNATION OF

**REGISTERED COMMUNICATIONS
DISTRIBUTION DESIGNER®**

IS AWARDED TO

Timothy E Beckman

by BICSI in recognition of having successfully completed BICSI's registration and examination requirements.

Designation Number: 116692

Registration Start Date: 01-01-2025

Registration End Date: 12-31-2027



Since 01-17-2000



David M. Richards

David M. Richards, RCDD, NTS, OSP, TECH, CT
BICSI Board President

John H. Daniels

John H. Daniels, CNM, FACHE, FHIMSS, CPHIMS
BICSI Chief Executive Officer

Industry Consulting Service International
Building

THE PROFESSIONAL DESIGNATION OF

**REGISTERED COMMUNICATIONS
DISTRIBUTION DESIGNER®**

IS AWARDED TO

Thomas J Esch PhD

by BICSI in recognition of having successfully completed BICSI's registration and examination requirements.



Since 01-15-1996



Designation Number: 110421
Registration Start Date: 01-01-2024
Registration End Date: 12-31-2026

David M. Richards

David M. Richards, RCDD, NTS, OSP, TECH, CT
BICSI Board President

John H. Daniels

John H. Daniels, CNM, FACHE, FHIMSS
BICSI Chief Executive Officer

Industry Consulting Service International
Building

THE PROFESSIONAL DESIGNATION OF
**REGISTERED COMMUNICATIONS
DISTRIBUTION DESIGNER®**

IS AWARDED TO

Steven J Therrien

by BICSI in recognition of having successfully completed BICSI's registration and examination requirements.

Designation Number: 102197

Registration Start Date: 01-01-2025

Registration End Date: 12-31-2027



Since 03-21-1991



David M. Richards

David M. Richards, RCDD, NTS, OSP, TECH, CT
BICSI Board President

John H. Daniels

John H. Daniels, CNM, FACHE, FHMSS, CPHIMS
BICSI Chief Executive Officer

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THE PROFESSIONAL DESIGNATION OF

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DISTRIBUTION DESIGNER®**

IS AWARDED TO

Kurt Vogel

by BICSI in recognition of having successfully completed BICSI's registration and examination requirements.

Designation Number: 121956

Registration Start Date: 01-01-2024

Registration End Date: 12-31-2026



BICSI
RCDD
Since 01-18-1999

David M. Richards

David M. Richards, RCDD, NTS, OSP, TECH, CT
BICSI Board President

John H. Daniels

John H. Daniels, CNM, FACHE, FHIMSS, CPHIMS
BICSI Chief Executive Officer

Corning Optical Communications Network of Preferred Installers

I2 Solutions

Certified Member
2025 Member in Good Standing



Andrew Jackson, Vice President
OCO Marketing
Optical Communications



Harper Geary, Program Manager
Network of Preferred Installers
Optical Communications, IBN/DC

Rendered: Tue Nov 18 14:42:34 GMT 2025

CORNING
NPI Network of
Preferred Installers



Juan Toscano

Has achieved certification from the Fiber Optic Association

Number And Certification

2084733 CFOT CFOST



Badge Online

Expiration Date

11/15/2028

Issue Date

12/15/2016

The Fiber Optic Association Inc.
the international professional association of fiber optics



Certificate of Completion

awarded to

Robert Simmons

for completing

2017 Corning® Fiber Installation Certified Class

Event code: OV-CORN-NC-0516-1

This certificate is valid for (21) BICSI Continuing Education Credits.

Continuing Education Credits are only issued to BICSI credential holders.

You may submit this certificate at www.bicsi.org to obtain any applicable BICSI credits.

To submit this certificate to BICSI, please print to PDF and save to your computer.

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Certificate of Completion

awarded to

Robert Simmons

for completing

2018 Corning® Fiber Installation Certified Class

Event code: OV-CORN-NC-0618-4

This certificate is valid for (21) BICSI Continuing Education Credits.

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New Product Calibration Certificate

AFL Test and Inspection certifies that:

The product listed herein has been tested and is in full compliance with the quoted specifications on the applicable data sheet. Deviations or waivers from these specifications (if any) as approved by the customer, are attached to this certificate.

Waiver attached? Yes No

The equipment used in the testing of these products has been verified and calibrated using standards and instruments that are traceable to the National Institute of Science and Technology (NIST) or have been derived from currently acceptable calibration practices and procedures.

Calibration System Verification Date: 01-Jun-24

NIST ID#814461 and 814728 (686032 and 686033)

Environmental Conditions Temperature = 24°C Relative Humidity = 41%

Product covered by this certificate¹:

Model	Serial Number
FS300-325-P1 APC	2003xn00454

Date of Report: 24-Jan-25

Note: The standard calibration cycle for this product is 3 years.

Certified on behalf of AFL Test and Inspection: Name: CANDY CORDELL

Title:

Signature:

AFL Test and Inspection

110 Hidden Lake Circle
Duncan, SC US 29334
(800) 235-3423

An ISO 9001/14001 Registered company

Note 1: This calibration certificate shall not be reproduced without the written consent of AFL Test and Inspection

FRMQ092 Rev AB



New Product Calibration Certificate

AFL Test and Inspection certifies that:

The product listed herein has been tested and is in full compliance with the quoted specifications on the applicable data sheet. Deviations or waivers from these specifications (if any) as approved by the customer, are attached to this certificate.

Waiver attached? Yes No

The equipment used in the testing of these products has been verified and calibrated using standards and instruments that are traceable to the National Institute of Science and Technology (NIST) or have been derived from currently acceptable calibration practices and procedures.

Calibration System Verification Date: 01-Jun-24

NIST ID#814461 and 814728 (686032 and 686033)

Environmental Conditions Temperature = 24°C Relative Humidity = 41 %

Product covered by this certificate¹:

Model	Serial Number
FS300-325-P1 APC	2003xn00456

Date of Report: 24-Jan-25

Note: The standard calibration cycle for this product is 3 years.

Certified on behalf of AFL Test and Inspection: Name: CANDY CORDELL

Title:

Signature:

AFL Test and Inspection

110 Hidden Lake Circle
Duncan, SC US 29334
(800) 235-3423

An ISO 9001/14001 Registered company

Note 1: This calibration certificate shall not be reproduced without the written consent of AFL Test and Inspection

FRMQ092 Rev AB



110 Hidden Lake Circle, Duncan, SC 29334 USA
 Tel: (800) 235-3423 Tel: (864) 433-0333
 Web: www.AFLglobal.com

Optical Time Domain Reflector Calibration Report

Certificate Number: 2430026 Service Request: 195920

Manufacturer: AFL	Model: FS300	Serial Number: 2L12XN01455
Customer: INTELLIGENT INFRASTRUCTURE SOLUTIONS LLC		
Address: 7676 JEAN BLVD FORT MYERS, FL 33967	Unit Condition: In Tolerance	Temperature (°C): 22.8
	Relative Humidity (%): 20	
Procedure Used: PRCQ011		
Calibration Date: 6/1/2025	Mfg. Recommended Cal Due Date ¹ : 6/1/2026	
Calibration Performed by: Whitney Young	Date: 6/1/2025	
Title: Technical Service & Support Specialist	Signature: <i>Whitney Young</i>	
Authorized by: Joseph Kennedy	Date: 6/1/2025	
Title: Equipment Service Manager	Signature: <i>Joseph Kennedy</i>	

Calibration Data:

Network Simulator			Optical Light Source			VFL	
	Multimode	Single mode	□ Not Installed, N/A				
Serial Number:	178	1L43DQ001	Nominal Wavelength (nm)	Output Power CW Before (dBm)	Output Power CW After (dBm)	Nominal Wavelength	Output Power CW (dBm)
Fiber Type:	62.5/125um / OM1	9/125um / SMF-28	850	-0.24	-0.01	650nm	-1.14
Length (m):	1998.1	4998.0	1300	-7.45	-7.01		
81618A/81624B-SM Set 2 Measured Length			1310	-7.21	-6.99	OLS Tone Verification	
Wavelength (nm)	850	1300	1310	1550	N/A	<input checked="" type="checkbox"/> 270 Hz	<input checked="" type="checkbox"/> 330 Hz
Measured Length (m)	1996.8	1996.8	5000	5000		<input checked="" type="checkbox"/> 1 kHz	<input checked="" type="checkbox"/> 2 kHz

Optical Power Meter □ Not Applicable/Not Installed Detector Type:				Linearity Wavelength: 1310nm	
Nominal Wavelength (nm)	Transfer Standard (dBm)	Before Calibration (dBm)	After Calibration (dBm)	Input (dBm)	Reading (dBm)
850nm	-10	-10.03	-10.00	0	-0.02
1300nm	-10	-9.74	-10.00	-10	-10.00
1310nm	-10	-9.74	-10.00	-20	-20.00
1490nm	-10	-9.80	-10.00	-30	-30.00
1550nm	-10	-9.78	-10.00	-40	-40.04
1625nm	-10	-9.78	-10.00	-50	-50.06
1650nm	-10	-9.46	-10.00	-55	-55.06

Standard(s) Used:

Manufacturer:	Model Number:	Serial Number:	System Calibration Date:
Keysight	81618A/81624B-SM Set 2	MY41208107/DE41101122	06/03/2024
Keysight	81618A/81623B-MM Set 2	MY55C01008/DE41301368	06/04/2024
AFL	OPM4-1D Set 2	SG49RA013	06/10/2024

AFL certifies the performance of this instrument has been verified and calibrated using standards and instruments traceable to the National Institute of Standards and Technology or have been derived from current AFL calibration practices. This certificate shall not be reproduced without the written approval of AFL.

¹Mfg. recommended calibration date provided based on average equipment usage. In accordance with ISO 17025, end users are responsible for establishing calibration intervals.

Primary Standard(s) NIST ID# 814461 & 814728 (686032 & 686033)



110 Hidden Lake Circle, Duncan, SC 29334 USA
(800) 235-3423 | (864) 433-0333
www.AFLglobal.com

AFL

OPM4-6D Set 2

2H24TK001

06/05/2024

AFL certifies the performance of this instrument has been verified and calibrated using standards and instruments traceable to the National Institute of Standards and Technology or have been derived from current AFL calibration practices. This certificate shall not be reproduced without the written approval of AFL.

**Mfg. recommended calibration date provided based on average equipment usage. In accordance with ISO 17025, end users are responsible for establishing calibration intervals.*

Primary Standard(s) NIST ID# 814461 & 814728 (686032 & 686033)



110 Hidden Lake Circle, Duncan, SC 29334 USA
TEL: (800) 235-3423 TEL: (864) 433-0333
WEB: www.AFLglobal.com

Optical Time Domain Reflector Calibration Report

Certificate Number: 2398971 Service Request: 191722

Manufacturer: AFL	Model: FS300	Serial Number: 2H41XN00237
Customer: INTELLIGENT INFRASTRUCTURE SOLUTIONS LLC		
Address: 7676 JEAN BLVD FORT MYERS, FL 33967	Unit Condition: In Tolerance	Temperature (°C): 23.2
	Relative Humidity (%): 20	
Procedure Used: PRCQ011		
Calibration Date: 3/14/2025	Mfg. Recommended Cal Due Date ¹ : 3/14/2026	
Calibration Performed by: Whitney Young	Date: 3/14/2025	
Title: Technical Service & Support Specialist	Signature: <i>Whitney Young</i>	
Authorized by: Joseph Kennedy	Date: 3/14/2025	
Title: Equipment Service Manager	Signature: <i>Joseph Kennedy</i>	

Calibration Data:

Network Simulator			Optical Light Source			VFL	
	Multimode	Single mode	□ Not Installed, N/A			□ Not Installed, N/A	
Serial Number:	178	1L43DQ001	Nominal Wavelength (nm)	Output Power CW Before (dBm)	Output Power CW After (dBm)	Nominal Wavelength	Output Power CW (dBm)
Fiber Type:	62.5/125um / OM1	9/125um / SMF-28	850	-11.34	0.01	650nm	-1.17
Length (m):	1998.1	4998.0	1300	-17.20	-7.06		
81618A/81624B-SM Set 2 Measured Length			1310	-7.25	-6.98		
Wavelength (nm)	850	1300	1550	N/A			
Measured Length (m)	1997.8	1997.8	4999.3	4999.3			

Optical Power Meter □ Not Applicable/Not Installed Detector Type:				Linearity Wavelength: 1310nm	
Nominal Wavelength (nm)	Transfer Standard (dBm)	Before Calibration (dBm)	After Calibration (dBm)	Input (dBm)	Reading (dBm)
850nm	-10	-10.01	-10.00	0	-0.03
1300nm	-10	-9.37	-10.00	-10	-10.00
1310nm	-10	-9.37	-10.00	-20	-20.01
1490nm	-10	-9.95	-10.00	-30	-30.01
1550nm	-10	-9.88	-10.00	-40	-40.04
1625nm	-10	-9.88	-10.00	-50	-50.06
1650nm	-10	-9.80	-10.00	-55	-55.05

Standard(s) Used:

Manufacturer:	Model Number:	Serial Number:	System Calibration Date:
Keysight	81618A/81624B-SM Set 2	MY41208107/DE41101122	06/03/2024
Keysight	81618A/81623B-MM Set 2	MY55C01008/DE41301368	06/04/2024
AFL	OPM4-1D Set 2	SG49RA013	06/10/2024

AFL certifies the performance of this instrument has been verified and calibrated using standards and instruments traceable to the National Institute of Standards and Technology or have been derived from current AFL calibration practices. This certificate shall not be reproduced without the written approval of AFL.

¹Mfg. recommended calibration date provided based on average equipment usage. In accordance with ISO 17025, end users are responsible for establishing calibration intervals.

Primary Standard(s) NIST ID# 814461 & 814728 (686032 & 686033)



110 Hidden Lake Circle, Duncan, SC 29334 USA
tel: (800) 235-3423 tel: (864) 433-0333
web: www.AFLglobal.com

AFL

OPM4-6D Set 2

2H24TK001

06/05/2024

AFL certifies the performance of this instrument has been verified and calibrated using standards and instruments traceable to the National Institute of Standards and Technology or have been derived from current AFL calibration practices. This certificate shall not be reproduced without the written approval of AFL.
'Mfg. recommended calibration date provided based on average equipment usage. In accordance with ISO 17025, end users are responsible for establishing calibration intervals.
Primary Standard(s) NIST ID# 814461 & 814728 (686032 & 686033)

Certificate of Compliance

Legacy Fiberoptics Inc. hereby certifies that this instrument meets or exceeds all current manufacturer's published specifications and has been calibrated using standards traceable to the National Institute of Standards and Technology (NIST) and is in compliance with ANSI/NCSL Z540-1.

Model: CT-30

Serial Number: 271952

Performed By: Lawrence Boncella



Legacy Fiberoptics, Inc.
7930 Limberlost Road
Clinton, New York 13323
USA
www.legacyfiberoptics.com

Certificate of Calibration

Legacy Fiberoptics Inc. hereby certifies that this instrument meets or exceeds all current manufacturer's published specifications, and has been calibrated using standards traceable to the National Institute of Standards and Technology (NIST) and is in compliance with ANSI/NCSL Z540-1.

Unit Information

05719049563

F15

Cal Date: 01/16/2025

Cal Due: 01/16/2026

In-Service Date: _____

* Enter the date that the unit is put into service. Recalibration is recommended 12 months from the in-service date, unless otherwise noted.

Test Information

Test Procedure: LFSP-025

Temperature (°C): 22

Relative Humidity (%): 36

As Received: Catastrophic

As Returned: In Tolerance

Certificate #: 29974

Calibrated By: Lawrence Boncella



Manufacturer/Model	Description	S/N	Due Date	INST #
HEWLETT PACKARD 81531A	POWER SENSOR MODULE	2947G03802	12/20/2025	5122

Remarks:



Legacy Fiberoptics, Inc.
7930 Limberlost Road
Clinton, New York 13323
USA
www.legacyfiberoptics.com

Certificate of Calibration

Legacy Fiberoptics Inc. hereby certifies that this instrument meets or exceeds all current manufacturer's published specifications, and has been calibrated using standards traceable to the National Institute of Standards and Technology (NIST) and is in compliance with ANSI/NCSL Z540-1.

Unit Information

05719049653

F15

Cal Date: 02/06/2025

Cal Due: 02/06/2026

In-Service Date: _____

* Enter the date that the unit is put into service. Recalibration is recommended 12 months from the in-service date, unless otherwise noted.

Test Information

Test Procedure: LFSP-026

Temperature (°C): 22.1

Relative Humidity (%): 39.1

As Received: Catastrophic

As Returned: In Tolerance

Certificate #: 29545

Calibrated By: Ken Stewart



Manufacturer/Model	Description	S/N	Due Date	INST #
OTS-312XD	Corning Optical Tester	2310-0094	01/10/2026	8205

Remarks:



Legacy Fiberoptics, Inc.
7930 Limberlost Road
Clinton, New York 13323
USA
www.legacyfiberoptics.com

Certificate of Calibration

Legacy Fiberoptics Inc. hereby certifies that this instrument meets or exceeds all current manufacturer's published specifications, and has been calibrated using standards traceable to the National Institute of Standards and Technology (NIST) and is in compliance with ANSI/NCSL Z540-1.

Unit Information

35789
FSM-60S
Cal Date: 12/10/2024
Cal Due: 12/10/2025
In-Service Date: _____

* Enter the date that the unit is put into service. Recalibration is recommended 12 months from the in-service date, unless otherwise noted.

Test Information

Test Procedure: LFSP-020
Temperature (°C): 20
Relative Humidity (%): 35
As Received: In Tolerance
As Returned: In Tolerance
Certificate #: 29649
Calibrated By: Seth Colangelo


Manufacturer/Model	Description	S/N	Due Date	INST #
HEWLETT PACKARD 81531A	POWER SENSOR MODULE	2947G03802	11/28/2025	5122

Remarks:



Legacy Fiberoptics, Inc.
7930 Limberlost Road
Clinton, New York 13323
USA
www.legacyfiberoptics.com

Certificate of Calibration

Legacy Fiberoptics Inc. hereby certifies that this instrument meets or exceeds all current manufacturer's published specifications, and has been calibrated using standards traceable to the National Institute of Standards and Technology (NIST) and is in compliance with ANSI/NCSL Z540-1.

Unit Information

WXRH04LPJKB5DNVG

70S

Cal Date: 03/21/2025

Cal Due: 03/21/2026

In-Service Date: _____

* Enter the date that the unit is put into service. Recalibration is recommended 12 months from the in-service date, unless otherwise noted.

Test Information

Test Procedure: LFSP-020

Temperature (°C): 20

Relative Humidity (%): 32

As Received: In Tolerance

As Returned: In Tolerance

Certificate #: 30681

Calibrated By: Lawrence Boncella



Manufacturer/Model	Description	S/N	Due Date	INST #
HEWLETT PACKARD 81531A	POWER SENSOR MODULE	2947G03802	01/16/2026	5122

Remarks:



Legacy
FIBEROPTICS

Legacy Fiberoptics, Inc.
7930 Limberlost Road
Clinton, New York 13323
USA
www.legacyfiberoptics.com

Certificate of Calibration

Legacy Fiberoptics Inc. hereby certifies that this instrument meets or exceeds all current manufacturer's published specifications, and has been calibrated using standards traceable to the National Institute of Standards and Technology (NIST) and is in compliance with ANSI/NCSL Z540-1.

Unit Information

12116042

IFS-10

Cal Date: 06/05/2025

Cal Due: 06/05/2026

In-Service Date: _____

• Enter the date that the unit is put into service. Recalibration is recommended 12 months from the in-service date, unless otherwise noted.

Test Information

Test Procedure: LFSP-025

Temperature (°C): 21

Relative Humidity (%): 49

As Received: In Tolerance

As Returned: In Tolerance

Certificate #: 29444

Calibrated By: George Eykelhoff



Manufacturer/Model	Description	S/N	Due Date	INST #
HEWLETT PACKARD 81531A	POWER SENSOR MODULE	2947G03802	04/10/2026	5122

Remarks:



Legacy Fiberoptics, Inc.
7930 Limberlost Road
Clinton, New York 13323
USA
www.legacyfiberoptics.com



Business Tax Receipt

INTELLIGENT INFRASTRUCTURE SOLUTIONS LLC
INTELLIGENT INFRASTRUCTURE SOLUTIONS LLC
7676 JEAN BLVD
FT MYERS, FL 33967

Dear Business Owner:

Your 2025 - 2026 Lee County Business Tax Receipt is attached below for account number / receipt number: **1032112 / 1400600**

If there is a change in one of the following, refer to the instructions on the back of this receipt.

- Business name
- Ownership
- Physical location
- Business closed

This is not a bill. Detach the bottom portion and display in a public location.

I hope you have a successful year.

Sincerely,

Lee County Tax Collector

2025-2026 LEE COUNTY BUSINESS TAX RECEIPT

Account Number: **1032112**
Receipt Number: **1400600**
State License Number: **EC13004797**

Location:
7676 JEAN BLVD
FT MYERS, FL 33967

Account Expires: September 30, 2026

May engage in the business of:

ELECTRICAL CONTRACTOR-CERTIFIED

THIS BUSINESS TAX RECEIPT IS NON REGULATORY

INTELLIGENT INFRASTRUCTURE SOLUTIONS LLC
WEISBURGH GREGORY S
7676 JEAN BLVD
FT MYERS, FL 33967

Payment Information:

PAID DP-00-03637346 07/30/2025
\$ 50.00