

MASTER SERVICE AGREEMENT - ADDENDUM

THIS MASTER SERVICE AGREEMENT (the "Agreement") is entered into this 24th day of May, 2013 (the "Effective Date") by and between Doddec, Inc., and the City of Coral Gables, the undersigned customer, (hereinafter "Customer"). Provider and Customer are each referred to herein as a "Party" and referred to collectively as the "Parties."

1. Terms and Conditions are set forth utilizing the **City of Miami Gardens, Professional Contractors (Contract No. 11-12-031)** as a current and active contract in accordance with Section 2-978 of the Procurement Code "Use of Other Governmental Units Contracts" and procurement vehicle; however, all invoices and Customer Maintenance Request (CMR) notices permitted by this agreement, shall be listed under the following name:

City of Coral Gables
405 Biltmore Way
Coral Gables, FL 33134

This Agreement runs through **July 31, 2014** with option to renew annually, not to exceed a maximum of three (3) years, on a year to year basis.

Moreover, this Addendum shall modify the City of Miami Gardens (Contract No. 11-12-031) in the manner described below:

Section 1.47 Minority Business Enterprises - not applicable.

Section 2.3 Method of Award:

Competitive quotations will not be required for jobs less than **\$1,000.00**, however all jobs will require a written estimate. The City reserves the right to formally bid any job regardless of estimated cost.

Section 2.4 Purchasing Card Program - not applicable.

Section 2.11 Insurance:

A. GENERAL CONDITIONS

Pursuant to the City of Coral Gables Code, Section 2-1007, the Risk Management Division of the Human Resources Department has developed the following insurance requirements to protect the City of Coral Gables to the maximum extent feasible against any and all claims that could significantly affect the ability of the City to continue to fulfill its obligations and responsibilities to the taxpayers and the public.

Consequently, prior to award and in any event prior to commencing work, the Contractor shall procure, and provide the City with evidence of insurance coverage as required herein and name the City as an Additional Insured on a primary and non-contributory basis. The Contractor shall secure and maintain, at its own expense, and keep in effect during the full period of the contract a policy or policies of insurance, and must submit these documents to the Risk Management Division of Human Resources Department for review and approval.

All city solicitation and contract documents shall include insurance provisions approved by the Risk Management Division.

B. INSURER REQUIREMENTS

The Contractor shall maintain, at its own cost and expense, the following types and amounts of insurance with insurers with rating of "A-" "VI" or better according to the A.M. Best rating guide as a minimum standard. The insurers providing coverage must be approved by the State of Florida and hold all of the required licenses in good standing to conduct business within the State of Florida. In addition, they must be acceptable to the City of Coral Gables Risk Management Division and/or the City Attorney's Office.

C. TYPE OF COVERAGE & LIMIT OF LIABILITY REQUIREMENT

Professional Liability Insurance with a limit of liability no less than \$1,000,000 per occurrence with a deductible per claim, if any, not to exceed 5% of the limit of liability providing for all sums which the PROFESSIONAL shall become legally obligated to pay as damages for claims arising out of the services performed by the PROFESSIONAL or any person employed in connection with this Agreement. This insurance shall be maintained for three (3) years after any WORK covered by this Agreement.

Workers' Compensation and Employers Liability Insurance covering all employees, subcontractors, and/or volunteers of the Contractor and/or Vendor engaged in the performance of the scope of work associated with this contract and/or agreement. The minimum limits of liability shall be in accordance with applicable state and/or federal laws that may apply to Workers' Compensation insurance, with the following limits:

Workers' Compensation - Coverage A
Statutory Limits (State of Florida or Federal Act)

Employers' Liability - Coverage B
\$1,000,000 Limit - Each Accident
\$1,000,000 Limit - Disease each Employee
\$1,000,000 Limit - Disease Policy Limit

Commercial General Liability Insurance written on an occurrence basis including, but not limited to; Coverage for contractual liability, products and completed operations, personal & advertising injury, bodily injury and property damage liabilities with limits of liability no less than:

Each Occurrence Limit - \$1,000,000
Fire Damage Limit (Damage to rented premises) - \$100,000
Personal & Advertising Injury Limit - \$1,000,000
General Aggregate Limit - \$2,000,000
Products & Completed Operations Aggregate Limit - \$2,000,000

Business Automobile Liability Insurance covering all owned, non-owned and hired vehicles used in connection with the performance of work under this Contract, with a combined single limit of liability for bodily injury and property damage of not less than:

Combined Single Limit (Each Accident) - \$1,000,000
Any Auto (Symbol 1)
Hired Autos (Symbol 8)
Non-Owned Autos (Symbol 9)

Property Insurance is required only when the contractor is in the care, custody or control of City owned property. Coverage will be provided for loss or damage by fire, lightning, windstorm and against loss or damage by all other risks (including transit) covered by the broadest Property Coverage Form commercially available, including the expense of the removal of debris of such property as a result of damage by an insured peril. The insurance shall be written on a replacement cost basis, which is hereby defined as the cost of replacing the property insured without deduction for depreciation or wear and tear. Every attempt will be made to have coverage provided on an "Agreed Value" basis "Not subject to a Co-Insurance Clause" or the "Co-Insurance Clause" must be waived

by endorsement and the limit of insurance must be for an amount equal to the total replacement cost of the property being insured. If the contract is related to construction, a Builders Risk policy and/or an Installation Floater may be required to meet the above requirements.

D. MINIMUM COVERAGE FORM (SHALL BE AT LEAST AS BROAD AS):

Workers Compensation

The standard form approved by the State of Jurisdiction

Commercial General Liability

ISO (Insurance Services Office, Inc.) Commercial General Liability coverage ("occurrence" Form CG 0001) or its equivalent. "Claims made" form is unacceptable except for professional or environmental liability coverage.

Commercial Auto Liability

ISO (Insurance Services Office, Inc.) Commercial Auto Liability coverage (form CA 0001) or its equivalent.

Property Insurance

As a minimum standard, the ISO (Insurance Services Office, Inc.) CP 0010 - Building and Personal Property Form along with the CP 1030 - Special Perils Coverage Form or their equivalents must be used.

E. REQUIRED ENDORSEMENTS

The following endorsements with City approved language

Additional insured status provided on a primary & non-contributory basis

Waiver of Subrogation

Notices of Cancellation/Non-renewal/Material Changes must be sent directly to the City of Coral Gables by the Insurance Company. The City only requires the same statutory notice that an insurance company must provide to the insured, however this Notice may not be less than Thirty (30) Days, except a Ten (10) Day Notice of cancellation is acceptable for non-payment of premium.

Notices of Cancellation, Non-renewal or Material Change must be provided to the following address:

City of Coral Gables
Insurance Compliance
PO Box 12010 –CE
Hemet, CA 92546-8010

All policies shall contain a "severability of interest" or "cross liability" clause without obligation for premium payment of the City.

The City of Coral Gables shall be named as a Loss Payee and Additional Insured on all Property and/or Inland Marine Policies as their interest may appear.

F. HOW TO EVIDENCE COVERAGE TO THE CITY

The following documents must be provided to the City;

A Certificate of Insurance containing the following information:

Issued to entity contracting with the City

Evidencing the appropriate Coverage

Evidencing the required Limits of Liability required

Evidencing that coverage is currently in force

Language provided in the Special Provision Section of the Certificate of Insurance affirming that all endorsements required by the City have been endorsed to all of the policies.

A copy of each endorsement that is required by the City

All Certificates of Insurance must be signed by a person authorized by that insurer to bind or amend coverage on its behalf

The City reserves the right to require a complete copy of any insurance policies required by the City. Should the City invoke this right, the policy must be provided directly to the City by the insurance agent or insurance company.

The city reserves the right to require additional insurance requirements at any time during the course of the agreement.

G. WAIVER OF INSURANCE REQUIREMENTS

Should a bidder not be able to comply with any insurance requirement, for any reason, the bidder must write a letter to the Risk Management Division on their letter head requesting that a waiver of a specific insurance requirement be granted. The requested waiver will be evaluated by the Risk Management Division. The Risk Management Division will approve or reject the requested waiver of insurance and will forward the waiver to the City Attorney's Office for further evaluation.

Bidders are encouraged review their individual insurance needs with their insurance agents/brokers regularly to determine the adequacy of the coverage and the limits of liability that are being purchased. In certain circumstances, the City of Coral Gables will require additional insurance to respond to the hold harmless and indemnification clauses executed with the City of Coral Gables. Based on the nature of the work performed, the City of Coral Gables will determine what additional types of insurance and/or higher limits of liability that must be obtained.

Upon contract award, all documents evidencing insurance to City of Coral Gables – Insurance Compliance should be sent via email to cityofcoralgables@ebix.com and copy to msparber@coralgables.com. Should you require assistance, contact the dedicated Call Service Lines for City of Coral Gables:

Call Service Lines - Insurance Compliance

Phone: (951) 652-2883.

Fax: (770) 325-0417

Email: cityofcoralgables@ebix.com

When Professional, Contractor and/or Vendor evidence insurance to the City of Coral Gables, the Certificate Holder section of the Certificate of Insurance should read as follows:

City of Coral Gables
Insurance Compliance
PO Box 12010 –CE
Hemet, CA 92546-8010

Section 3.7 Permits:

3.7.1 Contractor shall obtain and pay for all required permits when applicable. The fee for City permits may be waived and applicable Dade County surcharges shall apply.

Section 3.9 Description of Work:

3.9.3 The City will not require Mechanical, HVAC work.

End of Section 3 list the names of the facilities; the City of Coral Gables will name facilities on a work order basis.

2. Article 7. Miscellaneous Section 7.6 of the Master Service Agreement is replaced by the following:

7.6 Notices: All notices related this Agreement and/or the Parties' performance of this Agreement must be in writing. Written notice, moreover, shall be deemed to have been duly served if delivered in person to the Contractor or the City, with a written receipt, or shall be deemed to have been duly given on the date said notice was mailed by United States Certified or Registered Mail, Return Receipt Requested, postage prepaid, and addressed as follows (or to such other address as any Party may specify by notice to all other Parties as aforesaid):

For City:
City of Coral Gables
Michael P. Pounds
Chief Procurement Officer
2800 S.W. 72nd Avenue
Miami, Florida 33134

For Project Manager:
City of Coral Gables
Carlos Hernandez
Public Works Director
2800 S.W. 72nd Avenue
Miami, Florida 33155

With copies to:

For Contractor; (Company Qualifier)

City Attorney
City of Coral Gables
405 Biltmore Way
Coral Gables, FL 33134

3. Article 7. Indemnification Section 7.16 of the Master Service Agreement is replaced by the following:

Indemnification and Hold Harmless

To the fullest extent permitted by laws and regulations, the Contractor shall defend, indemnify, and hold harmless the City and its commissioners, attorneys, administrators, officers, consultants, agents, and employees from and against all claims, damages, losses, and expenses direct, indirect, or consequential (including but not limited to fees and charges of attorneys and other consultants and court and arbitration costs) arising out of or resulting from the performance of this Agreement and/or any defects in the equipment purchased under this Agreement and caused in whole or in part by any willful, intentional, reckless, or negligent act or omission of Contractor, any subconsultant or any person or organization directly or indirectly employed by any of them to perform or furnish any of the equipment and/or work specified in this Agreement or anyone for whose acts any of them may be liable.

In any and all claims against the City or any of its consultants, agents, or employees by any employee of Contractor, any subconsultant, any person or organization directly or indirectly employed by any of them to perform or furnish any of the work or equipment or anyone for whose acts any of them may be liable, the indemnification obligation under the above Paragraph shall not be limited in any way by any limitation on the amount or type of damages, compensation, or benefits payable by or for Contractor or any such subconsultant or other person or organization under workers' or workman's compensation acts, disability benefit acts, or other employee benefit acts. The parties expressly agree that this provision shall be construed broadly, and Contractor's obligations to pay for the City's legal defense hereunder shall arise and be fully enforceable when Contractor (or any subconsultant or any person or organization directly or indirectly employed by Contractor) is alleged to have acted willfully, intentionally, recklessly, or negligently in the performance of the work and/or manufacture of the equipment required under this Agreement. Any failure of Contractor to comply with the terms of this provision shall be deemed a material breach of this Agreement and may subject Contractor to debarment from consideration for future award of City contracts pursuant to Section 2-952(4) of the City of Coral Gables Code of Ordinances. Nothing in this Indemnification and Hold Harmless provision shall be considered to increase or otherwise waive any limits of liability, or to waive any immunity, established by Florida Statutes, case law, or any other source of law.

The indemnification and hold harmless provision shall include, but not be limited to, all of the following:

- a. Damages awarded to any person or party.
- b. Attorney's fees and costs incurred in defending such claims. The CITY may use the attorney or law firm of its choice in which event the CONTRACTOR will pay such firm the fees it charges the CITY, provided such fees are reasonable in light of the prevailing market rate for similar legal services. Such fees shall be deemed reasonable if they are no greater than the fees that CITY pays other counsel for representation in similar cases. If the City Attorney's Office provides the defense, CONTRACTOR will reimburse the CITY at the prevailing market rate for similar legal services.
- c. Attorney's fees and cost of any party that a court orders the CITY to pay.
- d. Lost time that results from the CITY or its officials or employees responding to discovery or testifying by deposition or in court. In this regard, for any time the CITY spends in responding to document requests or public records requests relating to such claims whether from CONTRACTOR or any other party, CONTRACTOR will reimburse CITY \$50.00 for each employee work hour spent reviewing or responding to such requests. For any time spent testifying in court or in depositions, or preparing for such testimony, CONTRACTOR will reimburse CITY on a per hour basis as follows:

Mayor or City Commissioner:	\$300.00 per hour
City Manager:	\$250.00 per hour
An Assistant City Manager or Department Director:	\$250.00 per hour
An Assistant Department Director:	\$100.00 per hour
City Attorney or Deputy City Attorney:	Prevailing market rates
Other City employees:	\$50.00 per hour
- e. The expenses incurred by CITY in complying with any administrative or court order that may arise from such claims.
- f. Miscellaneous expenses relating to such claims including expenses of hotels and transportation in trips relating to such claims; and
- g. Any other direct or indirect expense that CITY would not have incurred but for a claim that arises out of this agreement.

4. Add Section 7.17, Sovereign Immunity, to the Master Service Agreement to read as follows:

Section 7.17 Sovereign Immunity.

The Contractor acknowledges that the Florida Doctrine of Sovereign Immunity bars all claims by Contractor against the City other than claims arising out of this Agreement. Specifically, the Contractor acknowledges that it cannot and will not assert any claims against the City, unless the claim is based upon a breach by the City of this Agreement. The Contractor acknowledges that it has no right and will not make any claims based upon any of the following:

- (a) Claims based upon any alleged breach by the City of Implied warranties or representations not specifically set forth in this Agreement, as the Parties stipulate that there are no such implied warranties or representations of the City. All obligations of the City are only as set forth in this Agreement;
- (b) Claims based upon negligence or any tort arising out of this Agreement;

(c) Claims upon alleged acts or inaction by any City Employee or Agent of the City;

(d) Claims based upon an alleged waiver of any of the terms of this Agreement. The Contractor affirms that the provisions regarding notice to claims, and the requirement for a written change order cannot be waived and further, without timely notice of a claim or a written change order as required in this Agreement, the Contractor shall not be entitled to additional compensation or an extension of the Contract Time. Such claims for additional compensation or extensions of the Contract Time are waived if the Contractor has not given all required notices and obtained a written a change order when required.

5. Add Section 7.18, Waiver of Consequential Damages, to the Master Service Agreement to read as follows:

Section 7.18 Waiver of Consequential Damages

The Contractor waives claims against the City for consequential damages arising out of or related to this Agreement or its performance including but not limited to damages for lost income, profit, lost bonding capacity, financing, business and reputation, or for loss of management or labor productivity, damages incurred for principal office expenses, including the compensation of personnel stationed there, and for anticipated profit on any Work not performed by Contractor.

6. Add Section 7.19 Resolution of Disputes; Governing Law and Venue, to the Master Service Agreement to read as follows:

Section 7.19 Resolution of Disputes; Governing Law and Venue

Contractor understands and agrees that all claims by Contractor against the City based upon an alleged violation of the terms of this Agreement by the City shall be submitted for resolution in the following manner. Any claims by Contractor arising under this Agreement shall be submitted in writing, with all supporting documentation, to the City Manager or designee as identified in the Notices Paragraph herein. Upon receipt of said notification City Manager or designee shall review the issues relative to the dispute or Claim, and issue a written finding within ninety (90) calendar days from the date of submission of the dispute or Claim consistent with Section 2-953 of the City of Coral Gables Code of Ordinances, unless City Manager or designee requires additional time to gather information or allow the parties to provide additional information. During the pendency of any dispute and after a determination thereof, the Contractor and the City shall act in good faith to mitigate any potential damages. The decision of City Manager shall be final and conclusive unless determined by a court of competent jurisdiction to be fraudulent, capricious, arbitrary, so grossly erroneous as to necessarily imply bad faith, or not be supported by substantial evidence. A party may seek judicial relief pursuant to the Florida Rules of Appellate Procedure; however, the claimant shall not be entitled to such judicial relief if they have not followed the procedure outlined herein.

The Contract Documents shall be construed under and in accordance with the laws of the State of Florida. Any legal proceeding arising from the Contract Documents shall be brought only in a court of competent jurisdiction in Miami-Dade County, Florida.

Attorneys' Fees In connection with any litigation including appellate proceedings arising out of this Agreement, the prevailing party shall be entitled to recover its reasonable attorney's fees and costs.

7. Add Section 7.20 Waiver of Trial by Jury, to the Master Service Agreement to read as follows:

Section 7.20 Waiver of Trial by Jury

The parties to this Agreement hereby agree to exhaust all administrative remedies before filing a lawsuit in civil court to resolve the dispute. City and Contractor hereby knowingly, irrevocably, voluntarily and intentionally waive any right either may have to a trial by jury in respect of any action, proceeding or counterclaim based upon the Contract Documents, or arising out of, under, or in connection with, the construction of the Work, or any course of conduct, course of dealing, statements (whether verbal or written), or actions of any party.

8. Add Section 7.21, Successors and Assigns, to the Master Service Agreement to read as follows:

Section 7.21 Successors and Assigns

The City and the Contractor each binds itself, its partners, successors, assigns and legal representatives to the other party hereto and to the partners, successors, assigns and legal representatives of such other party in respect to all covenants, agreements and obligations contained in the Contract Documents. Neither party to this Agreement shall assign the Agreement or sublet it as a whole without the written consent of the other, nor shall the Contractor assign any monies due or to become due to it hereunder, without the prior written consent of the City.

9. Add Section 7.22, Modification, to the Master Service Agreement to read as follows:

Section 7.22 Modification

No change or modification of this Agreement shall be valid unless in writing and signed by all Parties hereto. No waiver of any of the provisions of this Agreement shall be valid unless in writing and signed by the party against whom it is sought to be enforced.

10. Add Section 7.23, Rights and Remedies, to the Master Services Agreement to read as follows:

Section 7.23 Rights and Remedies

The duties and obligations imposed by the Contract Documents and the rights and remedies available thereunder shall be in addition to and not a limitation of any duties, obligations, rights and remedies otherwise imposed or available by law.


11. Add Section 7.23, Severability and Waiver, to the Master Services Agreement to read as follows:

Section 7.24 Severability and Waiver


The partial or complete invalidity of any one or more provisions of this Agreement shall not affect the validity or continuing force and effect of any other provision. The failure of either party hereto to insist, in any one or more instances, upon the performance of any of the terms, covenants or conditions of this Agreement, or to exercise any right herein, shall not be construed as a waiver or relinquishment of such term, covenant, condition or right as respects further performance.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the day and year first above written.

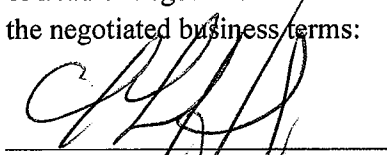
Approved as to insurance:


Michael S. Sparber
Risk Management Division


AS TO CITY:


Michael P. Pounds
Chief Procurement Officer

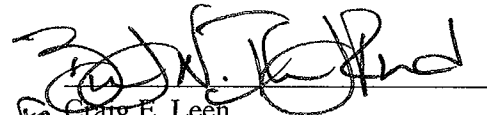
Approved by Department Director or head of negotiations team as to the negotiated business terms:


Carlos Hernandez
Public Works Director

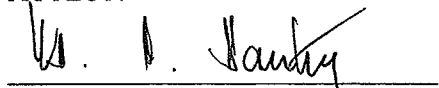
ATTEST:


Walter J. Foeman
City Clerk

APPROVED AS TO FORM AND LEGAL SUFFICIENCY:


Craig E. Leen
City Attorney

ATTEST:

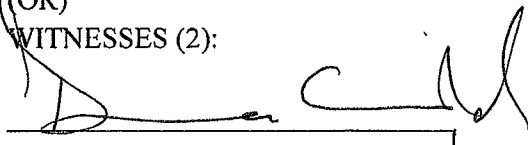

Corporate Secretary


Print Name: T. O. PANTLEY

(SEAL)

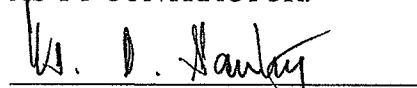
(OR)

WITNESSES (2):


Print Name: Diana Child


Print Name: T. O. PANTLEY

AS TO CONTRACTOR:


Name

T. O. PANTLEY / PRESIDENT
Title

Insured Info

Compliant with Waived Deficiencies.

Account Number	CE00000608
Risk Type	Minimum Insurance Requirements w/ Property
Do Not Call	<input type="checkbox"/>
	Mailing Address
Insured Name	Dodec, Inc
Address 1	3140 W. 84th Street, Bay #2
Address 2	
City	Hialeah
State	FL
Zip	33018
Country	
Contact Name	
Phone Number	
Fax Number	
E-Mail Address	
Approval Date	
Rush	
Contract On File	NO
Indemnification Agreement	No
Tax ID	
Lot Number	
Contract Number	
Contract Start Date	
Contract End Date	
Contract Effective Date	
Contract Expiration Date	
Description of Services	
Safety Form II	NO



APPROVED

APPROVED
By Michael S. Sparber, CIC CRM CAIP at 9:38 am, Apr 29, 2013

The City Beautiful™

Risk Management
Human Resources Department

This Account created by Ebix on 2/12/2013 4:03:01 PM.

BID SUBMITTAL

Submit Proposal to:

**CITY OF MIAMI GARDENS
PROCUREMENT DEPARTMENT
1515 N W 167th Street
Mail to: Bldg. 5 Suite 200
Deliver to: Bldg. 7 suite 440
Miami Gardens, Florida 33169**

**BID #11-12-031
Title: Pre-Qualification of
Professional Contractors**

Date: June 21, 2012

Dodec, Inc

(Contractor)

agrees to supply labor, equipment, supplies required for Contractor Services as defined in this Bid in accordance with the requirements of the Specifications, Drawing and Bid Documents.

Gentlemen:

The undersigned Bidder has carefully examined the Specification requirements, Bid/Contract Documents and is familiar with the nature and extent of the Work and any local conditions that may in any manner affect the Work to be done.

The undersigned agrees to provide the services called for by the Specifications, and Bid Documents, in the manner prescribed therein and to the standards of quality and performance established by the City for the unit Bid price stated in the spaces herein provided.

The undersigned agrees the right of the City to hold all Bids and Bid guarantees for a period not to exceed ninety (90) days after the date of Bid opening stated in the Invitation to Bid.

The undersigned accepts the Invoicing and payment policies.

Upon award of this Bid the City and Contractor each binds himself, his partners, successors, assigns and legal representatives to the other party hereto in respect to all covenants, agreements and obligations contained in the Bid Documents.

The Contractor, by signing the Bid Submittal pages, acknowledges and agrees to abide by all the terms, conditions and specifications contained in this Bid Document. If this bid is accepted, the undersigned bidder agrees to enter into and execute the contract and accept the bid rates as full compensation for professional services under this contract.

All costs for materials, equipment, labor, maintenance, etc. required to provide professional services shall be included in this price.

SERVICE REQUIREMENTS OF THE CONTRACT CONTRACTOR:

Contractor shall insure adequate personnel and equipment to provide specified levels of service. YES NO

Contractor shall work with City of Miami Gardens personnel to insure satisfactory service. YES NO

Ms. P. Panty
Authorized Signature (Manual)

Trevor Pantry
Authorized Signature (Printed)

6/15/12
Date

Corporate Seal

Submit Proposal to:
CITY OF MIAMI GARDENS
PROCUREMENT DEPARTMENT
1515 N W 167th Street
Mail to: Bldg. 5 Suite 200
Deliver to: Bldg. 7 suite 440
 Miami Gardens, Florida 33169

BID #11-12-031
 Title: Professional Services

Date: June 21, 2012

To be opened and publicly read, Thursday, June 21, 2012 at 2:00 P.M. in Council Chambers.

Contractor Name: Dodec, Inc **Terms:** Proposer see Paragraph 1.2

Contractor Mailing Address: 3140 W 84th St., Suite #2 **F.E.I.D. No:** 65-0789455

City, State, Zip Code: Hialeah, FL 33018 **Cashier's Check/Proposal Bond is attached, when required, in the amount of \$** N/A

Telephone : (305)826-4022 **Fax:** (305) 826-4075 **Toll Free:** (800)

Proposal Contact Person (Please print clearly): Trevor Pantry

=====

Supplier Qualification Statement

Proposer declares that there has been an examination of the specifications of the work and is informed fully in regard to all conditions pertaining to the scope of services to be provided in accordance with the proposal documents.

Item #	DESCRIPTION - ELECTRICAL	Price per Regular Hour	Price per Overtime Hour
#1	Licensed Master Electrician	\$ 77.00	\$ 115.00
#2	Licensed Journeyman Electrician	\$ 67.00	\$ 100.00
#3	Electrician Helper/Apprentice	\$ 42.00	\$ 63.00
#4	Aerial (Bucket Truck)60' w/operator	\$ 140.00	\$ 210.00
#5	Interior Mechanical Lift	\$ 80.00	\$ 80.00
#6	Back hoe w/operator	\$ 65.00	\$ 98.00
#7	Jack Hammer	\$ 20.00	\$ 30.00
#8	Trencher w/operator	\$ 60.00	\$ 90.00
#9	Line Truck w/operator	\$ 90.00	\$ 135.00
#10	Percent over Contractor's cost for parts & materials	16 %	

Item #	DESCRIPTION – MECHANICAL- HVAC	Price per Regular Hour	Price per Overtime Hour
#1	Licensed Master Mechanical HVAC	\$ 84.00	\$126.00
#2	Licensed Journeyman Mechanical HVAC	\$ 71.00	\$106.00
#3	Mechanical HVAC Helper/Apprentice	\$ 39.00	\$ 59.00
#4	Aerial (Bucket Truck)35' w/operator	\$119.00	\$ 178.00
#5	Freon Recovery Unit	\$ 35.00	\$ 52.00
# 6	Percent over Contractor's cost for parts & materials	16 %	

Item #	DESCRIPTION – PLUMBING	Price per Regular Hour	Price per Overtime Hour
#1	Licensed Master Plumber	\$ 71.00	\$106.00
#2	Licensed Journeyman Plumber	\$ 64.00	\$ 96.00
#3	Plumber Helper/Apprentice	\$ 36.00	\$ 54.00
#4	Back hoe w/operator	\$ 65.00	\$98.00
#5	Interior Mechanical Lift	\$ 28.00	\$ 42.00
#6	Jack Hammer	\$ 20.00	\$30.00
#7	Trencher w/operator	\$ 60.00	\$90.00
#8	Percent over Contractor's cost for parts & materials	16 %	

Item #	DESCRIPTION – GENERAL	Price per Regular Hour	Price per Overtime Hour
#1	Carpenter	\$ 54.00	\$ 81.00
#2	Painter	\$ 46.00	\$ 69.00
#3	Drywall Installer/ Repair (Finisher)	\$ 48.00	\$ 72.00
#4	Percent over Contractor's cost for parts & materials	16 %	

Contractors cost for acquiring bonding when applicable 2 %

Will accept VISA purchase card as payment _____ Yes No

Dated this 15 day of June, 2012
(Month) (Year)

SUBMITTED BY:

Company Name: Dodec, Inc

Address: 3140 W 84th St., Suite #2

City: Hialeah State: FL Zip: 33018

Phone: 305-826-4022 Fax: 305-826-4075

The Contractor, certifies that the Bid Submittal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a Bid for the same materials, supplies or equipment, or services and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this Bid Submittal and certify that I am authorized to sign this Bid for the bidder and that the bidder is in compliance with all requirements of the Bid, including but not limited to, certification requirements. I certify that I have read and agree to all General Conditions:

Trevor Pantry
Authorized Signature (Manual)

Trevor Pantry
Authorized Signature (Printed)

6/15/12 Date
Corporate Seal

Bidder acknowledges the receipt of Addenda No.'s: (please list the date received in the square below)

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

CONTRACTOR SERVICE REPRESENTATIVE INFORMATION

The following individuals are the designated contacts assigned to the City:

REGULAR WORK HOURS:

Name: Dean Lindo
3140 W 84th St. Suite #2
Address: Hialeah, FL 33018
Telephone: (786) 232-1985

AFTER WORK HOURS, WEEKEND & HOLIDAYS:

Name: Mauricio Valencia
3140 W 84th St. Suite #2
Address: Hialeah, FL 33018
Telephone: (786) 232-1987

INDIVIDUAL, FIRM OR PARTNERSHIP

By: _____ / _____
(Signature) (Print name)

Address: _____

Telephone: (____) _____ Fax: (____) _____

E-Mail: _____
Social Security Number (OR) Taxpayer Identification Number (TIN):

CORPORATION

By: T. O. Sawley / Trevor Pantry
(Signature) (Print name)

Address: 3140 W 84th Street
Suite #2
Hialeah, FL 33018

Telephone: (305) 826-4022 Fax: (305) 826-4075
E-Mail: bids@dodecinc.com
Taxpayer Identification Number (TIN/EIN): 65-0789455

State Under Which Corporation Was Chartered: Florida

Corporate President: Trevor Pantry
(Print Name)

Corporate Secretary: Trevor Pantry
(Print Name)

Corporate Treasurer: Trevor Pantry
(Print Name)

CORPORATE SEAL

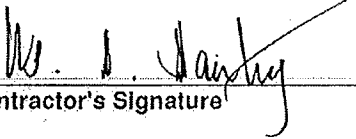
Attest By: Trevor Pantry
Secretary

DRUG FREE WORKPLACE

Preference shall be given to businesses with drug-free workplace programs. Whenever two or more Bids which are equal with respect to price, quality, and service from businesses that are not located within the City of Miami Gardens are received by the City for the procurement of commodities or contractual services, a Bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. In order to have a drug-free workplace program, a business shall:

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.


Contractor's Signature

QUESTIONNAIRE

Proposer's Name: Dodec, Inc

Principal Office Address: 3140 W 84th St., Suite #2
Hialeah, FL 33018

Official Representative: Trevor Pantry

Individual
Partnership (Circle One)
Corporation

If a Corporation, answer this:

When Incorporated:

October 1997

In what State: Florida

If Foreign Corporation:

Date of Registration with

Florida Secretary of State: _____

Name of Resident Agent: _____

Address of Resident Agent: _____

President's Name: Trevor Pantry

Vice President's Name: Steven Pantry

Treasurer's Name: Trevor Pantry

Members of Board of Directors:

If a Partnership:

Date of Organization: _____

General or Limited Partnership*: _____

Name and Address of Each Partner:

	<u>Name</u>	<u>Address</u>
1.	Trevor Pantry	18584 SW 47 Ct., Miramar, FL 33029
2.	_____	_____
3.	_____	_____

*Designate general partners in Limited Partnership

1. Number of years of relevant experience in operating similar business: N/A
2. Have any similar agreements held by proposer for a similar project to the proposed project ever been canceled?

Yes () No (x)

If yes, give details on a separate sheet.

3. Has the proposer or any principals of the applicant organization failed to qualify as a responsible proposer, refused to enter into a contract after an award has been made, failed to complete a contract during the past five (5) years, or been declared to be in default in any contract in the last five (5) years?

If yes, please explain:

4. Has the proposer or any of its principals ever been declared bankrupt or reorganized under Chapter 11 or put into receivership?

If yes, give date, court jurisdiction, action taken, and any other explanation deemed necessary.

5. Person or persons interested in the proposal and Questionnaire Form _____ (have) x (have not) been convicted by a Federal, State, County or Municipal Court of any violation of law, other than traffic violations. To include stockholders over ten percent (10%). (Strike out inappropriate words).

Explain any convictions on a separate sheet.

6. Lawsuits (any) pending or completed involving the corporation, partnership or individuals with more than ten percent (10%) interest:
 - A. List all pending lawsuits: None
 - B. List all completed lawsuits: None
 - C. List all judgments from lawsuits in the last five years: N/A
 - D. List any criminal violations and/or convictions of the proposer and/or any of its principals: N/A
7. Conflicts of Interest. The following relationships are the only potential, actual or perceived conflicts of interest in connection with this proposal: (If none, so state). None
8. List the work you will perform with your own forces on this project: List any Sub-Contractors for this project: Self Perform General, Mechanical, Plumbing, Subcontract Electrical (JP Moran Company)

The proposer understands that information contained in this Questionnaire will be relied upon by the City of Miami Gardens in awarding the proposed Agreement and such information is warranted by the proposer to be true. The undersigned proposer agrees to furnish such additional information, prior to acceptance of any proposal relating to the qualifications of the proposer, as may be required by the City Manager.

The proposer further understands that the information contained in this questionnaire may be confirmed through a background investigation conducted by the Miami Gardens Police Department. By submitting this questionnaire, the proposer agrees to cooperate with this investigation, including but not necessarily limited to fingerprinting and providing information for credit check.

I certify that the information and responses provided on this Questionnaire are true, accurate and complete. The Owner of the Project or its representatives may contact any entity or reference listed in this Questionnaire. Each entity or reference may make any information concerning the Contractor available to the Owner.

Dated 6/15, 2012

REFERENCES

As specified in the Special Conditions of this Bid Document, Bidders are to present the details of a minimum of five (5) references of similar work. (Additional references may be submitted on a separate sheet)

COMPANY NAME, ADDRESS, CITY, STATE, ZIP PHONE & FAX NUMBER	
Company Name:	Miami Dade Expressway
Address:	3790 NW 21st Street Miami, Florida 33142
Contact Name:	Orlando Sanchez
Phone:	305-265-5488
E-mail:	osanchez@eacconsult.com
Fax:	305-553-8097
Company Name:	Siemens Building Technology
Address:	3021 North Commerce Parkway Miramar, FL 33025
Contact Name:	Joe Grant
Phone:	954 364-6826
E-mail:	joe.grant@siemens.com
Fax:	866 814-3084
Company Name:	Poole & Kent
Address:	1781 N.W. North River Drive Miami, FL 33125
Contact Name:	Thad Buckley
Phone:	305.325.1930
E-mail:	thad_buckley@emcorgroup.com
Fax:	305.324.0522
Company Name:	Miami Dade Aviation Department
Address:	4200 NW 22nd St, Building 3030 Miami, FL 33159
Contact Name:	Walter Sadetsky
Phone:	305 876-7840
E-mail:	WSadetsky@miami-airport.com
Fax:	305 876-0347

**LIST OF EQUIPMENT AVAILABLE
FOR THIS CONTRACT**

List all equipment which will be dedicated to Demolition Services listed in this bid document. (Additional equipment may be submitted on a separate sheet in this format)

EQUIPMENT	NUMBER AVAILABLE	EMPLOYEES & EXPERIENCE ASSIGNED TO OPERATE THIS EQUIPMENT
1. Bobcat S300	1	2
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

SERVICE CONTRACTS EXPERIENCE

As specified in the Special Conditions of this Bid Document, Bidders are to present the details of service contract experience. It is mandatory that all service contracts for governmental entities be included (Additional contracts may be submitted on a separate sheet in this format)

CONTRACTING COMPANY NAME, ADDRESS, CITY, STATE, ZIP PHONE & FAX NUMBER	DATE OF CONTRACT, LOCATION AND BRIEF DESCRIPTION OF WORK PERFORMED
1. Company Name: Miami-Dade Corrections Address: 3300 NW 27 Ave Miami, FL 33142 Contact Name: Robert Freimuth Phone: 305 986 0453 Fax: 305 637 3185 Email:	1. 4/21-2008 -5/15/2088 Walk-In Cooler Maintenance at Miami-Dade Detention Center. This Job involved servicing the compressors on two units in a walk in cooler at the facility. We also had to install a new blower and refrigerant piping for the new blower
2. Company Name: Address: Contact Name: Phone: Fax: Email:	2.
3. Company Name: Address: Contact Name: Phone: Fax: Email:	3.
4. Company Name: Address: Contact Name: Phone: Fax: Email:	4.

*City of Miami Gardens
Procurement Department*

Ordinance 2011-01-243, establishes a program enabling the City to collect relevant data to determine if MBEs that are eligible and qualified to perform services on behalf of the City, are being given the opportunity to provide these services. **MBE Certification must be submitted with this form(s)**

A Good Faith Effort

A Good Faith Effort shall be shown on each project or purchase regardless of the dollar amount. Good Faith Effort to secure MBE participation shall be documented and shall include, but not necessarily be limited to, the following actions:

1. Advertisement in general circulation media, trade association publications and minority business enterprise media to provide notice of subcontracting opportunities;
2. Provide notice to a reasonable number of specific MBEs that their interest in the contract is being solicited. Notice shall be given in sufficient time to allow the MBEs to participate effectively;
3. Providing interested MBEs with adequate information about the plans, specifications and requirements of the contract in a timely manner;
4. Negotiating in good faith with qualified MBEs for specific sub-bids, including reasons for rejection of any such sub-bids offered.

Contractor Name: Dodec, Inc Address: 3140 W 84th St., Suite #2, Hialeah, FL 33018

Federal ID 65-0789455 Phone 305-826-4022 Email bids@dodecinc.com

Minority Business Certified? YES NO

MBE Certification Attached? YES NO

Contractor Official a Minority YES NO

Black Hispanic Asian Native American

() No Sub-Contracting Opportunities existed for this contract

() No Firms were contacted because:

This schedule must be submitted with the bid or proposal

Company Name, Address, Phone & Email	Type of Ownership BM – African Am HM – Hispanic AM – Asian NM – Native Am.	Trade or Services to be performed	Contact Method
Dodec, Inc 3140 W 84th St, Suite #2 Hialeah, FL 33018 305-826-4022 bids@dodecinc.com	BM	General Contracting, Mechanical Contracting, Plumbing Contracting	Phone, or email

Collusion

The City will not accept collusion among the prime bidders, an MBE or any other individual business or joint venture, or evidence of undue influence on an MBE to alter the committed quantities or its quotation.

Certification: It is hereby certified that the following information is true and accurate account of contacts and responses for sub-contracting opportunities on this contract

Signed Trevor Pantry Name/Title Trevor Pantry

Date 6/15/12



CERTIFICATE OF LIABILITY INSURANCE

DODE-01

OP ID: J3

DATE (MM/DD/YYYY)

01/30/12

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. 1201 W Cypress Creek Rd # 130 P.O. Box 5727 Ft. Lauderdale, FL 33310-5727 Shawn A. Burton, CIC	954-776-2222	CONTACT NAME:	
	954-776-4446	PHONE (A/C, No, Ext):	FAX (A/C, No):
		E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE			NAIC #
INSURER A : *Amerisure Insurance Company+			19488
INSURER B : Amerisure Mutual Ins. Co.+			23396
INSURER C :			
INSURER D :			
INSURER E :			
INSURER F :			

INSURED
Dodec Inc.
Attn: Trevor Pantry
3140 W. 84th Street, Bay #2
Hialeah, FL 33018

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			GL20810150001	01/20/12	01/20/13	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
GEN'L AGGREGATE LIMIT APPLIES PER:							
	<input type="checkbox"/> POLICY	<input checked="" type="checkbox"/> PRO-JECT	<input type="checkbox"/> LOC				\$
A	TOMOBILE LIABILITY			CA206003802	01/20/12	01/20/13	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS		<input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> HIRED AUTOS		<input checked="" type="checkbox"/>				BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB		<input checked="" type="checkbox"/> OCCUR	CU20697030102	01/20/12	01/20/13	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> EXCESS LIAB		<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 2,000,000
							\$
							DED <input checked="" type="checkbox"/> RETENTION \$ \$0
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC202666306	01/20/12	01/20/13	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input checked="" type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		<input type="checkbox"/> Y/N				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				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

CORALGA

CANCELLATION

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.

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# 10070001422

DATE BATCH NUMBER LICENSE NUMBER

07/30/2010 100470001 CMG02346

The MECHANICAL CONTRACTOR
Named below is CERTIFIED
under the provisions of Chapter
488, Florida Statutes, effective
07/01/2010.



RANDY TREVOR ORVILLE
DODEC INC
1140 W 84TH STREET
MIAMI FL 33150

CHARLIE CRIST
GOVERNOR

CHARLIE LIEM
SECRETARY

DISPLAY AS REQUIRED BY LAW

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# 10070001424

DATE BATCH NUMBER LICENSE NUMBER

07/30/2010 100470001 CMG02346

The MECHANICAL CONTRACTOR
Named below is CERTIFIED
under the provisions of Chapter
488, Florida Statutes, effective
07/01/2010.



RANDY TREVOR ORVILLE
DODEC INC
1140 W 84TH STREET
MIAMI FL 33150

CHARLIE CRIST
GOVERNOR

CHARLIE LIEM
SECRETARY

DISPLAY AS REQUIRED BY LAW



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
 1940 NORTH MONROE STREET
 TALLAHASSEE FL 32399-0783

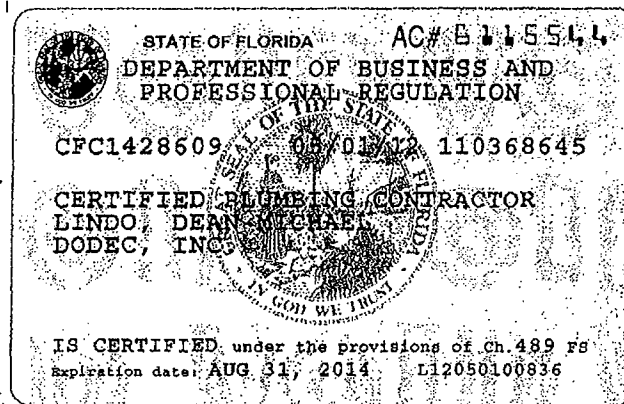
(850) 487-1395

LINDO, DEAN-MICHAEL
 DODEC, INC.
 13447 SW 23 ST
 MIRAMAR FL 33027

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

THIS DOCUMENT HAS A COLORED BACKGROUND • MICROPRINTING • LINEMARK™ PATENTED PAPER

AC# 6115544

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12050100836

DATE	BATCH NUMBER	LICENSE NBR
05/01/2012	110368645	CFC1428609

The PLUMBING CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489, FS.
 Expiration date: AUG 31, 2014

LINDO, DEAN-MICHAEL
 DODEC, INC.
 3140 W 84TH ST
 HIALEAH FL 33018

RICK SCOTT
 GOVERNOR

KEN LAWSON
 SECRETARY



State of Florida

*Minority, Women &
Service-Disabled Veteran*

Business Certification

Dodec, Inc

Is certified under the provisions of
287 and 295.187, Florida Statutes for a period from:

01/19/2012 to 01/19/2014

A handwritten signature in black ink, appearing to read 'John P. Miles', is written over a horizontal line.

John P Miles, Secretary

Florida Department of Management Services
Office of Supplier Diversity

THIS IS NOT A BILL



PRINTED WITH ENVIRONMENTALLY FRIENDLY GREEN INKS



FSC
Mixed Sources
Product group from well-managed
forests and other controlled sources
Cert. No. COC-001775
www.fsc.org
© 1996 Forest Stewardship Council

City of Hialeah
Business Tax Receipt

2011-12

No. 236220-8 (OLD-1542-45) Amount: \$ 200.00

The person, firm or corp. listed here has paid the business tax required to engage in or operate the business specified subject to the regulations and restrictions of the City of Hialeah, Florida

Owner: TREVOR PANTRY

Type of Business: Commercial and Institutional Building Construction

DODEC, INC.
3140 W 84 ST #2
HIALEAH, FL 33018

Business Location:

3140 W 84 ST 2

Validating No. : 0000

Expires September 30, 2012

THIS IS NOT A BILL

State of Florida
Board of Professional Engineers



Trevor Orville Pantry, P.E.

IS LICENSED AS A PROFESSIONAL ENGINEER UNDER CHAPTER 471, FLORIDA STATUTES

EXPIRATION: 2/28/2013

P.E. LIC. NO:

AUDIT NO: 228201309763

32021



miamidadc.gov

Sustainability, Planning and Economic Enhancement Department
111 NW 1 Street, 19th Floor
Miami, Florida 33128
T 305-375-3111 F 305-375-3160

CERT. NO: 3950

Approval Date: 05/02/2012 - DBE

ANNUAL ANNIVERSARY: 05/02/2013

May 7, 2012

Mr. Trevor O. Pantry
DODEC, INC.
3140 W 84th St, Bay #2
Hialeah, FL 33018

Dear Mr. Pantry:

Small Business Development (SBD), a division of Sustainability, Planning and Economic Enhancement Department (SPEED) has completed the review of your application and the attachments submitted for certification. Your firm is officially certified as a Disadvantaged Business Enterprise (DBE) in accordance with the State of Florida Unified Certification Program (UCP) approved by the U.S. Department of Transportation (FDOT) in the categories listed below. This certification affords your company the opportunity to participate in contracts throughout the State of Florida with DBE measures.

Your DBE certification requires you to complete a Continuing Eligibility affidavit annually. To ensure timely processing the Continuing Eligibility affidavit is accessible at http://www.miamidadc.gov/sba/library/continuing_eligibility_package.pdf. A hard copy is available upon request and may be sent to you via mail or facsimile. Failure to complete and submit the required affidavit with the required supporting documents on or before your anniversary date may result in the removal of your company from the Florida DBE Unified Certification Program.

If any changes occur within your company during the certified period (such as ownership, address, telephone number, trade category, licensing, technical certification, bonding capacity, or if the business ceases to exist) you are required to notify this department within 30 days in writing. It is of critical importance that the current information regarding your company be maintained. All inquiries or changes related to this certification should be directed to Karla Licona in the Certification Unit.

Should you have questions regarding your firm's certification, Karla Licona will be pleased to assist you.

We look forward to your participation and success in Miami-Dade County's disadvantaged business enterprise programs.

Thank you for doing business with Miami Dade County.

Sincerely,

Shen McGriff, Director
Business Opportunity Support Services
Small Business Development Division
Sustainability, Planning and Economic Enhancement Department

CATEGORIES: (Your firm may bid or participate on contracts only under these categories)
ENGINEERING SERVICES (DBE)
NEW SINGLE-FAMILY HOUSING CONSTRUCTION (EXCEPT OPERATIVE BUILDERS) (DBE)
NEW MULTIFAMILY HOUSING CONSTRUCTION (EXCEPT OPERATIVE BUILDERS) (DBE)
NEW HOUSING OPERATIVE BUILDERS (DBE)
RESIDENTIAL REMODELERS (DBE)



miamidade.gov

Sustainability, Planning and Economic Enhancement Department
111 NW 1 Street, 19th Floor
Miami, Florida 33128
T 305-375-3111 F 305-375-3160

May 7, 2012

Mr. Trevor O. Pantry
DODEC, INC.
3140 W 84th St, Bay #2
Hialeah, FL 33018

CERT. NO: 10646
Approval Date: 05/02/2012 - MICRO/SBE
Expiration Date: 05/31/2015

ANNUAL ANNIVERSARY: 05/02/2013

Dear Mr. Pantry:

Small Business Development (SBD), a division of Sustainability, Planning and Economic Enhancement Department (SPEED) has completed the review of your application and attachments submitted for certification. Your firm is officially certified as a Micro/Small Business Enterprise (MICRO/SBE) in accordance with section 2-8.1.1.1.1 of the Code of Miami Dade County.

This certification is valid for three years provided there are no changes rendering your firm ineligible for certification. You are required to submit a "Continuing Eligibility Affidavit" annually with specific supporting documents on or before your Anniversary Date as listed above. You will be notified in advance of your firm's Anniversary Date. Failure to comply with the said responsibilities may result in immediate action to decertify your firm. Every three years you will receive a full recertification review that may include an onsite investigation; SBD will also notify you accordingly.

If at any time during the certification period, there is a material change in your firm, including, but not limited to ownership, officers, Director, scope of work being performed, daily operations, affiliations with other business (es) or physical location of the firm, you must notify this office in writing within (30) days. Notification should include supporting documentation. You will receive timely instructions from this office as to how you should proceed, if necessary.

Your company is certified in the following categories as listed below, affording you the opportunity to bid and participate on contracts with small business measures. Please note that the categories listed are very general and are used only to assist our customers in searching the directory for certified firms to meet contract needs. The directory for all certified firms can be accessed on the Miami-Dade County SPEED website http://www.miamidade.gov/sba .

Thank you for doing business with Miami Dade County.

Sincerely,

Sheri McGriff, Director
Business Opportunity Support Services
Small Business Development Division
Sustainability, Planning and Economic Enhancement Department

- CATEGORIES: (Your firm may bid or participate on contracts only under these categories)
COMPRESSOR, BARE UNIT (NOT MOUNTED OR POWERED), 15 HP AND LESS (MICRO/SBE)
COMPRESSOR, BARE UNIT (NOT MOUNTED OR POWERED), OVER 15 HP (MICRO/SBE)
COMPRESSOR, BASE OR TANK MOUNTED, ELECTRIC MOTOR OR ENGINE DRIVEN, 15 HP AND LESS AND PARTS (MICRO/SBE)
COMPRESSOR, BASE OR TANK MOUNTED, ELECTRIC MOTOR OR ENGINE DRIVEN, OVER 15 HP AND PARTS (MICRO/SBE)
COMPRESSORS, HIGH PRESSURE, ALL SIZES AND MODELS (MICRO/SBE)



miamidade.gov

Sustainability, Planning and Economic Enhancement Department
111 NW 1 Street, 19th Floor
Miami, Florida 33128
T 305-375-3111 F 305-375-3160

CERT. NO: 746
Approval Date: 05/02/2012 CSBE Level 1
Expiration Date: 05/31/2015

May 7, 2012

Mr. Trevor O. Pantry
DODEC, INC.
3140 W 84th St, Bay #2
Hialeah, FL 33018

ANNUAL ANNIVERSARY: 05/02/2013

Dear Mr. Pantry:

Small Business Development (SBD), a division of Sustainability, Planning and Economic Enhancement Department (SPEED) has completed the review of your application and attachments submitted for certification. Your firm is officially certified as a Community Small Business Enterprise (CSBE) in accordance with section 10-33-02 of the Code of Miami Dade County.

This certification is valid for three years provided there are no changes rendering your firm ineligible for certification. You are required to submit a "Continuing Eligibility Affidavit" annually with specific supporting documents on or before your Anniversary Date as listed above. You will be notified in advance of your firm's Anniversary Date. Failure to comply with the said responsibilities may result in immediate action to decertify your firm. Every three years you will receive a full recertification review that may include an onsite investigation; SBD will also notify you accordingly.

If at any time during the certification period, there is a material change in your firm, including, but not limited to ownership, officers, Director, scope of work being performed, daily operations, affiliations with other business (es) or physical location of the firm, you must notify this office in writing within (30) days. Notification should include supporting documentation. You will receive timely instructions from this office as to how you should proceed, if necessary.

Your company is certified in the following categories as listed below, affording you the opportunity to bid and participate on contracts with small business measures. Please note that the categories listed are very general and are used only to assist our customers in searching the directory for certified firms to meet contract needs. The directory for all certified firms can be accessed on the Miami-Dade County SPEED website http://www.miamidade.gov/sba .

Thank you for doing business with Miami Dade County.

Sincerely,

Sheri McGriff, Director
Business Opportunity Support Services
Small Business Development Division
Sustainability, Planning and Economic Enhancement Department

- CATEGORIES: (Your firm may bid or participate on contracts only under these categories)
HEATING, VENTILATING, AND A/C EQUIPMENT (CSBE)
NEW SINGLE-FAMILY HOUSING CONSTRUCTION (EXCEPT OPERATIVE BUILDERS) (CSBE)
NEW MULTIFAMILY HOUSING CONSTRUCTION (EXCEPT OPERATIVE BUILDERS) (CSBE)
NEW HOUSING OPERATIVE BUILDERS (CSBE)
RESIDENTIAL REMODELERS (CSBE)
INDUSTRIAL BUILDING CONSTRUCTION (CSBE)

AMENDMENT

CITY OF MIAMI GARDENS - PIGGYBACK AGREEMENT

FENCE SERVICES AND PROFESSIONAL CONTRACTORS

This Amendment to the Master Service Agreement entered into utilizing the City of Miami Gardens, Fence Services (Contract No. 11-12-037) and Professional Contractors (Contract No. 11-12-031) is hereby modified as follows:

MSA Section 1.3 - Method of Award (Section 2.3)

Omit the following:

“Competitive quotations will not be required for jobs less than \$1000.”

All other terms and conditions remain unchanged.

A handwritten signature in cursive script that reads "Pamela Katsaris". The signature is written in dark ink and is positioned above the printed name and title.

Pamela Katsaris
Assistant Chief Procurement Officer

