

MALI CONTRACTING CORP

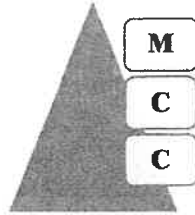
City of Madeira Beach

Request for Proposal (RFP)

RFP#23-10

Code Enforcement Satellite Office

4501 N. Saint Vincent St Tampa Fl 33614
Ph(813)489-3650
malicontractingcorp@gmail.com



MALI CONTRACTING CORP

STATEMENT OF INTEREST AND INTRODUCTION

COVER LETTER

December 06, 2023

City of Madeira Beach
300 Municipal Dr
Madeira Beach, Florida 33708

Sirs:

I am enclosing a resume in hopes that there might be an business with the City of Madeira Beach
I am a Florida Certified Building Contractor from 2018 with more than 20 years' experience in Construction industry.
As licensed holder, owner and Project Manager to another construction company I worked with Pasco County
Facilities Management, City of Dunedin, Tampa-Hillsborough Expressway Authority.

I believe my experience, qualifies me to be considered for the current bid. I look forward to discussing how my skills
can be of value to agency.

I would be pleased if I were given the opportunity to work for you with challenging projects and prove my worth as a
building contractor.

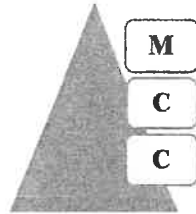
If you should have any questions or would like to grant me an interview, please contact me as your best convenience
to my address above or my e-mail address: malicontractingcorp@gmail.com.

Cordially,

Marisela Linares
CBC1262526 / CGC1534877 / CFC1432513
Mali Contracting Corp
President

INTRODUCTION

4501 N. Saint Vincent St Tampa Fl 33614
Ph(813)489-3650
malicontractingcorp@gmail.com



MALI CONTRACTING CORP

The MALI CONTRACTING CORP consults commercial projects, with a demand for excellence rooted in our foundation.

We believe every project carries with in the unique aspirations of a client that will be expressed through physical structure for many years to come.

With over 27 years of industry experience, we pride ourselves on the value we bring to every project we're on. By creating custom packages for each of our clients, we take the time to analyze your project, utilizing our knowledge of construction and your Development needs, to ensure you're receiving services that will lead to optimal project completion.

"MALI CONTRACTING CORP"

As a Women Minority family-owned and operated business, we extend the meaning of family through our owners, employees, and operations.

Marisela Linares with more than 27 years of experience in the construction industry, her responsibilities include bids preparation, subcontract, construction, scheduling, sub negotiations, expediting, monitoring project schedules, invoicing, punch list completion and project close out. Responsible for all accounting function and financial management of the company including payroll, human resources and taxes. She also oversees the creation and submission of pay application to sub-contractors, distribution of contracts, purchase orders, and dealings with all bonding and insurance matters related to various projects. Marisela brings an impressive background with a Bachelor's of Science in Mechanical Engineering from the University of Oriente Cuba in 1991. Prior to start MALI CONTRACTING CORP, as state certified building contracting since 2018, she was license holder, project manager and supervisor for another construction company understanding the needs of control. She has been working in the design build industry since 1991 serving commercial and industrial construction in Cuba, and as a truss designer for a manufacturing company in Tampa area. Her expertise and knowledge is an invaluable asset to the MALI CONTRACTING CORP team.

4501 N. Saint Vincent St Tampa Fl 33614
Ph(813)489-3650
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STATEMENT OF QUALIFICATIONS

All questions must be answered, and the data given must be clear and comprehensive. This statement must be notarized. Add separate sheets or attachments, as necessary.

1. Name of Contractor: Marisela Linares
2. Name of Business (if different than #1): Mali Contracting Corp
3. Form of Entity: Corporation
4. Permanent Main Office and Mailing addresses and pertinent contact information (phone, email, etc.):
4501 N. Saint Vincent St Tampa FL 33614
5. Date Organized: 08/01/2022
6. Where Organized: Florida
7. How many years have you been engaged in the Marine Dock building under your present name; also, state names and dates of previous business names, if any. N/A
8. In the last five years, has "Contractor" ever been terminated from a contract or project? If so, explain situation.: N/A
9. In the last five years, has Contractor ever been party to litigation related to the Contractor's work? If so, explain situation.: N/A
10. List the most important contracts entered by the Contractor in the last year; identify contracting party and term of contract.: City of Treasure Island 120th & 126th End Street Beautification
11. List your key personnel available for this contract.: Marisela Linares

The City of Madeira Beach reserves the right to request from finalist(s) the latest financial statements as well as to request such additional information as may be reasonably necessary to determine whether the Contractor should be awarded the service contract.


Authorized Signature

12/05/2023

Date Signed

NOTARY

State of: Florida

County of: Hillsborough

Sworn to and subscribed before me this 5 day of December, 2023

Personally Known _____ or Produced Identification DRIVER LICENSE L5E2S4067616
(Specify Type of Identification)

Signature of Notary 

(seal)

My Commission Expires 07/26/2026



YANDRIEL MEJIAS FUENTES
Notary Public
State of Florida
Comm# HH293507
Expires 7/26/2026

MARISELA LINARES, CBC,CGC,CFC,EI

4501 N. ST VINCENT ST TAMPA FL 33614

TEL: (813)489-3650

MAILCONTRACTINGCORP@GMAIL.COM

HTTP://WWW.LINKENDIN.COM/IN/MARISELALINARES

BUILDING CONTRACTOR/ GENERAL CONTRACTOR /MECHANICAL ENGINEER

PROJECT LIST & REFERENCES

Street End Improvements-120th & 126th - City of Treasure Island (Work in progress) Contact J.P. Agrall (727)543-4190

PM & Supervising & License holder (Mali) /Construction of concrete pavement 210 SY and Turf Block Installation 970 SY Contract Value = \$278k/ Scope: Selective demolition, Clearing, Grading, Formwork, Pour, Finishes and Paver installation

Wildwood Park Renovation-Town of Belleair Contact: Ryan Womack (727)804-1895

PM & Supervising & License holder (Mali) /Construction of concrete sidewalk 1595 SF and Curb D 275 LF Contract Value = \$26.5k/ Scope: Clearing, Grading, Formwork, Pour and Finishes

Fire Rescue Burn Building – Spring Hill, FL (Pasco County Facilities Management)Contact: Brittany Russel (727)247-8443

PM & Supervising & License holder (Mali) /Construction of concrete foundation and slab 1792 SF to load Four Stories Containers Building / Contract Value = \$50k/ Scope: Clearing, Grading, Backfill, Formwork ,Reinforcement and Finished for Foundations and Slabs, Metal Base Installation.

Elsie Logan Memorial Park Concession Building – Spring Hill, FL (Pasco County Facilities Management) Contact: George Scheitlin (727)992-1503

High-Rise / PM & Supervising & License holder (QCS)/ Plans & Specs / 2,000 sq. ft. / Contract Value = \$680k / Scopes: Demo old building, New building, Exterior Improvements, Main water line and Septic systems. All site work associated.

Hyde Park at Morrinson Street Aesthetic Improvements - Tampa, FL (Tampa Expressway Authority)Contact : Judith Villegas (813)272-6740 ext 146

PM & Supervising & License holder (QCS) / 20,000 sq. ft. / Contract Value = \$150k / Scopes: Selective clearing and grubbing ,removal and replacement of broken sidewalk, installation of decorative pedestrian gateway structures and walls, painting of existing bridge abutments, and adjustment of irrigation valve boxes.

Duke Energy at Anclote Plant Haul Path/ Transformer area-Holiday FL

PM & Supervising / 4,000 sq. ft. / Contract Value = \$180K/ Scopes: Remove existing asphalt/concrete, Excavation, Backfill, Compact, , Reinforcement and Finishes

Upper Peninsula-Westshore-Tampa Fl (Kimmins) Contact: Dario Muñoz (813)924-8241

PM & Supervising /Plans & Specs / 491,070 sq. ft. / Contract Value = \$814k / Scopes: All Formwork Reinforcement and Finishes for Junction Boxes, Inlets, Curbs, Sidewalks and Driveways.

Hillsborough County Soccer Complex - Tampa, FL

High-Rise / PM & Supervising / Plans & Specs / 662,608 sq. ft. / Contract Value = \$350k / Scopes: All

Formwork ,Reinforcement and Finishes for Foundations, tie beams and Slabs

Fire Training Center, Tampa, FL

PM & Supervising /Construction of two Buildings (One three Stories Containers Building and One Metal Building)7,570 SF/ Contract Value = \$200k/ Scope: All Formwork ,Reinforcement and Finished for Foundations and Slabs, Metal Base Installation and grouting for Steel Supports

Oak and Stone Restaurant, Saint Petersburg, FL

PM & Supervising/Renovation of 7,373 sq ft/ Contract Value = \$73k /Scope: Formwork, Reinforcement and Finishes for New Slab and New Stair

Amazon DTP2, Largo, FL

PM & Supervising /Renovation of 59,102 SF/ Contract Value = \$100k /Scope: Formwork, Reinforcement and Finishing for Retaining Wall, Foundations , Concrete Walls, Dock Leveler Pit and Dock Ramp Slab

Ateromizol Bulk Chemical Facility-Santiago de Cuba, Cuba

Design-Build Bulk Chemical Facility ,Process Steps Involving Reaction, Purification, Extraction, Crystallization, Separation/Filtration, and Drying. Supervising from the Start to Finish Three Story Steel Buildings 60,000 sq ft, Contract Value = \$1000k Foundation, Slab, Column Erection, Steel Erection.

PROPOSALS FORM



Name of "CONTRACTOR" Submitting Proposals Mali Contracting Corp

Name of Person Submitting Proposals Marisela Linares

PROPOSER ACKNOWLEDGMENT

"The undersigned hereby declares that he/she has informed himself/herself fully in regard to all conditions to the work to be done, and that he/she has examined the RFP and Specifications for the work and comments here to attached. The "CONTRACTOR" proposes and agrees, if this submission is accepted, to contract with the "CITY" of Madeira Beach to furnish all necessary materials, equipment, labor, and services necessary to complete the work covered by the RFP and Contract Documents for this Project. The "CONTRACTOR" agrees to accept in full compensation for each item the prices named in the schedules incorporated herein."

BIDDER'S REPRESENTATIONS

In submitting this Bid, Bidder represents that:

- A. Bidder has examined and carefully studied the Bidding Documents, the other related data identified in the Bidding Documents, and the following Addenda, receipt of which is hereby acknowledged.

Addendum No.

Addendum Date

- B. Bidder has visited the Site and become familiar with and is satisfied as to the general, local and Site conditions that may affect cost, progress, and performance of the Work.
 - C. Bidder is familiar with and is satisfied as to all federal, state, and local Laws and Regulations that may affect cost, progress and performance of the Work.
-

- D. Bidder has carefully studied all: (1) reports of explorations and tests of subsurface conditions at the Site and all drawings of physical conditions in or relating to existing surface or subsurface structures at the Site.
- E. Bidder has obtained and carefully studied (or accepts the consequences for not doing so) all additional or supplementary examinations, investigations, explorations, tests, studies and data concerning conditions (surface, subsurface and Underground Facilities) at or contiguous to the Site which may affect cost, progress, or performance of the Work or which relate to any aspect of the means, methods, techniques, sequences, and procedures of construction to be employed by Bidder, including applying the specific means, methods, techniques, sequences, and procedures of construction expressly required by the Bidding Documents to be employed by Bidder, and safety precautions and programs incident thereto.
- F. Bidder does not consider that any further examinations, investigations, explorations, tests, studies, or data are necessary for the determination of this Bid for performance of the Work at the price(s) bid and within the times and in accordance with the other terms and conditions of the Bidding Documents.
- G. Bidder is aware of the general nature of work to be performed by Owner and others at the Site that relates to the Work as indicated in the Bidding Documents.
- H. Bidder has correlated the information known to Bidder, information and observations obtained from visits to the Site, reports and drawings identified in the Bidding Documents, and all additional examinations, investigations, explorations, tests, studies, and data with the Bidding Documents.
- I. The Bidder has given Owner and Architect written notice of all conflicts, errors, ambiguities, or discrepancies that Bidder has discovered in the Bidding Documents, and the written resolution thereof by Architect is acceptable to Bidder.
- J. The Bidding Documents are generally sufficient to indicate and convey understanding of all terms and conditions for the performance of the Work for which this Bid is submitted.
- K. Bidder will submit written evidence of its authority to do business in the state where the Project is located not later than the date of its execution of the Agreement.

Signature  _____

Date 12/05/2023 _____

RFP No. 2023-10 Check if exception(s) or deviation(s) to specifications. Attach separate sheet(s) detailing reason and type for the exception or deviation.

"CONTRACTOR" PROFILE

Mali Contracting Corp
Submitted by (Company Name)

Circle one of the following:

Corporation **Partnership** **Individual** **Joint Venture**

Other Describe: _____

Florida Contractor License Number: CGC1534877, CBC1262526

Expiration Date: August 31, 2024 Unique Entity ID: _____ FEIN: 88-3525704

Office Location: 4501 N. Saint Vincent St Tampa

Number of people in your organization: 4

Length of time the Contractor has been doing business under this name in Florida: 1.5 years.

Length of time your firm has provided services to governmental clients: 1.5

years.

Under what other name(s) has your firm operated: N/A

Has or is your firm currently involved in any formal court proceedings regarding any of your contracts?

YES **NO**

If yes, include a detailed explanation. _____

HOLD HARMLESS AGREEMENT

The Contractor agrees to hold the City of Madeira Beach harmless against all claims for bodily injury, sickness, disease, death or personal injury or damage to property or loss of use resulting therefrom, arising out of the agreement, to the extent that such claims are attributable, in whole or in part, to a negligent act or omission by the Contractor.

The Contractor shall purchase and maintain workers' compensation insurance for all workers' compensation insurance and employers' liability in accordance with Florida Statute Chapter 440.

The Contractor shall also purchase any other coverage required by law for the benefit of employees.

Required insurance shall be documented in Certificates of Insurance and shall be provided to the "CITY" representative requesting the service.

By signature upon this form the Contractor stipulates that he/she agrees to the Hold Harmless Agreement, and to abide by all insurance requirements.

Wali Contracting Corp/Manuela Linares
Contractor/ "CONTRACTOR" Printed Name


Signature

Code Enforcement Satellite Office
Project Name

12/06/23
Date

The effective date of this Hold Harmless Agreement shall be the duration of this project.

**SWORN STATEMENT TO SECTION 287.133(3)(a), FLORIDA
STATUTES, ON PUBLIC ENTITY CRIMES FORM**

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

1. This sworn statement is submitted to the "CITY" of Madeira Beach

By Marisela Dinares

(Print individual's name and title)

for Mali Contracting Corp

(Print name of entity submitting sworn statement)

whose business address is 450 N. Saint Vincent St Tampa FL and (if applicable) its
Federal Employer Identification Number (FEIN) is 88-3525704

2. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any bid or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
4. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
- A predecessor or successor of a person convicted of a public entity crime; or
 - An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
 - I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.
 - Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement (indicate which statement applies).

Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

_____The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime after July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted "CONTRACTOR" list. (Attach a copy of the final order)

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

Authorized Signature

Date Signed 12/05/2023

State of: Florida

County of: Hillsborough

Sworn to and subscribed before me this 5 day of December, 2023

Personally Known _____ or Produced Identification Driver license #LS62 84069661 0

(Specify Type of Identification)

Signature of Notary

My Commission Expires 07/26/2026

(seal)



YANDRIEL MEJIAS FUENTES
Notary Public
State of Florida
Comm# HH293507
Expires 7/26/2026

This document must be completed and returned with your submission.

IMMIGRATION AFFIDAVIT CERTIFICATION

This Affidavit is required and should be signed, notarized by an authorized principal of the firm, and submitted with formal Invitations to Bid (ITB's) and Request for Proposals (RFP) submittals. Further, Consultants/Bidders are required to enroll in the E-Verify program, and provide acceptable evidence of their enrollment, at the time of the submission of the Consultant/Bidder's proposal. Acceptable evidence consists of a copy of the properly completed E-Verify Company Profile page or a copy of the fully executed E-Verify Memorandum of Understanding for the company. Failure to include this Affidavit and acceptable evidence of enrollment in the E-Verify program may deem the Consultant/Bidder's proposal as nonresponsive.

The City of Madeira Beach will not intentionally award City contracts to any Consultant who knowingly employs unauthorized workers, constituting a violation of the employment provision contained in 8 U.S.C. Section 1324 a(e) Section 274A(e) of the Immigration and Nationality Act ("INA"). The City of Madeira Beach may consider the employment by any Consultant of unauthorized aliens a violation of Section 274A (e) of the INA. Such Violation by the recipient of the Employment Provisions contained in Section 274A(e) of the INA shall be grounds for unilateral termination of the contract by the City of Madeira Beach.

Consultant attests that they are fully compliant with all applicable immigration laws (specifically to the 1986 Immigration Act and subsequent Amendment(s)) and agrees to comply with the provisions of the Memorandum of Understanding with E-Verify and to provide proof of enrollment in The Employment Eligibility Verification System (E-Verify), operated by the Department of Homeland Security in partnership with the Social Security Administration at the time of submission of the Consultant/Bidder's proposal.

Company Name: Mali Contracting Corp
Print Name: Mariela Dinares Title: _____
Signature: _____ Date: 12/05/2023
State of: Florida
County of: Hillsborough
Sworn to and subscribed before me this 5 day of December, 2023

Personally Known _____ or Produced Identification Driver License L5625410686610
(Specify Type of Identification)

Signature of Notary _____
My Commission Expires 07/26/2025

(seal)



YANDRIEL MEJIAS FUENTES
Notary Public
State of Florida
Comm# HH293507
Expires 7/26/2025

The signee of this affidavit guarantees, as evidenced by the affidavit required herein, the truth and accuracy of this affidavit to interrogatories hereinafter made. This document must be completed and returned with your submission.

BID TABULATION FORM

PROPOSED TOTAL BASE CONTRACT PRICE (Amount Written in numbers) \$ 219,684.00

PROPOSED TOTAL BASE CONTRACT PRICE (Amount written in words) \$ Two hundred
nineteen thousands six hundred eighty four

Signature:  _____

Printed Name: Maisela Soares _____

Date: 12/06/2023

EXHIBIT A

PUBLIC CONTRACTING AND ENVIRONMENTAL CRIMES CERTIFICATION

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS. This sworn statement is submitted to the CITY OF MADEIRA BEACH by _____

[print individual's name and title]

for Mali Contracting Corp
[print name of entity submitting sworn statement]

whose business address is: 4501 N. Saint Vincent St Tampa FL

and Federal Employer Identification Number (FEIN) is 88-3525704 if the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: _____

I understand that no person or entity shall be awarded or receive a City contract for public improvements, procurement of goods or services (including professional services) or a City lease, franchise, concession, or management agreement, or shall receive a grant of City monies unless such person or entity has submitted a written certification to the City that it has not:

1. been convicted of bribery or attempting to bribe a public officer or employee of the city, the State of Florida, or any other public entity, including, but not limited to the Government of the United States, any state, or any local government authority in the United States, in that officer's or employee's official capacity; or
2. been convicted of an agreement or collusion among bidders or prospective bidders in restraint of freedom of competition, by agreement to bid a fixed price, or otherwise; or
3. been convicted of a violation of an environmental law that, in the sole opinion of the City's Project Manager, reflects negatively upon the ability of the person or entity to conduct business in a responsible manner; or
4. made an admission of guilt of such conduct described in items (1), (2) or (3) above, which is a matter of record, but has not been prosecuted for such conduct, or has made an admission of guilt of such conduct, which is a matter of record, pursuant to formal prosecution. An admission of guilt shall be construed to include a plea of nolo contendere; or
5. where an officer, official, agent or employee of a business entity has been convicted of or has admitted guilt to any of the crimes set forth above on behalf of such an entity and pursuant to the direction or authorization of an official thereof (including the person committing the offense, if he is an official of the business entity), the business shall be chargeable with the conduct herein. above set forth. A business entity shall be chargeable with the conduct of an affiliated entity, whether wholly owned, partially owned, or one which has common ownership or a common Board of Directors. For purposes of this Form, business entities are affiliated if, directly or indirectly, one business entity controls or has the power to control another business entity, or if an individual or group of individuals controls or has the power to control both entities. Indicia of control shall include, without limitation, interlocking management or ownership, identity of interests among family members, shared organization of a business entity following the ineligibility of a business entity under this Article, or using substantially the same management, ownership, or principles as the ineligible entity.

Any person or entity who claims that this Article is inapplicable to him/her/it because a conviction or judgment has been reversed by a court of competent jurisdiction, shall prove the same with documentation satisfactory to the City Manager. Upon presentation of such satisfactory proof, the person or entity shall be allowed to contract with the City.

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CITY IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT ANY CONTRACT OR BUSINESS TRANSACTION SHALL PROVIDE FOR SUSPENSION OF PAYMENTS, OR TERMINATION, OR BOTH, IF THE CONTRACTING OFFICER OR THE CITY ADMINISTRATOR DETERMINES THAT SUCH PERSON OR ENTITY HAS MADE FALSE CERTIFICATION.

Signatory Requirement. In the case of a corporation, this affidavit shall be executed by the corporate president. In the case of a partnership, this affidavit shall be executed by the general partner(s). In the case of a business entity other than a partnership or a corporation, this affidavit shall be executed by an authorized agent of the entity or the individual.

Authorized Signature

Date Signed

12/05/2023

State of: Florida

County of: Hillsborough

Sworn to and subscribed before me this 5 day of December, 2023

Personally Known _____ or Produced Identification Driver License PL562546686C10

(Specify type of Identification)

Signature of Notary

My Commission Expires 07/26/2026



YANDRIEL MEJIAS FUENTES
Notary Public
State of Florida
Comm# HH293507
Expires 7/26/2026

EXHIBIT B

DRUG FREE WORKPLACE CERTIFICATION

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS.

This sworn statement is submitted to the City of Madeira Beach by Marisela Linares

for Mali Contracting Corp [print name of entity submitting sworn statement]

whose business address is: 4501 N. Saint Vincent St and (if

applicable) its Federal Employer Identification Number (FEIN) is 88-3525704 (If the entity has no FEIN,

include the Social Security Number of the individual signing this sworn statement: _____)

I understand that no person or entity shall be awarded or receive a City contract for public improvements, procurement of goods or services (including professional services) or a City lease, franchise, concession, or management agreement, or shall receive a grant of City monies unless such person or entity has submitted a written certification to the City that it will provide a drug free workplace by:

Providing a written statement to each employee notifying such employee that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance as defined by §893.02(4), Florida Statutes, as the same may be amended from time to time, in the person's or entity's workplace is prohibited specifying the actions that will be taken against employees for violation of such prohibition. Such written statement shall inform employees about:

- (i) the dangers of drug abuse in the workplace.
 - (ii) the person's or entity's policy of maintaining a drug-free environment at all its workplaces, including but not limited to all locations where employees perform any task relating to any portion of such contract, business transaction or grant.
 - (iii) any available drug counseling, rehabilitation, and employee assistance programs; and
 - (iv) the penalties that may be imposed upon employees for drug abuse violations.
- (2) Requiring the employee to sign a copy of such written statement to acknowledge his or her receipt of same and advice as to the specifics of such policy. Such person or entity shall retain the statements signed by its employees. Such person or entity shall also post in a prominent place at all of its workplaces a written statement of its policy containing the foregoing elements (i) through (iv).
- (3) Notifying the employee in the statement required by subsection (1) that as a condition of employment the employee will:
- (i) abide by the terms of the statement; and
 - (ii) notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such a conviction.
- (4) Notifying the City within ten (10) days after receiving notice under subsection (3) from an employee or otherwise receiving actual notice of such conviction.
- (5) Imposing appropriate personnel action against such employee up to and including termination; or requiring such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency.
- (6) Making a good faith effort to continue to maintain a drug free workplace through implementation of sections (1) through (5) stated above.

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CITY OF MADEIRA BEACH IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT ANY CONTRACT OR BUSINESS TRANSACTION SHALL PROVIDE FOR SUSPENSION OF PAYMENTS, OR TERMINATION, OR BOTH, IF THE CITY DETERMINES THAT:

- (1) Such person or entity has made false certification.
- (2) Such person or entity violates such certification by failing to carry out the requirements of sections (1), (2), (3), (4), (5), or (6) or subsection 3-101(7)(B); or
- (3) Such a number of employees of such person or entity have been convicted of violations occurring in the workplace as to indicate that such person or entity has failed to make a good faith effort to provide a drug free workplace as required by subsection 3-101(7)(B).

Signatory Requirement. In the case of a corporation, this affidavit shall be executed by the corporate president. In the case of a partnership, this affidavit shall be executed by the general partner(s). In the case of a business entity other than a partnership or a corporation, this affidavit shall be executed by an authorized agent of the entity or the individual.

Authorized Signature

Date Signed

State of: Florida

County of: Hillsborough

Sworn to and subscribed before me this 5 day of December, 2023

Personally Known _____ or Produced Identification Driver License LSG25-10686610

(Specify Type of Identification)

Signature of Notary

My Commission Expires 07/26/2026



YANDRIEL MEJAS FUENTES
Notary Public
State of Florida
Comm# HH293507
Expires 7/26/2026



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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



LINARES, MARISELA

MALI CONTRACTING CORP
4501 N SAINT VINCENT ST
TAMPA FL 33614

LICENSE NUMBER: CBC1262526

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com



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.



Ron DeSantis, Governor

Melanie S. Griffin, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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



LINARES, MARISELA

MALI CONTRACTING CORP
4501 N SAINT VINCENT ST
TAMPA FL 33614

LICENSE NUMBER: CGC1534877

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com

ISSUED: 10/17/2023

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Ron DeSantis, Governor

Melanie S. Griffin, Secretary



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

CONSTRUCTION INDUSTRY LICENSING BOARD
THE PLUMBING CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES



LICENSE NUMBER: CFC1432513

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com

ISSUED: 11/21/2023

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/19/2023

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 James Insurance Solutions 2100 5th Ave N St. Petersburg FL 33713		CONTACT NAME: Isabelle James PHONE (A/C, No, Ext): 727-384-0096 FAX (A/C, No): 727-347-2282 E-MAIL ADDRESS: IZABELLE@JAMESINSURANCESOLUTIONS.COM																			
INSURED MALI CONTRACTING CORP 4501 N St Vincent St Tampa FL 33614-6669		INSURER(S) AFFORDING COVERAGE <table border="1"> <tr><td>INSURER A :</td><td>Berkshire Hathaway Direct Insurance Company</td><td>10391</td></tr> <tr><td>INSURER B :</td><td>Progressive</td><td>24260</td></tr> <tr><td>INSURER C :</td><td>National Liability & Fire Insurance Company</td><td>20052</td></tr> <tr><td>INSURER D :</td><td>Scottsdale Insurance Company</td><td>41297</td></tr> <tr><td>INSURER E :</td><td></td><td></td></tr> <tr><td>INSURER F :</td><td></td><td></td></tr> </table>		INSURER A :	Berkshire Hathaway Direct Insurance Company	10391	INSURER B :	Progressive	24260	INSURER C :	National Liability & Fire Insurance Company	20052	INSURER D :	Scottsdale Insurance Company	41297	INSURER E :			INSURER F :		
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INSURER E :																					
INSURER F :																					

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC OTHER:	Y	N98P694848	4/13/2023	4/13/2024	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ Included GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMPIOP AGG \$ 4,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	Y	974105066	10/6/2023	10/6/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N9WC697555	4/13/2023	4/13/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Builders Risk	Y	CPS7883756	10/18/2023	10/18/2024	\$144,835

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

CERTIFICATE HOLDER Pasco County Board of County Commissioners 7536 State St New Port Richey FL 34654-5528	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 <i>Isabelle James</i>
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2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000060683

Entity Name: MALI CONTRACTING CORP

Current Principal Place of Business:

4501 N SAINT VINCENT ST
TAMPA, FL 33614

Current Mailing Address:

4501 N SAINT VINCENT ST
TAMPA, FL 33614 UN

FEI Number: 88-3525704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINARES, MARISELA
4501 N SAINT VINCENT ST
TAMPA, FL 33614 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LINARES, MARISELA
Address 4501 N SAINT VINCENT ST
City-State-Zip: TAMPA FL 33614

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARISELA LINARES

PRESIDENT

01/24/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Electronic Articles of Incorporation
For**

P22000060683
FILED
August 01, 2022
Sec. Of State
Klovelace

MALI CONTRACTING CORP

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

MALI CONTRACTING CORP

Article II

The principal place of business address:

4501 N SAINT VINCENT ST
TAMPA, FL. UN 33614

The mailing address of the corporation is:

4501 N SAINT VINCENT ST
TAMPA, FL. UN 33614

Article III

The purpose for which this corporation is organized is:

CONSTRUCTION INDUSTRY

Article IV

The number of shares the corporation is authorized to issue is:

1

Article V

The name and Florida street address of the registered agent is:

MARISELA LINARES
4501 N SAINT VINCENT ST
TAMPA, FL. 33614

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: MARISELA LINARES

P22000060683
FILED
August 01, 2022
Sec. Of State
Klovelace

Article VI

The name and address of the incorporator is:

MARISELA LINARES
4501 N SAINT VINCENT ST

TAMPA, FL 33614

Electronic Signature of Incorporator: MARISELA LINARES

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
MARISELA LINARES
4501 N SAINT VINCENT ST
TAMPA, FL. 33614 US

Article VIII

The effective date for this corporation shall be:

07/31/2022