

DOF CREATIONS, LLC Response

Pricing unsealed at May 19, 2026 2:34 PM

CONTACT INFORMATION

Company

DOF CREATIONS, LLC

Email

carley@dofcreations.com

Contact

Carley Stepp

Address

7320 Fletcher Ave
Tampa, FL 33637

Phone

(360) 850-7110

Website

<https://dofcreations.com/contact-us/>

Submission Date

May 19, 2026 11:58 AM (Eastern Time)

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. CONFIRMATION TO BIND

1.1. I certify that I have read, understood and agree to the terms in this solicitation, and that I am authorized to submit this response on behalf of my company.*

☒ Confirmed

☒ Pass ☐ Fail

2. CERTIFICATION OF INSURANCE COMPLIANCE AND INTENT TO PROCURE REQUIRED COVERAGE

NOTE: Vendors are not required to purchase any additional insurance in order to submit a bid. However, they must certify that they either currently hold, or are able and willing to obtain, all required insurance coverages, endorsements, and limits prior to award and execution of the contract.

2.1. I certify that, if awarded this contract, I will be required to obtain and maintain all insurance policies as detailed in the INSURANCE REQUIREMENTS Section of this solicitation before any work may commence, and throughout the life of the contract.*

☒ Confirmed

☒ Pass ☐ Fail

2.2. Do you confirm that you will only use insurance carriers licensed to do business in the State of Florida and rated no less than "A" as to management, and no less than "Class VI" as to financial strength by A.M. Best, and that you understand all endorsements required (e.g., Additional Insured, Waiver of Subrogation, etc.) must be included?*

Yes

☒ Pass ☐ Fail

2.3. Do you currently carry insurance policies that meet or exceed the minimum requirements outlined in the INSURANCE REQUIREMENTS section of this solicitation?*

Yes

☒ Pass ☐ Fail

2.3.1. Please upload your current certificate(s) of insurance that demonstrate compliance with the insurance requirements outlined in this solicitation.*

☒ Pass ☐ Fail

 [insruance.pdf](#)

2.4. Do you believe you are exempt from one or more insurance requirements (e.g., Workers' Compensation)?*

No

☒ Pass ☐ Fail

2.5. Do you plan on using subcontractors for this project?*

No

☒ Pass ☐ Fail

3. PROJECT DOCUMENTS

3.1. PROPOSERS BACKGROUND INFORMATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Proposers_Background_Information_Form_\(1\).xlsx](#)

 [Proposers_Background_Information_Form_\(1\).xlsx](#)

4. SWORN STATEMENT ON PUBLIC ENTITY CRIMES UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a)

4.1. SWORN STATEMENT ON PUBLIC ENTITY CRIMES FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Sworn_Statement_on_Public_Entity_Crimes.pdf](#)

 [Sworn_Statement_on_Public_Entity_Crimes.pdf](#)

4.2. Public Entity Crimes Status*

☒ Pass ☐ Fail

■ Which option did you select on the Sworn Statement on Public Entity Crimes Form:

- A) Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
- B1) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. (Please attach a copy of the final order.)
- B2) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. (Please attach a copy of the final order.)
- B3) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND The person or affiliate has not been placed on the convicted vendor list. (Please describe any action taken by or pending with the Department of General Services.)

A) No convictions.

4.3. Did you select option B1 or B2 above?*

☒ Pass ☐ Fail

No

4.4. Did you select option B3 above?*

☒ Pass ☐ Fail

No

5. DRUG-FREE WORKPLACE CERTIFICATION

5.1. VENDOR DRUG FREE WORKPLACE CERTIFICATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Vendor_Drug-Free_Workplace_Certification_Form.pdf](#)

 [Vendor_Drug-Free_Workplace_Certification_Form.pdf](#)

5.2. Drug-Free Status*

☒ Pass ☐ Fail

Complies fully.

6. STANDARD DOCUMENTS

The following documents are standard documents that the City generally requires for every solicitation. As a result, we recommend vendors to keep these documents updated and readily available so that they can be easily uploaded for each project that the vendor would like to participate in. In the event that the City does not have one of the forms or documents listed below for your company, the City may reach out to your company after the bid has closed to obtain the document(s).

6.1. NON-COLLUSIVE AFFIDAVIT*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Non-Collusive_Affidavit.pdf](#)

 [Non-Collusive_Affidavit.pdf](#)

6.2. SCRUTINIZED COMPANY CERTIFICATION*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Scrutinized_Company_Certification.pdf](#)

 [Scrutinized_Company_Certification.pdf](#)

6.3. E-VERIFY SYSTEM CERTIFICATION*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.
2. Effective January 1, 2021, pursuant to Section 448.095, Florida Statutes, the City may not enter into a contract with a vendor/contractor/subcontractor unless that vendor/contractor/subcontractor is registered with and uses the E-Verify system administered by the U.S. Department of Homeland Security ("DHS").
3. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.

 [E-Verify_System_Certification_Statement.pdf](#)

 [E-Verify_System_Certification_Statement.pdf](#)

6.4. HUMAN TRAFFICKING AFFIDAVIT*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Human_Trafficking_Affidavit.pdf](#)

 [Human_Trafficking_Affidavit.pdf](#)

7. VENDOR REGISTRATION

7.1. Do you currently have a City of Pembroke Pines Vendor Number registered in the PaymentWorks System?*

☒ Pass ☐ Fail

- The City of Pembroke Pines utilizes OpenGov as its e-Procurement platform for solicitation and bid submission purposes. However, please be advised that **vendor registration for onboarding and processing payments is handled separately** through the City's Accounts Payable Division using **PaymentWorks**, a secure online vendor management platform.
- All vendors that will be submitting invoices and requiring payments from the City are required to register on the PaymentWorks platform. If the vendor is not currently registered with the City via PaymentWorks and does not have a Vendor Number, the City will have to invite the vendor to register.
- For formal solicitations such as this project, the Procurement Department will send PaymentWorks registration invitations to vendor(s) who are under active consideration for award. Please be aware that not all vendors who submit proposals will receive an invitation, in order to manage system usage and avoid onboarding vendors who are unlikely to receive payments from the City.
- Invitations will typically be sent to the contact listed on the submitted Vendor Information Form.

Yes

7.1.1. What is your Vendor Number?*

☒ Pass ☐ Fail

7679

7.2. VENDOR INFORMATION FORM*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.

 [Vendor_Information_Form.pdf](#)

 [Vendor_Information_Form.pdf](#)

7.3. FORM W-9 (REVISED MARCH 2024)*

☒ Pass ☐ Fail

1. Please download the attached document, complete all required fields, and upload the completed form here.
2. Note - Please use the March 2024 version of the form as previously dated versions of this form may delay the processing of any payments to the selected vendor.

 [Form_W-9_\(Rev_March_2024\).pdf](#)

 [W9_Update.pdf](#)

8. OPTIONAL DOCUMENTATION

8.1. TRADE SECRETS

1. The Proposer's response to this solicitation is a public record pursuant to Florida law, which is subject to disclosure by the City under the State of Florida Public Records Law, Florida Statutes Chapter 119.07 ("Public Records Law"). The City shall permit public access to all documents, papers, letters or other material submitted in connection with this solicitation and the Contract to be executed for this solicitation, subject to the provisions of Chapter 119.07 of the Florida Statutes.
2. Any language contained in the Proposer's response to the solicitation purporting to require confidentiality of any portion of the Proposer's response to the solicitation, except to the extent that certain information is in the City's opinion a Trade Secret pursuant to Florida law, shall be void. If a Proposer submits any documents or other information to the City which the Proposer claims is Trade Secret information and exempt from Florida Statutes Chapter 119.07 ("Public Records Laws"), the Proposer shall clearly designate that it is a Trade Secret and that it is asserting that the document or information is exempt. The Proposer must specifically identify the exemption being claimed under Florida Statutes 119.07. The City shall be the final arbiter of whether any information contained in the Proposer's response to the solicitation constitutes a Trade Secret.
3. EXCEPT FOR CLEARLY MARKED PORTIONS THAT ARE BONA FIDE TRADE SECRETS PURSUANT TO FLORIDA LAW, DO NOT MARK YOUR RESPONSE TO THE SOLICITATION AS PROPRIETARY OR CONFIDENTIAL. DO NOT MARK YOUR RESPONSE TO THE SOLICITATION OR ANY PART THEREOF AS COPYRIGHTED. ALL DOCUMENTS THAT THE FIRM PURPORTS TO BE CONFIDENTIAL, PROPRIETARY OR A TRADE SECRET SHALL BE UPLOADED TO THE OPENGOV WEBSITE AS A SEPARATE ATTACHMENT, IN THIS SECTION, CLEARLY IDENTIFYING THE EXEMPTION BEING CLAIMED UNDER FLORIDA STATUTES 119.07.
4. The city's determination of whether an exemption applies shall be final, and the proposer agrees to defend, indemnify, and hold harmless the city and the city's officers, employees, and agent, against any loss or damages incurred by any person or entity as a result of the city's treatment of records as public

records.

No response submitted

8.2. FINANCIAL STATEMENTS

1. The City is **NOT** requesting the vendor to submit any financial statements for this project and prefers if the vendor does not submit financial statements. In addition, if the City needs a copy of the vendor's financial statements, the City can contact the vendor after the bid due date to request those documents. However, if the vendor does submit the financial statements, they should be uploaded in this section.
2. Any claim of confidentiality on financial statements must be asserted at the time of submittal. The firm must identify the specific statute that authorizes the exemption from the Public Records Law. Please note that the financial statement exemption provided for in Section 119.071(1)c, Florida Statutes only applies to submittals in response to a solicitation for a "public works" project.

No response submitted

8.3. ADDITIONAL INFORMATION

☒ Pass ☐ Fail

1. Please provide any additional information that you deem necessary to complete your proposal in this section, if it has not been requested in another section.

 [DOF_Aboout_Us_2026.pdf](#)

 [Cisco_Pembroke_2026_DOF_Quote.pdf](#)

8.4. PROFESSIONAL LICENSES

☒ Pass ☐ Fail

1. If applicable, please upload any professional licenses that may be required to perform the services outlined in the solicitation.

 [Cert_page.pdf](#)

9. VENDOR CLASSIFICATION

9.1. Is your firm a Local Pembroke Pines Vendor (LPPV) and Local Broward County Vendor (LBCV)?*

☐ Pass ☐ Fail

1. The evaluation of competitive bids is subject to section 35.36 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to local businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with either of the following objective criteria as of the bid or proposal submission date stated in the solicitation. A local business shall be defined as:
 1. "Local Pembroke Pines Vendor" shall mean a business entity which has maintained a permanent place of business with full-time employees within the City limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the City of Pembroke Pines, **OR**;
 2. "Local Broward County Vendor" shall mean or business entity which has maintained a permanent place of business with full-time employees within the Broward County limits for a minimum of one (1) year prior to the date of issuance of a bid or proposal solicitation. The permanent place of business may not be a post office box. The business location must actually distribute goods or services from that location. In addition, the business must have a current business tax receipt from the Broward County or the city within Broward County where the business resides.
2. A preference of five percent (5%) of the total evaluation point, or five percent (5%) of the total price, shall be given to the Local Pembroke Pines Vendor(s); A preference of two and a half percent (2.5%) of the total evaluation point for local, or two and a half percent (2.5%) of the total price, shall be given to the Local Broward County Vendor(s).

No

9.2. Is your firm a Veteran Owned Small Business (VOSB)?*

☒ Pass ☐ Fail

1. The evaluation of competitive bids is subject to section 35.37 of the City's Procurement Procedures which, except where contrary to federal and state law, or any other funding source requirements, provides that preference be given to veteran owned small businesses. To satisfy this requirement, the vendor shall affirm in writing its compliance with the following objective criteria as of the bid or proposal submission date stated in the solicitation.
2. A preference of two and a half percent (2.5%) of the total evaluation point, or two and a half percent (2.5%) of the total price, shall be given to the Veteran Owned Small Business (VOSB).

No

9.3. Is your firm a Minority-Owned Business Enterprise (MBE)?*

☒ Pass ☐ Fail

Yes

9.3.1. Please indicate the classification of your Minority-Owned Business Enterprise (MBE)*

☒ Pass ☐ Fail

African-American MBE

9.3.2. MBE Certification Documentation*

☒ Pass ☐ Fail

1. Upload your MBE Certification Documentation here, preferably with the State of Florida's Office of Supplier Diversity. If you have multiple MBE certifications, please combine them into one (1) document and upload.

 [Minority_Woman_Update_2026.pdf](#)

9.4. Is your firm a Woman-Owned Business Enterprise (WBE)?*

☒ Pass ☐ Fail

Yes

9.4.1. WMBE Certification Documentation*

☒ Pass ☐ Fail

1. Upload your WMBE Certification Documentation here, preferably with the State of Florida's Office of Supplier Diversity. If you have multiple WMBE certifications, please combine them into one (1) document and upload.

 [Minority Woman Update 2026.pdf](#)

9.5. Is your firm a HubZone Business / Labor Surplus Area Firm?*

☒ Pass ☐ Fail

No

9.6. Is your firm a Broward County Small Business Enterprise (SBE)?*

☒ Pass ☐ Fail

No

9.7. Is your firm a Broward County Business Enterprise (CBE)?*

☒ Pass ☐ Fail

No

9.8. Is your firm a Broward County Disadvantaged Business Enterprise (DBE)?*

☒ Pass ☐ Fail

No

9.9. Does your firm have a Vendor Classification that was not listed above?*

☒ Pass ☐ Fail

No

PRICE TABLES

Line Item	Part #	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor N...
1.0	N9K-C9504-B3-G	Nexus 9504 Chassis Bundle (1 Sup, 2 SC, 4 PS, 4 FM-G, 3 Fan)	2	Ea	\$40,910.23	\$81,820.46	
1.1	CON-L1NCO-N9KC954G	CX LEVEL 1 8X7XNCDOSNexus 9504 Chassis Bundle 1 Sup 2 SC Duration: 3.00 Years	2	Ea	\$40,855.50	\$81,711.00	
1.2	MODE-NXOS	Mode selection between ACI and NXOS	2	Ea	\$0.00	\$0.00	
1.3	NXOS-CS-10.6.1F	Nexus 9300, 9500, 9800 NX-OS SW 10.6.1 (64bit) Cisco Silicon	2	Ea	\$0.00	\$0.00	
1.4	DCN-OTHER	Select if this product will NOT be used for AI Applications	2	Ea	\$0.00	\$0.00	
1.5	NXOS-SLP-INFO-9K	Info PID for Smart Licensing using Policy for N9K	2	Ea	\$0.00	\$0.00	
1.6	N9K-SC-A	System Controller for Nexus 9500	4	Ea	\$0.00	\$0.00	
1.7	N9K-C9504-FM-G	Nexus 9500 4-slot chassis 400G cloud scale fabric module	8	Ea	\$0.00	\$0.00	
1.8	N9K-C9504-FAN2	Fan Tray V2 for Nexus 9504 chassis, Port-side Intake	6	Ea	\$0.00	\$0.00	
1.9	N9K-C9504-FM-G	Nexus 9500 4-slot chassis 400G cloud scale fabric module	2	Ea	\$9,521.50	\$19,043.00	
1.10	CAB-AC-20A-SG-C20	N. AMERICA CABINET JUMPER PDU, IEC C20/Saf-D-Grid 250VAC 20A	16	Ea	\$0.00	\$0.00	
1.11	N9K-C9500-ACK	Nexus 9500 Accessory Kit	2	Ea	\$0.00	\$0.00	
1.12	N9K-C9504-RMK	Nexus 9504 Rack Mount Kit	2	Ea	\$0.00	\$0.00	
1.13	N9K-C9500-LC-	Nexus 9500 Linecard slot cover	4	Ea	\$0.00	\$0.00	

Line Item	Part #	Description	Quantity	Unit of Measure	Unit Cost	Total	Vendor Notes
1	N9K-C9504-B3-G	Nexus 9504 Chassis Bundle (1 Sup, 2 SC, 4 PS, 4 FM-G, 3 Fan)	2	Ea	\$40,910.23	\$81,820.46	
1.1	CON-L1NCO-N9KC954G	CX LEVEL 1 8X7XNCDOSNexus 9504 Chassis Bundle 1 Sup 2 SC Duration: 3.00 Years	2	Ea	\$40,855.50	\$81,711.00	
1.2	MODE-NXOS	Mode selection between ACI and NXOS	2	Ea	\$0.00	\$0.00	
1.3	NXOS-CS-10.6.1F	Nexus 9300, 9500, 9800 NX-OS SW 10.6.1 (64bit) Cisco Silicon	2	Ea	\$0.00	\$0.00	
1.4	DCN-OTHER	Select if this product will NOT be used for AI Applications	2	Ea	\$0.00	\$0.00	
1.5	NXOS-SLP-INFO-9K	Info PID for Smart Licensing using Policy for N9K	2	Ea	\$0.00	\$0.00	
1.6	N9K-SC-A	System Controller for Nexus 9500	4	Ea	\$0.00	\$0.00	
1.7	N9K-C9504-FM-G	Nexus 9500 4-slot chassis 400G cloud scale fabric module	8	Ea	\$0.00	\$0.00	
1.8	N9K-C9504-FAN2	Fan Tray V2 for Nexus 9504 chassis, Port-side Intake	6	Ea	\$0.00	\$0.00	
1.9	N9K-C9504-FM-G	Nexus 9500 4-slot chassis 400G cloud scale fabric module	2	Ea	\$9,521.50	\$19,043.00	
1.1	CAB-AC-20A-SG-C20	N. AMERICA CABINET JUMPER PDU, IEC C20/Saf-D-Grid 250VAC 20A	16	Ea	\$0.00	\$0.00	
1.11	N9K-C9500-ACK	Nexus 9500 Accessory Kit	2	Ea	\$0.00	\$0.00	
1.12	N9K-C9504-RMK	Nexus 9504 Rack Mount Kit	2	Ea	\$0.00	\$0.00	
1.13	N9K-C9500-LC-CV	Nexus 9500 Linecard slot cover	4	Ea	\$0.00	\$0.00	
1.14	N9K-C9504-FAN-PWR	Nexus 9504 Fabric Module Blank with Fan Power Connector	2	Ea	\$0.00	\$0.00	
1.15	N9K-SELECT-SUP-B+	PID to Upgrade Supervisor : N9K-SUP-B+	2	Ea	\$3,669.31	\$7,338.62	
1.16	N9K-SUP-B+	Supervisor B+ for Nexus 9500	2	Ea	\$0.00	\$0.00	
1.17	N9K-SUP-B+	Supervisor B+ for Nexus 9500	2	Ea	\$14,526.53	\$29,053.06	
1.18	N9K-X97160YC-EX	Nexus 9500 NX-OS linecard, 48p 10G/25G with 4p 100G QSFP28	4	Ea	\$9,496.44	\$37,985.76	
1.19	N9K-SELECT-C95PUV2	PID to Upgrade Universal Power Supply: N9K-PUV2-3000W-B	8	Ea	\$1,018.23	\$8,145.84	
1.2	N9K-PUV2-3000W-B	Nexus 9500 3150W Universal PS, Dual Input, Port-side Intake	8	Ea	\$0.00	\$0.00	
1.21	C1P1TN9500M4-3Y	DCN Premier Term N9500 M4, 3Y	2	Ea	\$31,027.59	\$62,055.18	
1.22	SVS-L1N9KP-95M4-3Y	Cisco Support Enhanced for DCN Premier Term N9500 M4, 3Y	2	Ea	\$0.00	\$0.00	
1.23	DCN-ADOPT-BAS	Nexus(DCN) - Virtual adopt session	2	Ea	\$0.00	\$0.00	
1.24	SW-OTHER	Select if this product will NOT be used for AI Applications	2	Ea	\$0.00	\$0.00	
2	QSFP-100G-SR1.2=	100G SR1.2 BiDi QSFP Transceiver, LC, 100m OM4 MMF	4	Ea	\$539.02	\$2,156.08	
		Total				\$329,309.00	



THE HARTFORD
BUSINESS SERVICE CENTER
3600 WISEMAN BLVD
SAN ANTONIO TX 78251

August 14, 2025

For Informational Purposes
7320 E FLETCHER AVE
TAMPA FL 33637

Account Information:

Policy Holder Details :	DOF Creations LLC
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Contact Us

Need Help?

Chat online or call us at
(866) 467-8730.

We're here Monday - Friday.

Enclosed please find a Certificate Of Insurance for the above referenced Policyholder. Please contact us if you have any questions or concerns.

Sincerely,
Your Hartford Service Team



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/14/2025

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 PARADISO FINANCIAL & INS SRVC LLC 02026816 8 EAST MAIN STREET STAFFORD SPRINGS CT 06076	CONTACT NAME:		
	PHONE (860) 684-5270 (A/C, No, Ext):	FAX (860) 851-9564 (A/C, No):	
	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		
	NAIC#		
INSURED DOF CREATIONS LLC 7320 E FLETCHER AVE TAMPA FL 33637	INSURER A: Hartford Underwriters Insurance Company		30104
	INSURER B: Hartford Fire Insurance Company		19682
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY			02 SBM BV1ZR8	10/05/2025	10/05/2026	EACH OCCURRENCE	\$2,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
	☒ General Liability						MED EXP (Any one person)	\$10,000
							PERSONAL & ADV INJURY	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$4,000,000
	☒ POLICY ☐ PROJECT ☐ LOC						PRODUCTS - COMP/OP AGG	\$4,000,000
	OTHER:							
A	AUTOMOBILE LIABILITY			02 SBM BV1ZR8	10/05/2025	10/05/2026	COMBINED SINGLE LIMIT (Ea accident)	\$2,000,000
	☐ ANY AUTO						BODILY INJURY (Per person)	
	☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	
	☒ HIRED AUTOS ☒ NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	
A	☒ UMBRELLA LIAB	☒ EXCESS LIAB	☒ OCCUR CLAIMS-MADE	02 SBM BV1ZR8	10/05/2025	10/05/2026	EACH OCCURRENCE	\$2,000,000
	☐ DED	☐ RETENTION \$ 10,000					AGGREGATE	\$2,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						☐ PER STATUTE ☐ OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	☐ Y/N	N/A				E.L. EACH ACCIDENT	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	
							E.L. DISEASE - POLICY LIMIT	
B	FailSafe Technology Errors or Omissions Liability			02 SBM BV1ZR8	10/05/2025	10/05/2026	Each Wrongful Act Aggregate Limit	\$1,000,000 \$4,000,000

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

Those usual to the Insured's Operations.

CERTIFICATE HOLDER

For Informational Purposes
7320 E FLETCHER AVE
TAMPA FL 33637

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

Susan L. Castaneda

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Proposer's Background Information Form

#	Question	Response	Comment	Status
Contact Information				
1.1.1	Primary Contact: Please provide the contact information (Name, Title, E-mail and Phone Number) for the Primary Contact for this project.	Carley Stepp, COO, carley@dofcreations.com 360-850-7110		Complete
1.1.2	Authorized Approver: Please provide the contact information (Name, Title, E-mail and Phone Number) for the Authorized Approver for this project.	Carley Stepp, COO, carley@dofcreations.com 360-850-7110		Complete
Organization Background				
1.2.1	Please state the year that you company started its business.	2016		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	2016		Complete
1.2.3	What State is your Company Registered In?	Florida		Complete
Former Business				
1.3.1	Under what former name has your business operated? Include a description of the business.	n/a		Complete
1.3.2	At what address was that business located?	7320 E. Fletcher Ave. Tampa, FL 33637		Complete
Past Failure				
1.4.1	Have you ever failed to complete work awarded to you. If so, when, where and why?	No		Complete
Inspected				
1.5.1	Have you personally inspected the proposed WORK and do you have a complete plan for its performance?	Yes		Complete
Subcontracting				
1.6.1	Will you subcontract any part of this WORK? If you will be subcontracting any part of this work, provide details including a list of each sub-contractor(s) that will perform work in excess of ten percent (10%) of the contract amount and the work that will be performed by each subcontractor(s). (Note: The proposed list of subcontractor(s) may not be amended after award of the contract without the prior written approval of the Contract Administrator, whose approval shall not be reasonably withheld.)	No		Complete
Bankruptcy Petitions				
1.7.1	List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition.	n/a		Complete
Bond Claims				
1.8.1	List and describe all successful Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s).	n/a		Complete
Claims, Arbitrations, Administrative Hearings and Lawsuits				
1.9.1	List all claims, arbitrations, administrative hearings and lawsuits brought by or against the Proposer or its predecessor organizations(s) during the last (10) years. The list shall include all case names; case, arbitration or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.	n/a		Complete
Criminal Proceedings or Hearings				

1.10.1	List and describe all criminal proceedings or hearings concerning business related offenses in which the Proposer, its principals or officers or predecessor organization(s) were defendants.	n/a		Complete
Company Classification				
1.11.1	In regards to the commodities/services proposed, which of the following best classifies your firm? If you selected any options besides \"Original Provider\" please explain.	Original Provider		Complete
Debarment/Suspension				
1.12.1	Have you ever been debarred or suspended from doing business with any governmental agency? If you have been debarred or suspended from doing business with any governmental agency, please explain.	No		Complete
Similar Experience & Contracts				
1.13.1	Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.		Pembroke Pines is a current customer of DOF Creations. We have provided Cisco network solutions, subscriptions, and services over the past several years.	Complete
Professional License Information				
1.14.1	Are professional licenses required to perform the services requested in this solicitation? If so, please list any applicable professional licenses that your company has that are required to provide these services.	Applicable	Professional Licensing:	Complete
Conflict of Interest				
1.15.1	Do you need to disclose any conflicts of interest? The award of any contract hereunder is subject to the provisions of Chapter 112, Florida Statutes. Proposers must disclose with their Proposal the name of any officer, director, partner, proprietor, associate or agent who is also an officer or employee of CITY or any of its agencies. Further, all Proposers must disclose the name of any officer or employee of CITY who owns, directly or indirectly, an interest of five percent (5%) or more in the Proposer 's firm or any of its branches or affiliate companies.	No	Cisco Certified Network Professional (CCNP) (CCNP Vooice) (CCDP)	Complete
19 Questions			100.00% Complete	



**SWORN STATEMENT
ON PUBLIC ENTITY CRIMES
UNDER FLORIDA STATUTES CHAPTER 287.133(3)(a).**

1. This sworn statement is submitted DOF Creations, LLC
(name of entity submitting sworn statement) whose business address is
7320 E. Fletcher Ave, Tampa, FL 33637
and (if applicable) its Federal Employer Identification Number (FEIN) is
82-2522023. (If the entity has no FEIN, include the Social
Security Number of the individual signing this sworn statement:
_____.)
2. My name is Carley Stepp and my
(Please print name of individual signing)
relationship to the entity named above is COO.
3. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
4. I understand that a "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 an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
5. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 1. A predecessor or successor of a person convicted of a public entity crime: or
 2. 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 Cityship 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.

6. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any 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 let by a public entity, or which otherwise transacts or applies to transact business with 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.
7. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. **(Please indicate which statement applies.)**
- ☒ A) Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
- ☐ B) The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989, AND **(Please indicate which additional statement applies.)**
- ☐ B1) There has been a proceeding concerning the conviction before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer did not place the person or affiliate on the convicted vendor list. **(Please attach a copy of the final order.)**
- ☐ B2) The person or affiliate was placed on the convicted vendor list. There has been a subsequent proceeding before a hearing officer of the State of Florida, Division of Administrative Hearings. The final order entered by the hearing officer determined that it was in the public interest to remove the person or affiliate from the convicted vendor list. **(Please attach a copy of the final order.)**
- ☐ B3) The person or affiliate has not been placed on the convicted vendor list. **(Please describe any action taken by or pending with the Department of General Services.)**

Carley Stepp Carley Stepp DOF Creations, LLC
Bidder's Name/Signature Company

5/7/26
Date



VENDOR DRUG-FREE WORKPLACE CERTIFICATION FORM

SECTION 1 GENERAL TERM

Preference may be given to vendors submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section 287.087, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

IDENTICAL TIE BIDS - Preference may be given to businesses with drug-free workplace programs. Whenever two or more bids that are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drugfree workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. 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 each 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.

SECTION 2 AFFIRMATION

☒ Place a check mark here only if affirming bidder **complies fully** with the above requirements for a Drug-Free Workplace.

☐ Place a check mark here only if affirming bidder **does not** meet the requirements for a Drug-Free Workplace.

Failure to complete this certification at this time (by checking either of the boxes above) shall render the vendor ineligible for Drug-Free Workplace Preference. This form must be completed by/for the proposer; the proposer WILL NOT qualify for Drug-Free Workplace Preference based on their sub-contractors' qualifications.

Carley Stepp
Authorized Signature

Carley Stepp
Authorized Signer Name

DOF Creations, LLC
Company Name



NON-COLLUSIVE AFFIDAVIT

BIDDER is the

Officer

(Owner, Partner, Officer, Representative or Agent)

BIDDER is fully informed respecting the preparation and contents of the attached Bid and of all pertinent circumstances respecting such Bid;

Such Bid is genuine and is not a collusive or sham Bid;

Neither the said BIDDER nor any of its officers, partners, owners, agents, representative, employees or parties in interest, including this affidavit, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other BIDDER, firm or person to submit a collusive or sham Bid in connection with the Contract for which the attached Bid has been submitted; or to refrain from bidding in connection with such Contract; or have in any manner, directly or indirectly, sought by agreement or collusion, or communications, or conference with any BIDDER, firm, or person to fix the price or prices in the attached Bid or any other BIDDER, or to fix any overhead, profit, or cost element of the Bid Price or the Bid Price of any other BIDDER, or to secure through any collusion conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Contract;

The price of items quoted in the attached Bid are fair and proper and are not tainted by collusion, conspiracy, connivance, or unlawful agreement on the part of the BIDDER or any other of its agents, representatives, owners, employees or parties in interest, including this affidavit.

Printed Name/Signature _Carley Stepp_ *Carley Stepp*

Title COO

Name of Company DOF Creations, LLC



**SCRUTINIZED COMPANY CERTIFICATION
PURSUANT TO FLORIDA STATUTE § 287.135.**

I, Carley Stepp, COO, on behalf of DOF Creations, LLC,
Print Name and Title Company Name

certify that DOF Creations, LLC:
Company Name

1. Does not participate in a boycott of Israel; and
2. Is not on the Scrutinized Companies that Boycott Israel list; and
3. Is not on the Scrutinized Companies with Activities in Sudan List; and
4. Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List; and
5. Has not engaged in business operations in Syria.

Submitting a false certification shall be deemed a material breach of contract. The City shall provide notice, in writing, to the Contractor of the City's determination concerning the false certification. The Contractor shall have ninety (90) days following receipt of the notice to respond in writing and demonstrate that the determination of false certification was made in error. If the Contractor does not demonstrate that the City's determination of false certification was made in error then the City shall have the right to terminate the contract and seek civil remedies pursuant to Florida Statute § 287.135.

Section 287.135, Florida Statutes, prohibits the City from: 1) Contracting with companies for goods or services in any amount if at the time of bidding on, submitting a proposal for, or entering into or renewing a contract if the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, F.S. or is engaged in a boycott of Israel; and 2) Contracting with companies, for goods or services over \$1,000,000.00 that are on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector list, created pursuant to s. 215.473, or are engaged in business operations in Syria.

As the person authorized to sign on behalf of the Contractor, I hereby certify that the company identified above in the section entitled "Contractor Name" does not participate in any boycott of Israel, is not listed on the Scrutinized Companies that Boycott Israel List, is not listed on either the Scrutinized Companies with activities in the Iran Petroleum Energy Sector List, and is not engaged in business operations in Syria. I understand that pursuant to section 287.135, Florida Statutes, the submission of a false certification may subject the company to civil penalties, attorney's fees, and/or costs. I further understand that any contract with the City for goods or services may be terminated at the option of the City if the company is found to have submitted a false certification or has been placed on the Scrutinized Companies with Activities in Sudan list or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List.

DOF Creations, LLC
Company Name

Carley Stepp Carley Stepp COO
Print Name / Signature Title



E-VERIFY SYSTEM CERTIFICATION STATEMENT (UNDER SECTION 448.095, FLORIDA STATUTES)

1. Definitions:
 - a. **“Contractor”** means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration. “Contractor” includes, but is not limited to, a vendor or consultant.
 - b. **“Subcontractor”** means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.
 - c. **“E-Verify system”** means an Internet-based system operated by the United States Department of Homeland Security that allows participating employers to electronically verify the employment eligibility of newly hired employees.
2. Effective January 1, 2021, Contractors, shall register with and use the E-verify system in order to verify the work authorization status of all newly hired employees. Contractor shall register for and utilize the U.S. Department of Homeland Security’s E-Verify System to verify the employment eligibility of:
 - a. All persons employed by a Contractor to perform employment duties within Florida during the term of the contract; and
 - b. All persons (including subvendors/subconsultants/subcontractors) assigned by Contractor to perform work pursuant to the contract with the City of Pembroke Pines. The Contractor acknowledges and agrees that registration and use of the U.S. Department of Homeland Security’s E-Verify System during the term of the contract is a condition of the contract with the City of Pembroke Pines; and
 - c. Should vendor become the successful Contractor awarded for the above-named project, by entering into the contract, the Contractor shall comply with the provisions of Section 448.095, Fla. Stat., “Employment Eligibility,” as amended from time to time. This includes, but is not limited to registration and utilization of the E-Verify System to verify the work authorization status of all newly hired employees. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract.
3. Contract Termination
 - a. If the City has a good faith belief that a person or entity with which it is contracting has knowingly violated s. 448.09 (1) Fla. Stat., the contract shall be terminated.
 - b. If the City has a good faith belief that a subcontractor knowingly violated s. 448.095 (2), but the Contractor otherwise complied with s. 448.095 (2) Fla. Stat., shall promptly notify the Contractor and order the Contractor to immediately terminate the contract with the subcontractor.
 - c. A contract terminated under subparagraph a) or b) is not a breach of contract and may not be considered as such.
 - d. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination.
 - e. If the contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.

COMPANY NAME: _DOF Creations, LLC_

PRINTED NAME / AUTHORIZED SIGNATURE: Carley Stepp Carley Stepp



AFFIDAVIT OF COMPLIANCE WITH HUMAN TRAFFICKING LAWS

In accordance with section 787.06 (13), Florida Statutes, the undersigned, on behalf of the entity listed below ("Entity"), hereby attests under penalty of perjury that:

1. The Affiant is an officer or representative of the Entity entering into an agreement with the City of Pembroke Pines.
2. The Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes, entitled "Human Trafficking".
3. The Affiant is authorized to execute this Affidavit on behalf of the Entity.
4. I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.
5. Pursuant to Sec. 92.525(2), Fla. Stat., under penalties of perjury, I declare that I have read the foregoing affidavit of compliance with Human Trafficking Laws and that the facts stated in it are true.

FURTHER AFFIANT SAYETH NAUGHT.

DATE: 5/7/26

ENTITY: DOF Creations, LL

SIGNATURE: Carley Stepp

NAME: Carley Stepp

TITLE: COO

**VENDOR INFORMATION FORM**

MAIN CONTACT INFORMATION			
Company Name (Legal Name as filed with IRS)	DOF Creations, LLC		
Doing Business As (DBA)			
Primary Business Address			
	City:	Tampa	
	State:	FL	Zip: 33637
	Country:	USA	
Remit To Address	Same as above		
	City:		
	State:		Zip:
	Country:		
Order From Address	Same as above		
	City:		
	State:		Zip:
	Country:		
Foreign Entity (Yes/No)	No		
Telephone Number	1-888-833-4644		
Primary Company E-mail	carley@dofcreations.com		
Fax			
Website	dofcreations.com		
DUNS	080860347		
Independent Contractor (Yes/No)	No		
Identification Number	SSN:		FID: 82-2522023

GENERAL PAYMENT TERMS		
Discount Percent Defines the discount percentage the vendor extends to your organization.	Days to Discount Number of days which payment must be received to claim the discount percent.	Days to Net Number of days that the vendor allows before requiring net payment.

CONTACT # 1	
Contact Name (First & Last Name)	Carley Stepp
Description/Title/Position	COO
Phone (Voice)	360-850-7110
Phone (Text)	same as above
Fax	
E-mail	carley@dofcreations.com

STATE REGISTRATION	
Is your company registered with the State of Florida? (Y/N)	Y
If not, what state is your company registered in?	

Please attach the print out from <https://dos.myflorida.com/sunbiz/> or the appropriate state showing your active registration and any applicable fictitious names that are registered.

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) DOF CREATIONS LLC	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☒ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) S Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐	
	5 Address (number, street, and apt. or suite no.). See instructions. 7320 E. FLETCHER AVE	Requester's name and address (optional)
6 City, state, and ZIP code TAMPA, FL 33637		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>Saeed Gordon</i>	Date 1/2/26
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they



DOF Creations LLC

Dimensions of Freedom

Compliance • Cybersecurity • Networking • Managed Services

WHO WE ARE

DOF Creations LLC is a full-service IT reseller and solutions provider specializing in network architecture, cybersecurity, and managed IT services for public sector, education, healthcare, and critical infrastructure clients. Built on the principle of “Measuring Success Through Service,” DOF designs, secures, and operates mission-critical platforms with a manufacturer-agnostic, holistic approach.

Headquartered in Tampa, Florida, DOF serves clients across the United States and brings a veteran engineering team with advanced certifications spanning Cisco, Fortinet, Palo Alto Networks, HPE-Aruba, Extreme, Juniper, and more. From campus networks and OT/ICS environments to fraud prevention and AI-powered analytics, DOF delivers regulator-ready solutions without sacrificing speed or innovation.

CORE CAPABILITIES

Network Architecture & Deployment

Campus, data center, WAN & SD-WAN, Wi-Fi 6/6E, NAC, next-gen firewalls, micro-segmentation, high availability, and zero-touch provisioning across multi-vendor stacks.

Cybersecurity Operations

SOC design, SIEM/SOAR, EDR/NDR/IDS, ICS protocol-aware monitoring, threat hunting, incident response, purple teaming, and continuous control monitoring.

OT/ICS & Enterprise Security

CTF-style red teaming, segmentation design, SOC uplift, and A&A support for critical infrastructure and industrial environments.

Fraud & Abuse Defense

AI-driven identity verification, impersonation detection, and scam-payment loss reduction using signals, workflows, and response playbooks.

Grants, Financing & Procurement

0% interest hardware subscriptions, equipment buybacks, Federal & State grant experience, and multi-year financing to protect client budgets.

App & API Modernization

Resilient REST APIs, event pipelines, and audit-ready processing to replace brittle legacy batch systems.

REPRESENTATIVE PAST PERFORMANCE

University of Southern California	Hardware, installation, and configuration for a 78,000-seat venue; live-event segmentation, and network monitoring for media, POS, physical security, and building management systems.
Florida Dept. of Juvenile Justice	Network, connectivity, and security consulting; sold, implemented, and configured all hardware as part of a unified statewide modernization effort.
Salado ISD, TX	Network support specialist. Chosen service provider through E-Rate.
Bay County Schools, FL	Supporting continuous network monitoring following initial deployment and configuration. Efforts have improved network performance and security, as well as District communications through network-supported voice solutions.
Defense & Critical Infrastructure	OT security testing and compliance across manufacturing sites and transit-systems. Vulnerability assessments and patch management for OT networks, domestically and internationally.

LEADERSHIP

Saeed Gordon — CEO / President

Graduate of Vanderbilt Law School. Deep focus on compliance and regulatory standards. Extensive experience securing grant funding for public entities, educational institutions, and healthcare organizations implementing transformative technology solutions.

Todd Matuschak — Chief Technology Officer

Nearly two decades in public and private sector IT, most recently as Sr. Engineer for the City of Tallahassee (FL) supporting police, dispatch, utilities, and traffic systems. Deep expertise in cybersecurity optimization, IT/OT integration, NIST alignment, and regulatory frameworks (CJIS, HIPAA, NERC, FERC, PCI/DSS).

Viv Gordon — Chief Revenue Officer

Over 30 years in finance and account management across communications, finance, and technology. Architect of DOF's 0%-interest and multi-year subscription financing models that make critical technology improvements accessible for budget-constrained organizations.

Carley Stepp — Chief Operations Officer

Leads marketing, sales engagement, and people management. Bridges customer acquisition and retention while shaping organizational policies aligned to DOF's values, competitive strategy, and market positioning in a rapidly changing landscape.

TECHNICAL CERTIFICATIONS & CREDENTIALS

Fortinet – Certified Information Systems Security Professional (CISSP)	Fortinet – NSE 2 Network Security Associate
Fortinet – NSE 3 Network Security Associate	Fortinet – NSE 4 Network Security Professional
Fortinet – NSE 7 Network Security Professional	Palo Alto – Certified Network Security Engineer (PCNSE)
Palo Alto – Network Systems Engineer (PSE) – Strata Professional	Palo Alto – Network Systems Engineer (PSE) – Prisma Cloud Associate
Prisma Certified Cloud Security Engineer (PCCSE) – In Progress	Cisco
Certified Ethical Hacker – EC Council	Certified FOR508: Advanced Incident Response, Threat Hunting & Digital Forensics

COMPLIANCE EXPERTISE

Regulatory Frameworks GLBA, PCI-DSS, SOC 2, FERPA, HIPAA	NIST Standards NIST 800-53 / CSF / 800-82	Critical Infrastructure IEC 62443, NERC CIP, CJIS, FERC
OT / ICS Policy ICS Policy & Frameworks, TOGAF, COBIT, ISO	Vendor Certifications Cisco, Fortinet, Palo Alto, HPE-Aruba, Extreme, Juniper, Cradlepoint, Rubrik	Security Specializations SANS SEC508/560/660, CEH, Microsoft Cloud Security, ICS/OT Standards

THE DOF DIFFERENCE

- Manufacturer-agnostic prospective – DOF recommends the right tool for the client's problem, not the easiest sale. Hands on modernization: DOF architects, builds, and operates-not just advisory.
- Financial solutions built for today's constrained budgets – buyback, 0% subscriptions, grants, and multi-year financing.
- Certification depth across networking and security platforms – proof available on request.
- Real world security outcomes: Experience in reduction of identity and fraud events, impersonation (ie. Email) and scam-payment losses.

AUTHORIZED PARTNER & CERTIFICATION BADGES

DOF maintains active authorized partner and certification status across the major networking and security vendors. Verifiable proof of certification is available on request.



Aruba Gold Partner



Extreme Sales Specialist



Extreme Solutions Design



Fortinet NSE3 Associate



Fortinet Certified Prof – Network Security



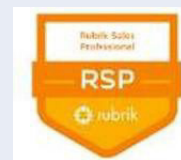
Fortinet Certified Specialist – SASE



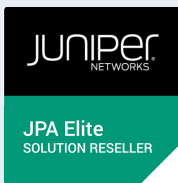
Cisco Qualified – Series 700



Cradlepoint Sales Associate



Rubrik Sales Professional



Juniper Elite - Solutions Reseller

AUTHORIZED VENDOR RELATIONSHIPS (sample)

Fortinet	Cisco	Palo Alto Networks	HPE	Extreme Networks	Juniper
Dell Technologies	Lenovo	Rubrik	Verkada	CrowdStrike	Arctic Wolf



SUCCESS THROUGH SERVICE

DOF Creations Experience & Certifications List

Technical Certifications:

- Fortinet - Certified Information Systems Security Professional
- Fortinet – NSE 2 Network Security Associate
- Fortinet – NSE 3 Network Security Associate
- Fortinet - NSE 4 Network Security Professional
- Cisco Certified
- Certified Ethical Hacker by the EC Council
- FOR508: Advanced Incident Response, Threat Hunting, and Digital Forensics (G01_02_SF_CM_7985)

Vendor Relationships

Extreme Networks Gold Partner & HP Aruba Gold and may more visit our website @ www.dofcreations.com



QUOTE



7320 East Fletcher Ave
Tampa, FL 33637

DMS Certified - Minority Business

To David Gomez
City of Pembroke Pines
601 City Center Way
Pembroke Pines, FL 33025

QUOTE #	Q1911866
DATE	May 8, 2026
CONTRACT VEHICLE	
QUOTE NAME	City of Pembroke Pines - Cisco Quote

Salesperson	P.O. Number	Payment Terms	Due Date
Carley Stepp			Jun 30, 2026

Qty	Part Number	Description	List Price	Customer Discount %	Unit Price	Total Price
Cisco						
2	N9K-C9504-B3-G	NEXUS 9504 CHASSIS BUNDLE (1 SUP, 2 SC, 4 PS, 4 FM-G, 3 FAN)	\$123,970.40	67 %	\$40,910.23	\$81,820.46
2	CON-L1NCO-N9KC954G	CX LEVEL 1 8X7XNCDOSNEXUS 9504 CHASSIS BUNDLE 1 SUP 2 SC	\$54,474.00	25 %	\$40,855.50	\$81,711.00
2	MODE-NXOS	Mode selection between ACI and NXOS	\$0.00	100 %	\$0.00	\$0.00
2	NXOS-CS-10.6.1F	Nexus 9300, 9500, 9800 NX-OS SW 10.6.1 (64bit) Cisco Silicon	\$0.00	100 %	\$0.00	\$0.00
2	DCN-OTHER	Select if this product will NOT be used for AI Applications	\$0.00	100 %	\$0.00	\$0.00
2	NXOS-SLP-INFO-9K	Info PID for Smart Licensing using Policy for N9K	\$0.00	100 %	\$0.00	\$0.00
4	N9K-SC-A	System Controller for Nexus 9500	\$0.00	100 %	\$0.00	\$0.00
8	N9K-C9504-FM-G	Nexus 9500 4-slot chassis 400G cloud scale fabric module	\$0.00	100 %	\$0.00	\$0.00
6	N9K-C9504-FAN2	Fan Tray V2 for Nexus 9504 chassis, Port-side Intake	\$0.00	100 %	\$0.00	\$0.00
2	N9K-C9504-FM-G=	Cisco Switch Fabric Module - For Switching Fabric - 4 x 400GBase-X Expansion Slot400 Gigabit Ethernet - 400GBase-X - 400 Gbit/s - Hot-swappable	\$28,853.03	67 %	\$9,521.50	\$19,043.00
16	CAB-AC-20A-SG-C20	N. AMERICA CABINET JUMPER PDU, IEC C20/Saf-D-Grid 250VAC 20A	\$0.00	100 %	\$0.00	\$0.00
2	N9K-C9500-ACK	Nexus 9500 Accessory Kit	\$0.00	100 %	\$0.00	\$0.00
2	N9K-C9504-RMK	Nexus 9504 Rack Mount Kit	\$0.00	100 %	\$0.00	\$0.00
4	N9K-C9500-LC-CV	Nexus 9500 Linecard slot cover	\$0.00	100 %	\$0.00	\$0.00
2	N9K-SELECT-SUP-B+	PID TO UPGRADE SUPERVISOR : N9K-SUP-B+	\$11,119.12	67 %	\$3,669.31	\$7,338.62
2	N9K-SUP-B+	Supervisor B+ for Nexus 9500	\$0.00	100 %	\$0.00	\$0.00
2	N9K-SUP-B+	Supervisor B+ for Nexus 9500	\$44,019.79	67 %	\$14,526.53	\$29,053.06
4	N9K-X97160YC-EX=	Cisco Expansion Module - For Data Networking, Optical NetworkOptical Fiber25 Gigabit Ethernet, 40 Gigabit Ethernet, 100 Gigabit Ethernet - 40GBase-X, 100GBase-X - 52 x Expansion Slots - SFP+, QSFP+ - Plug-in Module, Hot-swappable	\$28,777.09	67 %	\$9,496.44	\$37,985.76
8	N9K-SELECT-C95PUV2	Cisco 3000W Power Supply - Hot-pluggable, Plug-in Module - 3000 W	\$3,085.55	67 %	\$1,018.23	\$8,145.85

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Qty	Part Number	Description	List Price	Customer Discount %	Unit Price	Total Price
8	N9K-PUV2-3000W-B	Nexus 9500 3150W Universal PS, Dual Input, Port-side Intake	\$0.00	100 %	\$0.00	\$0.00
2	N9K-C9504-FAN-PWR	Nexus 9504 Fabric Module Blank with Fan Power Connector	\$0.00	100 %	\$0.00	\$0.00
2	C1P1TN9500M4-3Y	Cisco ONE Data Center Networking Premier - Term License - 1 License - 3 Year	\$94,023.00	67 %	\$31,027.59	\$62,055.18
2	SVS-L1N9KP-95M4-3Y	Cisco Support Standard for DCN Premier Term N9500 M4, 3Y	\$0.00	100 %	\$0.00	\$0.00
2	DCN-ADOPT-BAS	Nexus(DCN) - Virtual adopt session http://cs.co/requestCSS	\$0.00	100 %	\$0.00	\$0.00
2	SW-OTHER	Select if this product will NOT be used for AI Applications	\$0.00	100 %	\$0.00	\$0.00
4	QSFP-100G-SR1.2=	Cisco QSFP Module - For Data Networking, Optical Network - 1 x LC 100GBase-SR BiDi Network - Optical Fiber - Multi-mode - 100 Gigabit Ethernet - 100GBase-SR BiDi	\$2,073.14	74 %	\$539.02	\$2,156.07
					SUBTOTAL	\$329,309.00
					SALES TAX	\$0.00
					TOTAL	\$329,309.00

Notes

Please contact me if I can be of further assistance.

Terms & Conditions: It is understood that DOF Creations will retain title to all items stated above until the total purchase price of this order is paid. Failure by customer to pay for this order in full under the terms shown on this document shall give DOF Creations the right to repossess the items stated above, with or without notice, and without liability to customer. If payment is not recieved when due, customer agrees to pay interest at the rate of 1.5% per month. If collection becomes necessary on this purchase, then customer agrees to pay all costs of collections, including but not limited to, reasonable attorney's fees and court costs.

Customer further agrees that any and all legal matters related to this order are governed by the laws of the State of Florida, County of Hillsborough. No warranty is made by DOF Creations for any of the items stated above, and there is no warranty of merchantability or fitness for any particular purpose. DOF Creations is not liable/nor responsible under any circumstances for data.

Quote price may change without notice.

A 25% tariff may be imposed on any manufacturer's networking equipment manufactured abroad and may be applicable at the time of purchase throughout the term of any agreement resulting from this solicitation

ANY PRICING INFORMATION INCLUDED HEREIN IS FOR QUOTATION PURPOSES ONLY AND ALL PRODUCTS ARE SUBJECT TO AVAILABILITY FROM THE MANUFACTURER.

REBATES AND SPECIAL PRICING ARE NOT VALID ON BACK ORDERS IF PROMOTION EXPIRES BEFORE PRODUCT IS AVAILABLE.

"Due to Cisco's price changes, prices are only held for 14 days. Should your review period require more time, add 10% to this sale price every 14 days to safely estimate the impact of anticipated price increases."

To accept this quotation, sign here and return: _____

State of Florida

Woman & Minority Business Certification

DOF CREATIONS, LLC

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

07/23/2024 to 07/23/2026



Pedro Allende
Florida Department of Management Services



State of Florida

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