Line			Unit of		
Item	Description	Quantity	Measure	Unit Cost	Total
1 - 1	Construction of Covered Walkway (Turnkey)	1	Lump Sum	\$159,771.71	\$159,771.71
	Total				\$159,771.71

Line		Unit of	
Item	Description	Measure	Percentage
	Cost to provide a Payment & Performance		
	Bond for the project, in the form of a		
2 - 1	percent	Percent	3.%

### **Proposer's Background Information Form**

#	Question	Response	Comment	Status
Contact I	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.	HEIDI PEREZ MANAGING PARTNER 305 343 5755 ha@danenterprisestea m.com		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.	HEIDI PEREZ MANAGING PARTNER 305 343 5755 ha@danenterprisestea m.com		Complete
Organiza	tion Background			
1.2.1	Please state the year that you company started its business.	08/29/2014		Complete
1.2.2	Please state the year that your company started providing service under your current business name.	08/29/2014		Complete
1.2.3	What State is your Company Registered In?	Florida		Complete
Former E	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?	19081 NW 78th Avenue Hialeah Fl 33015		Complete
Past Fail	ure			
1.4.1	Have you ever failed to complete work awarded to you. If so, when, where and why?	No		Complete
Inspecte	d			
1.5.1	Have you personally inspected the proposed WORK and do you have a complete plan for its performance?	Yes		Complete
Subconti	racting			
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.)	Yes	1. Signature Design Plans 2. Bella Fire Proteccion 3. Arco Power Service	Complete
Bankrupt	tcy 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 Cla	aims			
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, A	Arbitrations, Administrative Hearings and Lawsuits			

List all claims, arbitrations, administrative hearings and lawsuits brought by or	
against the Proposer or its predecessor organizations(s) during the last (10) years.  1.9.1 The list shall include all case names; case, arbitration or hearing identification N/A numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute.	Complete
Criminal Proceedings or Hearings	
List and describe all criminal proceedings or hearings concerning business related 1.10.1 offenses in which the Proposer, its principals or officers or predecessor N/A organization(s) were defendants.	Complete
Company Classification	
In regards to the commodities/services proposed, which of the following best  1.11.1 classifies your firm? If you selected any options besides \"Original Provider\" please Original Provider explain.	Complete
Debarment/Suspension	
Have you ever been debarred or suspended from doing business with any  1.12.1 governmental agency? If you have been debarred or suspended from doing  business with any governmental agency, please explain.	Complete
Similar Experience & Contracts	
Dan Enterprises Team provides civil engineering servi specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and complexity, in the previous three (3) years.  Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.  Dan Enterprises Team provides civil engineering servi specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and large projects. We hold "Woman-Owned Business certifications at the federal level and are prequalified contractors in South Florida.	ience in South ill, medium, ss" and 8A Complete
Dan Enterprises Team provides civil engineering servi specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and complexity, in the previous three (3) years.  Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.  Dan Enterprises Team provides civil engineering servi specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and large projects. We hold "Woman-Owned Business certifications at the federal level and are prequalified	ience in South ill, medium, ss" and 8A Complete
Dan Enterprises Team provides civil engineering servi specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and complexity, in the previous three (3) years.  Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.  and large projects. We hold "Woman-Owned Business certifications at the federal level and are prequalified contractors in South Florida.	ience in South Il, medium, ss" and 8A d as general
Dan Enterprises Team provides civil engineering servis specializing in federal and state projects. With experie and complexity, in the previous three (3) years.  Professional License Information  Are professional licenses required to perform the services requested in this solicitation? If so, please list any applicable professional licenses that your  Dan Enterprises Team provides civil engineering servis specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and large projects. We hold "Woman-Owned Business certifications at the federal level and are prequalified contractors in South Florida.  General Contractor, Fire Protection Contractor License Cont	ience in South ill, medium, ss" and 8A d as general  One begins in the second of the s
Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.  Describe the firm's local experience/nature of service with contracts of similar size and complexity, in the previous three (3) years.  Professional License Information  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.  Dan Enterprises Team provides civil engineering servis specializing in federal and state projects. With experie and Central Florida, we have handled a range of smal and large projects. We hold "Woman-Owned Business certifications at the federal level and are prequalified contractors in South Florida.  General Contractor, Fire Protection Contractor License Contractor License	ience in South ill, medium, ss" and 8A d as general  One begins in the second of the s



Bid Bond

Bond# UCS-32

CONTRACTOR:

(Name, legal status and address) Dan Enterprises Team LLC 19081 NW 78th Avenue

Hialeah, FL 33015

OWNER:

(Name, legal status and address) City of Pembroke Pines 8300 South Palm Drive Pembroke Pines, FL 33025

BOND AMOUNT:

Five Percent of Bid Amount -----(5% of Bid Amount)

(Name, location or address, and Project number, if any) Construction of Covered Walkway at 501 Medical Building.

IFB# PSPW-25-05.

SURETY:

(Name, legal status and principal place of business)

United Casualty and Surety Insurance Company 303 Congress Street, Suite 502 Boston, MA 02210

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this

day of April, 2025.

Dan Enterprises Team LLC

HEIM a Down

(Witness)

(Contractor as Principal) MINAGING PARTNER

(Witness)

United Casualty and Surety Insurance Company

(Suretv)

(Seal)

(Title) Odalis Cabrera, Attorney-In-Fact

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that

changes will not be obscured AIA Document A310<sup>TM</sup> - 2010 (rev. 10/2010). Copyright © 1963, 1970 and 2010 by The American Institute of Architects. All rights reserved.

Init.

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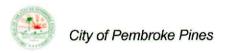


Bond No. UCS-32

172290

#### **POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That United Casualty and Surety Insurance Compan Company and United Surety Insurance Company, assumed names of United Casualty and make, constitute and appoint:	
Odalis Cabrera, Marina Mercedes Ramil	l, Megan C. Bauer, Lionel D. Jorge
its true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one in place and stead, to execute, acknowledge and deliver any and all bonds, recognizances riders, amendments, and consents of surety, providing the bond penalty does not except (\$3,000,000.00). This Power of Attorney shall expire without further actions.	s, undertakings or other instruments or contracts of suretyship to include seed Three Million & 00/100 Dollars
This Power of Attorney is granted under and by authority of the following resolutions and held on the $1^{\rm st}$ day of July, 1993:	dopted by the Board of Directors of the Companies at a meeting duly called
Resolved that the President, Treasurer, or Secretary be and they are hereby authorized its acts to execute and acknowledge for and on its behalf as Surety any and all bonds, obligatory in the nature thereof, with power to attach thereto the seal of the Compan upon the Company as if they had been duly executed and acknowledged by the regular	recognizances, contracts of indemnity, waivers of citation and all other writings y. Any such writings so executed by such Attorneys-in-Fact shall be binding
That the signature of any officer authorized by Resolutions of this Board and the Comp attorney or certification of either given for the execution of any bond, undertaking, rec when so used being hereby adopted by the Company as the original signature of such Company with the same force and effect as though manually affixed.	ognizance or other written obligation in the nature thereof; such signature and seal,
IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and th	eir corporate seals to be hereunto affixed, this 14th day of January, 2025
ucs ucs	UNITED CASUALTY AND SURETY INSURANCE COMPANY US Casualty and Surety Insurance Company United Surety Insurance Company
Corporate Seals	R. Kyle Fowler R. Kyle Fowler, Treasurer
Commonwealth of Massachusetts County of Suffolk ss:	
On this 14th day of January, 2025, before me, Colleen A. Cochrane, a notary Surety Insurance Company, US Casualty and Surety Insurance Company and United Sur to be the person whose name is subscribed to the within instrument and acknowledge signature on the instrument the person(s), or the entity on behalf of which the person(	ed to me that he executed the same in his authorized capacity, and that by his
I certify under PENALTY OF PERJURY under the laws of the Commonwealth of Massachu WITNESS my hand and seal.	setts that the foregoing paragraph is true and correct.
Notary Public Commission Expires: 10/27/2028	(Seal)  COLLEEN A COCHRANE  Notary Public, Commonwealth of Massachusetts  My Commission Expires 10/27/2028
I, Robert F. Thomas, President of United Casualty and Surety Insurance Company, US Cashereby certify that the above and foregoing is a true and correct copy of a Power of furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney	Attorney, executed by said Companies, which is still in full force and effect;
In Witness Whereof, I have hereunto set my hand and affixed the seals of said Companie	s at Boston, Massachusetts thisday of
April 2025	01 12 1/
Corporate Seals	Robert F. Thomas, President



#### **NON-COLLUSIVE AFFIDAVIT**

BIDDER is the	Owner		₹,
	(Owner, Partner, C	Officer, Representative or A	Agent)
	ed respecting the preparationes respecting such Bid;	n and contents of the attac	hed Bid and of all
Such Bid is genuine and	is not a collusive or sham E	Bid;	
employees or parties connived or agreed, da collusive or sham B submitted; or to reframanner, directly or in conference with any lany other BIDDER, or Price of any other BI	R nor any of its officers, par in interest, including this at lirectly or indirectly, with a bid in connection with the C in from bidding in connecti- ndirectly, sought by agreem BIDDER, firm, or person to or to fix any overhead, prof DDER, or to secure through any advantage against (Rec	ffidavit, have in any way cany other BIDDER, firm of Contract for which the attaction with such Contract; or tent or collusion, or common fix the price or prices in the it, or cost element of the Bh any collusion conspiracy	colluded, conspired, r person to submit ched Bid has been have in any unications, or the attached Bid or Bid Price or the Bid r, connivance, or
conspiracy, connivan	d in the attached Bid are faice, or unlawful agreement es, owners, employees or page.	on the part of the BIDDER	or any other of its
	Printed Name/Sig	nature Heroi Ki	Poel.
		Title Manging F	
	Name of Cor	<sub>mpany</sub> Dan Enterprise	es Team, LLC



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

1.		Ibmitted Dan Enterprise Team, LLC		
	(name of entity submitting	(name of entity submitting sworn statement) whose business address is		
	18501 Pines Blvd, Pembroke P	ines Suite 357, FI, 33029		
	and (if applicable) its Fede	eral Employer Identification Number (FEIN) is		
	47-1733830	. (If the entity has no FEIN, include the Soci	al Security	
	Number of the individual	signing this sworn statement: N/A		
2.	My name is Hedi Perez		and my	
	(Please print name of individual signing)			
	relationship to the entity n	named above is Managing Partner		

- 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.) Dan Enterprises Team, LLC 04/07/2025

Bidder's Name/Signature

Company

Date



### EQUAL BENEFITS CERTIFICATION FORM FOR DOMESTIC PARTNERS AND ALL MARRIED COUPLES

Except where federal or state law mandates to the contrary, a Contractor awarded a Contract pursuant to a competitive solicitation shall provide benefits to Domestic Partners and spouses of its employees, irrespective of gender, on the same basis as it provides benefits to employees' spouses in traditional marriages.

The Contractor shall provide the City and/or the City Manager or his/her designee, access to its records for the purpose of audits and/or investigations to ascertain compliance with the provisions of this section, and upon request shall provide evidence that the Contractor is in compliance with the provisions of this section upon each new bid, contract renewal, or when the City Manager has received a complaint or has reason to believe the Contractor may not be in compliance with the provisions of this section. Records shall include but not be limited to providing the City and/or the City Manager or his/her designee with certified copies of the Contractor's records pertaining to its benefits policies and its employment policies and practices.

The Contractor must conspicuously make available to all employees and applicants for employment the following statement:

"During the performance of a contract with the City of Pembroke Pines, Florida, the Contractor will provide Equal Benefits to its employees with spouses, as defined by Section 35.39 of the City's Code of Ordinances, and its employees with Domestic Partners and all Married Couples".

The posted statement must also include a City contact telephone number and email address which will be provided to each contractor when a covered contract is executed.

#### **SECTION 1 DEFINITIONS**

- Benefits means the following plan, program or policy provided or offered by a contractor
  to its employees as part of the employer's total compensation package which may include
  but is not limited to sick leave, bereavement leave, family medical leave, and health
  benefits.
- 2. Cash Equivalent mean the amount of money paid to an employee with a domestic partner or spouse in lieu of providing benefits to the employee's domestic partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee for his or her spouse from a traditional marriage.
- 3. Covered Contract means a contract between the City and a contractor awarded subsequent to the date when this section becomes effective valued at over \$25,000 or the threshold amount required for competitive bids as required in section 35.18(A) of the Procurement Code.
- 4. Domestic Partner shall mean any two (2) adults of the same or different sex who have registered as domestic partners with a governmental body pursuant to state or local law authorizing such registration, or with an internal registry maintained by the employer of at



least one of the domestic partners. A contractor may institute an internal registry to allow for the provision of equal benefits to employees with domestic partners who do not register their partnerships pursuant to a governmental body authorizing such registration, or who are located in a jurisdiction where no such governmental domestic partnership registry exists. A contractor that institutes such registry shall not impose criteria for registration that are more stringent than those required for domestic partnership registration by the City of Pembroke Pines.

- 5. Equal benefits means the equality of benefits between employees with spouses and/or dependents of spouses and employees with domestic partners and/or dependents of domestic partners, and/or between spouses of employees and/or dependents of spouses and domestic partners of employees and/or dependents of domestic partners.
- 6. Spouse means one member of a married pair legally married under the laws of any state within the United States of America or any other jurisdiction under which such marriage is legally recognized, irrespective of gender.
- 7. Traditional marriage means a marriage between one man and one woman.

#### SECTION 2 CERTIFICATION OF CONTRACTOR

The firm providing a response, by virtue of the signature below, certifies that it is aware of the requirements of Section 35.39 "City Contractors providing Equal Benefits for Domestic Partners and all Married Couples" of the City's Code of Ordinances, and certifies the following (Check only one box below):

	A.	Contractor currently complies with the requirements of this section; or
<b>√</b>	В.	Contractor will comply with the conditions of this section at the time of contract award; or
	C.	Contractor will not comply with the conditions of this section at the time of contract award: or
	D.	Contractor does not comply with the conditions of this section because of the following allowable exemption (Check only one box below):
		$\square$ 1. The Contractor does not provide benefits to employees' spouses in traditional marriages;
		2. The Contractor provides an employee the cash equivalent of benefits because the Contractor is unable to provide benefits to employees' Domestic Partners or spouses despite making reasonable efforts to provide them. To meet this exception, the Contractor shall provide a notarized affidavit that it has made reasonable efforts to provide such benefits. The affidavit shall state the efforts taken to provide such benefits and the amount of the cash equivalent. Cash equivalent means the amount of money paid to an employee with a Domestic Partner or spouse rather than providing benefits to the employee's Domestic Partner or spouse. The cash equivalent is equal to the employer's direct expense of providing benefits to an employee's spouse.



	City of Periloroke Pines
	☐ 3. The Contractor is a religious organization, association, society, or any non-profit charitable or educational institution or organization operated supervised or controlled by or in conjunction with a religious organization, association, or society;
	☐ 4. The Contractor is a governmental agency;
provi	certification shall be signed by an authorized officer of the Contractor. Failure to de such certification (by checking the appropriate boxes above along with completing aformation below) shall result in a Contractor being deemed non-responsive.
COM	PANY NAME: Dan Enterprises Team, LLC
	LODIZED OFFICED NAME (CICNATURE & Par HER R PRI).



#### 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:

- Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, 1. 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).
- 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

SECTION 2 AFFIRMATION			
Place a check mark here only if affirr Workplace.	ning bidder complies full	<b>y</b> with the above requirements	for a Drug-Free
☐ Place a check mark here only if affirming	ng bidder <u>does not</u> meet th	ne requirements for a Drug-Free	Workplace.
Failure to complete this certification at the ineligible for Drug-Free Workplace Prefewill NOT qualify for Drug-Free Workpla	rence. This form must be	completed by/for the propose	r; the proposer
1)	11		

Authorized Signature

Heror Fans.

Authorized Signature

Authorized Signer Name

Company Name



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

I. Heidi P	erez, N	Managing Partner	, on behalf of Dan Ent	terprises Team, LLI	_C
	Print Na	me and Title		Company Name	
certify that	Dan	Enterprises	Team, LLC		:
	-		Company Name		

- Does not participate in a boycott of Israel; and 1.
- 2. Is not on the Scrutinized Companies that Boycott Israel list; and
- Is not on the Scrutinized Companies with Activities in Sudan List; and 3.
- Is not on the Scrutinized Companies with Activities in the Iran Petroleum Energy 4. 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.

Dan Enterprises Team, LLC

Heidi Perez Heroik Pace Managing Partner
Print Name / Signature Title

Company Name



# 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.
- 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:
  - 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.

#### 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.
- 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.

Dan	Enterprises	Team,	LLC
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COMPANY NAME:		
	Heidi Perez	11-1-12
PRINTED NAME / AUTHORIZED SIGNATURE	3	HEIDIK 1900.



#### 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:

- The Affiant is an officer or representative of the Entity entering into an agreement 1. with the City of Pembroke Pines.
- The Entity does not use coercion for labor or services as defined in Section 787.06, 2. Florida Statutes, entitled "Human Trafficking".
  - The Affiant is authorized to execute this Affidavit on behalf of the Entity. 3.
- 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.

SIGNATURE: Hora K Pand.

NAME: Heidi Perez DATE: 04/07/2025

ENTITY: \_\_\_\_\_

TITLE: Managing Partner



(OFFICE	<b>USE ONLY</b>	) Vendor #	
OFFICE	USE CINL I	) vendor#	

#### **VENDOR INFORMATION FORM**

MAIN	CONTACTI	NFORMATION		
Company Name	`D. 4 -			
(Legal Name as filed with IRS)	DAN E	ENTER PRISES	EAM,	LLC.
Doing Business As (DBA)	N/A.			
Primary Business Address	18501 PINE 3LVD, SUITE #3V7.			v7·
	City: PENDROKE PIDES			
	State:	Florion.	Zip:	33029.
	Country:	ESA.		
Remit To Address		IN 78TH AVEN	WE.	
1				
		11 / 1		
	City:	Higtonh.		
	State:	FL	Zip:	3301V.
	Country:	21879.		
Order From Address				
	City:			
	State:		Zip:	
	Country:	September 1990		
Foreign Entity (Yes/No)	NO			
Telephone Number			V36V	
Primary Company E-mail	SA/ES 1 @ DANEUTEN PRISET TEAM. COM.			
Fax	N/A.			
Website	www.dawcowstructionsEnvices.com.			
DUNS	0-80082698			
Independent Contractor (Yes/No)	257.			
Identification Number	SSN:	_	FID:	47-1133830.
				,

GENERAL PAYMENT TERMS		
<b>Discount Percent</b> 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.
		HET - 30.

	CONTACT # 1
Contact Name (First & Last Name)	Heroi Penez.
Description/Title/Position	MANAGING PARTHER
Phone (Voice)	305343575
Phone (Text)	307 343 V7VT. Opt In (Y/N):
Fax	x/4.
E-mail	HA D SANEWIDD POSTITEMON, COM.

STATE REGISTRATION	0
Is your company registered with the State of Florida? (Y/N)	YES.
If not, what state is your company registered in?	NIA.

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

(Rev. March 2024) Department of the Treasury Internal Revenue Service

#### 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. 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.) 2 Business name/disregarded entity name, if different from above. DAN ENTERPRISES TEAM, LLC 3 3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check 4 Exemptions (codes apply only to Specific Instructions on page only one of the following seven boxes. certain entities, not individuals; see instructions on page 3): S corporation Individual/sole proprietor C corporation LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Exempt payee code (if any) Print or type. Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax Exemption from Foreign Account Tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate Compliance Act (FATCA) reporting box for the tax classification of its owner. code (if any) Other (see instructions) 3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, (Applies to accounts maintained and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check outside the United States.) this box if you have any foreign partners, owners, or beneficiaries. See instructions . 5 Address (number, street, and apt. or suite no.). See instructions. Requester's name and address (optional) 19081 NW 78 AVE City, state, and ZIP code Hialeah, Fl. 33015 List account number(s) here (optional) Part I Taxpayer Identification Number (TIN) Social security number 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 or TIN, later. Employer identification number Note: If the account is in more than one name, see the instructions for line 1. See also What Name and 7 Number To Give the Requester for guidelines on whose number to enter. 4 1 7 3 3 8 3 0 Part II Certification Under penalties of perjury, I certify that: 1. 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 2. 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

- 3. I am a U.S. citizen or other U.S. person (defined below); and
- 4. 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 Signature of Here U.S. person

#### 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

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

## **HUERTA, ENDER JOSE**

DAN ENTERPRISES TEAM LLC 5583 NW 72 AVE MIAMI FL 33166

**LICENSE NUMBER: CGC1530526** 

**EXPIRATION DATE: AUGUST 31, 2026** 

Always verify licenses online at MyFloridaLicense.com

ISSUED: 06/07/2024

Do not alter this document in any form.

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



# State of Florida Department of State

I certify from the records of this office that DAN ENTERPRISES TEAM LLC is a limited liability company organized under the laws of the State of Florida, filed on August 29, 2014.

The document number of this limited liability company is L14000136010.

I further certify that said limited liability company has paid all fees due this office through December 31, 2025, that its most recent annual report was filed on January 15, 2025, and that its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twentieth day of February, 2025



Secretary of State

Tracking Number: 3655541483CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

DAN ENTERPRISES TEAM LLC 18501 PINES BLVD, STE 357 PEMBROKE PINES, FL 33029

#### **Local Business Tax Certficate**

In the event the business to which this receipt was issued changes hands, the receipt will become null and void. An application for a new receipt must be made.

Receipt Date: October 1, 2024 through September 30, 2025

Business Name: DAN ENTERPRISES TEAM LLC DBA:

**Business Location:** 18501 PINES BLVD Unit/Suite 357

PEMBROKE PINES, FL 33029

**Receipt Number:** 20200792-2022-1 **Invoice Number:** INV-00074577

**Business Description:** WHOLESALE - ADMINISTRATIVE SERVICES

**Receipt Issuance:** Issued on June, 25, 2024

**Receipt Expiration:** Expires on September, 30, 2025

#### **Business Classification**

ADMSER-administrative services

SIGN-Sign

# Dan Enterprises Team LLC

### Emergency & Industrial Equipment U.S. Project & Engineering Division



U.S. SMALL BUSINESS ADMINISTRATION WASHINGTON, D.C. 20416

Date: 2018-11-15 18:04:58 UTC

From: Office of Government Contracting
To: DAN ENTERPRISES TEAM LLC

Subject: Documents Uploaded to WOSB Program Repository

SBA has received documents uploaded by you to the WOSB Program Repository. In order to submit an offer on a contract reserved for competition among EDWOSBs or WOSBs under the WOSB Program, you must be registered in the System for Award Management (SAM.gov), have a current representation posted on SAM.gov that you qualify as an EDWOSB or WOSB, and have provided the required documents to the WOSB Program Repository. 13 C.F.R. 127.300(a). It is your responsibility to ensure you have uploaded all of the documents required by 13 C.F.R. 127.300, remember to log into SAM.gov and update your small business certification status.

You must update your WOSB Program Certification (WOSB or EDWOSB) in the WOSB Program Repository and your EDWOSB/WOSB representations and self-certification in SAM.gov as necessary, but at least annually, to ensure they are kept current, accurate, and complete. The certification and representations are effective for a period of one year from the date of submission or update. You must update the supporting documents submitted to the WOSB Program Repository as necessary to ensure they are kept current, accurate and complete. 13 C.F.R. 127.300(f). In accordance with 13 C.F.R. 127.400, SBA, at its choosing, retains the authority to conduct an Eligibility Examination of your submitted documentation. If this should occur, you will be notified per the regulations.

Sincerely,

U.S. Small Business Administration Office of Government Contracting

# Dan Enterprises Team LLC

### Emergency & Industrial Equipment U.S. Project & Engineering Division



### U.S. SMALL BUSINESS ADMINISTRATION WASHINGTON, D.C. 20416

November 8, 2016

Heidi Perez, President Dan Enterprises Team, LLC 1840 W 49th St, Suite 727 Miami, FL 33012

Dear Mrs. Perez:

Congratulations! Your firm has been certified as a Participant in the U.S. Small Business Administration's (SBA) 8(a) Business Development Program. Your nine (9) year program term begins on the date of this letter:

During participation in the 8(a) BD Program, you will receive business development assistance from an assigned Business Development Specialist in the South Florida Area District Office located at 100 South Biscayne Blvd 7th Floor Miami, FL 33131. The phone number is ((305) 536 5521. We are sending a copy of this certification letter to the SBA the South Florida Area District Office. That office will contact you to schedule an orientation session. This could take up to 4-6 weeks. In the meantime, there are steps you should take to start your participation in the program.

#### Next Steps

- Read and Sign Participation Agreement: SBA requires the 8(a) participant's President or Chief Executive Officer sign a Participation Agreement showing he or she understands the conditions of 8(a) BD program participation. Please find the Agreement attached to the approval email associated with this letter. Please read the Agreement carefully, sign and date it, and make a copy. Return one copy to the SBA the South Florida Area District Office at the address shown in the second paragraph above. The second copy is for your records.
- Develop Your Business Plan: We encourage you to start developing your business plan. Current 8(a) BD program regulations require a firm, once certified, to promptly submit a business plan which must be approved by the SBA before the firm is eligible to receive 8(a) benefits; including 8(a) contracts. Once approved, the business plan will be reviewed annually and may be modified as needed. We offer an optional format for business plans. To consider the optional

# Dan Enterprises Team LLC

### Emergency & Industrial Equipment U.S. Project & Engineering Division

8(a) Business Plan Form 1010C, please go to: https://www.sba.gov/sites/default/files/SBA%201010C.pdf.

- Develop Your Strategy for Winning Contracts in Year 1: Though your firm's approved North American Industry Classification System (NAICS) Code is 423490, your firm may be awarded contracts under other NAICS Codes, as long as your firm is qualified to perform the required service or task. In this regard, please note that contracts awarded under 8(a) Business Development Program authority generally result from the self-marketing efforts of participating firms. You must build relationships with potential federal customers, pursue federal prime contractors for subcontracts, and aggressively pursue prime contract opportunities to grow your business. Successful 8(a) firms regularly respond to competitive small business contracting opportunities posted on www.FBO.gov. Establish a goal and vision for winning at least two (2) competitive contracts during your first year.
- Utilize Resources: There are valuable FREE resources available to you right now that offer expertise in all areas of business operation including reviewing your business plan and strategy. Two resources that you can utilize today are:
- o SBA Resource Partners: I encourage you to locate your nearest Resource Partner, please go to: https://www.sba.gov/tools/local-assistance. This link will provide access to upcoming small business events and the webpage for your SBA South Florida District Office, also.
- o 7(j) Management and Technical Assistance: While your firm's acceptance into the 8(a) Business Development program is not a guarantee for contracts, the SBA will make every effort to assist you in implementing your business plan and strategy. Your success in the program is dependent upon the extent to which you take advantage of SBA's efforts to support you. One of the agency's major tools for your success is the 7(j) Management and Technical Assistance Services Program. For more information, click on the following link: https://www.sba.gov/about-sba/sba-initiatives/7j-management-and-technical-assistance-services-program

I am excited about your future, and I welcome you as an 8(a) Business Development Program participant. Wishing you much success! Sincerely,

Robert Watkins,

Robert P. Brother

# CERTIFICATION REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS FOR EXPENDITURE OF FEDERAL FUNDS

#### **LOBBYING**

As required by 7 CFR Part 3018, for persons entering into a contract, grant or cooperative agreement over \$100,000 involving the expenditure of Federal funds, the undersigned certifies for itself and its principals that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement;
- (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress, in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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

The undersigned Contractor, certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. Chap. 38, Administrative Remedies for False Claims and Statements, apply to this certification and disclosure, if any.

Heroi K. Parl.	Heidi Perez- Managing Partner		
Signature of Contractor's Authorized Official  Dan Enterprises Team, LLC	Printed Name and Title of Contractor's Authorized Official 04/07/2025		
Contrator / Name of Company	Date		
DEBARMENT, SUSPENSION	AND OTHER RESPONSIBILITY MATTERS		

As required by 7 CFR Part 3017, for persons entering into a contract, grant or cooperative agreement over \$25,000 involving the expenditure of Federal funds, the undersigned certifies for itself and its principals that:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a Government entity (Federal, State, or local) with commission of any offenses enumerated in paragraph (b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transaction (Federal, State, or local) terminated for cause or default; and

Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

Horai K. Pav.	Heidi Perez- Managing Partner		
Signature of Contractor's Authorized Official	Printed Name and Title of Contractor's Authorized Official		
Dan Enterprises Team, LLC	04/07/2025		
Contrator / Name of Company	Date		



NA

#### Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure)

a. contract b. grant c. cooperative agreement d. loan e. loan guarantee	app b. initi	ederal / offer / plication al award st-award	3. Report Type:  a. initial filing  b. material change  For material change only:  Year quarter  Date of last report	
4. Name and Address of Reporting Prime Subawardee	8 50 1		ring Entity in No. 4 is Subawardee, me and Address of Prime:	
Prime Subawardee Tier,	Share remer	Linter Na	me and Address of Filme.	
a) la			- A/u	
Congressional District, if know	vn:	Congre	essional District, if known:	
6. Federal Department/Agency:		7. Federal F	Program Name/Description:	
NA	ć.		per, if applicable:	
8. Federal Action Number, if known:		9. Award A	mount, if known:	
	h/b	\$	N A .	
10. a. Name and Address of Lobby	ring		als Performing Services (including	
Registrant (if individual, last name, first name,	MI):		ifferent from No. 10a) e, first name, MI):	
	NA		p A.	
11. Information requested through this form is authorized by Title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required		Signature:	Hero; K. Prav.	
		Print Name: Hosos Ponot.		
		Title:	PANAGIOS PARTOEN.	
disclosure shall be subject to a civil penalty of \$10,000 and not more than \$100,000 for each s	not less than uch failure.	Telephone I	No.: 307 343 V74V. Date: 04/3/222V	

NA.