

This certificate, issued by: **Definity Insurance Company**  
(NAME OF INSURER, INSURANCE COMPANY ONLY, NOT AGENT)

**111 Westmount Rd S, PO Box 2000**  
(ADDRESS OF INSURANCE COMPANY)

**Waterloo ON N2J 4S4**

is evidence that vehicle insurance that provides third party liability insurance coverage has been issued to:

**M&J LOGISTICS INC.**  
(NAME OF INSURED)

**90 EDILICAN ROAD**  
(COMPLETE ADDRESS OF INSURED)

**CONCORD ON L4K 3S5**

**866-807-5699**  
(INSURED FAX NUMBER)

**max@mandjlogistics.com**  
(INSURED EMAIL ADDRESS)

- a common carrier of goods or passengers
- military personnel – in-training
- a full-time student enrolled and attending a recognized educational institution

in the amount prescribed by the Insurance (Vehicle) Act of British Columbia covering all vehicles owned and operated **and/or** leased and operated in the name of the insured which are registered and base-plated in:

- (1) All Canadian jurisdictions, or
- (2) All U.S. jurisdictions, or
- (3) All Canadian and U.S. jurisdictions, or
- (4) Specific jurisdictions: \_\_\_\_\_

under Policy No. **64043988**, and that the insurance is in full force and effect and will not be cancelled or terminated by expiry or otherwise, except upon 10 days notice in writing to the Insurance Corporation of British Columbia, PO Box 7500, Stn Terminal, Vancouver, BC V6B 5R9.

Certificate dated this 19 of September 2024, at Kitchener ON.  
DAY MONTH YEAR

**Please remit \$30 Filing Fee with this form**

*Dave McCutchen*  
SIGNATURE OF PERSON AUTHORIZED BY INSURER  
(Must match specimen signature on our file. Stamped signatures not accepted.)

**Dave McCutchen**  
(Please print name clearly)

**519-570-8200**  
TELEPHONE NUMBER

**519-570-8389**  
FAX NUMBER

**ontariocommercial@economical.com**  
EMAIL ADDRESS