


DELIVER TO:
 City of Fort Pierce, Purchasing Division
 Room 101
 100 North U.S. #1
 Fort Pierce, FL 34950

MAIL TO:
 City of Fort Pierce Purchasing Division,
 Room 101
 P.O. Box 1480
 Fort Pierce, FL 34954-1480

CITY OF FORT PIERCE



**INVITATION TO BID
 and
 BIDDER ACKNOWLEDGMENT**

Bid Writer: Gelencia Carter, (772) 467-3102

Bid No: 2026-022

Pre-Bid Conference:
 11:00AM, THURSDAY, JANUARY 29, 2026

Bid Title: CDBG COACH FENN PARK IMPROVEMENT PROJECT

Mandatory Site-Visit Location:
 COACH FENN PARK
 NORTH 23RD STREET AND AVENUE K
 FORT PIERCE, FL 34947

Bid Opening Location:
 Purchasing Division Conference Room, Room 101
 100 North U.S. #1, 1st Floor
 Ft. Pierce, Florida 34950

Bid Due Date & Time:
 3:00 PM, WEDNESDAY, FEBRUARY 11, 2026

If you need any reasonable accommodation for any type of disability in order to participate in this procurement, please contact this department as soon as possible.

Bidder Name:
 SoCal Shaker Plates & Construction Site Services, LLC
 dba National General Construction

I hereby certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a bid for the same materials, supplies or equipment, and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this bid and certify that I am authorized to sign this bid for the bidder.

Mailing Address:
 643 US Hwy 1, Unit 13094

X 
 Authorized Signature (Manual)

City, State, Zip Code:
 North Palm Beach, FL 33408

Typed or Printed Name:
 Maverick Cissell

Type of Entity (Select one):
 Corporation LLC
 Partnership
 Proprietorship

Title:
 Manager Member

Incorporated in the State of: FL **Year:** 2021

Delivery in 120 **days, After Receipt Order**

Phone Number: 951-813-8541

Payment Terms: Net 30 Days

Fax Number:

FEIN or SS Number: 85-4013411

E-Mail Address: mc@nationalgc.net

Local Business: Y N **MWBE:** Y N

Bid Security is attached, when required, in the amount of \$ 626,591.15
 F.O.B. DESTINATION

If returning as a "No Bid" state reason:

THIS PAGE MUST BE COMPLETED AND RETURNED WITH YOUR BID

BID NO. 2026-022
BID RESPOSNE FORM
CDBG COACH FENN PARK IMPROVEMENTS

Item	Quantity	Unit	Unit Price	Item Total
1 Mobilization, demo, ins, etc. not to exceed 5% of construction cost.	1	LS	\$25,000.00	\$25,000.00
2 Maintenance of traffic (MOT), contractor shall furnish all materials	1	LS	\$2,500.00	\$2,500.00
3 Contractor shall provide all materials, labor, tools, equipment and all incidentals to complete all clearing, grubbing, root-taking and necessary clean up operations in connection with the construction of the work and its related site work	1	LS	\$80,000.00	\$80,000.00
4 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install temporary and permanent erosion control measures including silt fence, inlet protection, and stabilization.	1	LS	\$25,000.00	\$25,000.00
5 Contractor shall provide all materials, labor, tools, equipment, and incidentals to perform excavation, fill, compaction, fine grading, and subgrade preparation in accordance with the civil grading plans.	1	LS	\$80,000.00	\$80,000.00
6 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install stormwater drainage features including retention areas, swales, trench drains, and related appurtenances shown on the drawings.	8600	SF	\$2.33	\$20,038.00
7 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install aggregate base, leveling course, and compaction for hardscape areas.	7800	SF	\$0.84	\$6,552.00
8 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install concrete parking, and associated joints and finishes as shown on the plans.	5200	SF	\$10.00	\$52,000.00
9 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install turf block parking, and associated joints and finishes as shown on the plans.	2600	SF	\$15.00	\$39,000.00
10 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install parking stripping and finishes as shown on the plans.	1	LS	\$6,500.00	\$6,500.00
11 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install concrete sidewalks, and associated joints and finishes as shown on the plans.	900	SF	\$10.00	\$9,000.00
12 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install domestic cold water piping systems, including trenching and excavation, service piping, distribution lines, fittings, isolation valves, tracer wire, sleeves, supports, connections, back flow prevention, testing, and final terminations serving the splash pad and restroom facilities. The scope includes installation of six (6) parallel supply lines for the splash pad over the indicated linear.	310	LF	\$50.00	\$15,500.00
13 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install all underground sanitary sewer, waste, and vent piping, including trenching, bedding, pipe, fittings, cleanouts, vents, blockouts, and backfill for the prefabricated restroom building.	150	LF	\$80.65	\$12,097.50

14 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install all underground sanitary and vent piping, including trenching, bedding, pipe, fittings, cleanouts, vents, blockouts, and backfill for the splash pad recirculation system.	160	LF	\$80.65	\$12,904.00
15 Contractor shall provide all materials, labor, tools, equipment, and incidentals to excavate, prepare, proof-roll, moisture condition, and compact subgrade beneath slabs, pads, and footings.	1	LS	\$15,000.00	\$15,000.00
16 Contractor shall provide all materials, labor, tools, equipment, and incidentals to construct reinforced concrete foundations, stub ups coordinatoin and isntallation, and anchorage for the prefabricated restroom building.	260	SF	\$57.69	\$14,999.40
17 Contractor shall provide all materials, labor, tools, equipment, and incidentals to construct reinforced concrete foundations for the pavilion structure.	250	SF	\$100.00	\$25,000.00
18 Contractor shall provide all materials, labor, tools, equipment, and incidentals to construct splash pad structural slab, thickened edges, and utility blockouts.	320	SF	\$93.75	\$30,000.00
19 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install the splash pad polyaspartic surface coating system, including surface preparation, application, curing, and finishing, in the design pattern and color scheme selected by the City.	320	SF	\$187.50	\$60,000.00
20 Contractor shall provide all materials, labor, tools, equipment, and incidentals to install sleeves, embeds, drains, blockouts, and excavation/foundations required for splash pad plumbing and splash pad Vak Pak, reservoir tank equipment installation.	1	LS	\$20,000.00	\$20,000.00
21 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install a 10-inch thick compacted gravel bed at the splash pad pump yard.	400	SF	\$37.50	\$15,000.00
22 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install a chain-link fence enclosure around the splash pad pump yard, including posts, rails, fabric, tension wire, gates, hardware, concrete footings, and coordination with equipment clearances.	85	LF	\$117.65	\$10,000.25
23 Contractor shall provide all materials, labor, tools, equipment, and incidentals to furnish and install above ground and underground electrical conduit, including trenching, excavation, bedding, sweeps, warning tape, backfill, compaction, sleeves, and restoration of disturbed areas for electrical distribution to the splash pad and prefabricated restroom building.	1	LS	\$40,000.00	\$40,000.00
24 Contractor shall provide all materials, labor, tools, equipment, and incidentals to perform final grading, surface restoration, and cleanup of all disturbed areas.	1	LS	\$7,500.00	\$7,500.00
25 Permit fee allowance to reimburse the contractor for any permit by the City. Each bidder shall palce the amount of \$3,000 in this line item for city calculation purposes.	1	AL	\$3,000.00	\$3,000.00

Total Base Bid

\$626,591.15

Bidder's Name:

SoCal Shaker Plates & Construction Sire Services LLC
dba National General Construction

CITY OF FORT PIERCE BIDDER'S CHECKLIST

This checklist is provided to assist each Bidder in the preparation of their bid response. Included in this checklist are important requirements, which is the responsibility of each Bidder to submit with their response in order to make their response fully compliant. This checklist is only a guideline, it is the responsibility of each Bidder to read and comply with the Invitation to Bid in its entirety.

Check "Yes" or "No" to each of the following:	YES	NO
Is Invitation to Bid cover page (page 1) completed, signed and attached?	✓	
Did you include proof of proper insurance as stated in the bid documents?	✓	
Is Bid Response Form completed, signed and attached?	✓	
Did you complete, signed and attached the W-9 Form?	✓	
All prices have been reviewed for mathematical accuracy, all price corrections initialed, and all price extensions and totals thoroughly checked.	✓	
Include proof of proper licensing as stated in bid documents.	✓	
Hard Copy Submissions Only: Are the correct copies included? One (1) original and One (1) USB Drive?	DemandStar	
Is each Bid Addendum (when issued) signed and included?	✓	

PLEASE SIGN AND RETURN WITH BID



Maverick Cissell, Manager Member 02/11/26

BID FORMS

**PROPOSAL TO
THE CITY OF FORT PIERCE FOR
BID NO. 2026-022
CDBG COACH FENN PARK IMPROVEMENTS**

NAME OF BIDDER: SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

MAILING ADDRESS: 643 US Hwy 1, Unit 13094, N Palm Beach, FL 33408

STREET ADDRESS: 648 Riverside Rd, North Palm Beach, FL 33408 (Zip Code)

PHONE NUMBER: 951-813-8541

To the: City of Fort Pierce

Pursuant to and in compliance with your notice inviting sealed proposals (Call for Bids), Instructions to Bidders, and the other documents relating thereto, the undersigned bidder, having familiarized himself with the terms of the Contract Documents, local conditions affecting the performance of the contract, and the cost of the Work at the place where the Work is to be done, hereby proposes and agrees to perform within the time stipulated in the Contract, including all of its component parts and everything required to be performed, and to provide and furnish any and all utility and transportation services necessary to perform the contract and complete in a workmanlike manner, all of the Work required in connection with the construction of said Work, all in strict conformity with the plans and/or details, specifications and other related Contract Documents included herein.

The undersigned Bidder acknowledges receipt of the following Addenda, which have been considered in preparation of this Bid:

No. <u>01</u>	Dated <u>01/27/2026</u>	No. _____	Dated _____
No. <u>02</u>	Dated <u>02/03/2026</u>	No. _____	Dated _____
No. <u>03</u>	Dated <u>02/11/2026</u>	No. _____	Dated _____

The undersigned Bidder agrees that the Work shall be achieved final construction within 150 calendar days according to the schedule and the Notice to Proceed set forth in these Documents.

The undersigned Bidder further agrees to pay liquidated damages as described herein and engineering and field inspection expenses, due to overtime work and avoidable delays, which shall be in addition to such other amounts for actual delay damages.

Bidder has stated all prices in numerals in accordance with Section 11.2 of the Instruction to Bidders in the blank space(s) provided for that purpose. Bidder has completed all portions of the Bid to avoid disqualification.

The undersigned, as Bidder, declares that the Bid is made in good faith; that this proposal is made without collusion with any person, firm, or corporation; and he proposes and agrees, if the proposal is accepted, that he will execute a contract with the City in the form set forth in the Contract Documents;

BID FORMS

Notice of Proceed shall be issued by the City with the specified Work to be completed as described in Section 8 of the General Conditions, within the number of days stated when each Project Contract Time begins to run as specified in the Notice to Proceed.

Work shall be completed, ready for final payment in accordance with Section 8 and 9 of the General Conditions.

Time is of the essence of this Contract and Contractor recognizes that the City will suffer financial loss if the Work, or portions authorized, is not completed within the number of days stated above. Accordingly, Contractor agrees to pay City the liquidated damages stated in the Agreement for each day after the time specified above that the Work is not complete in accordance with Sections 8 and 9 of the General Conditions and with the Agreement.

These liquidated damages are cumulative and additive and represent a reasonable estimate of City's expenses for extended delays. Furthermore, Contractor agrees to pay City expenses for inspection, engineering services, and administrative costs associated with such delay.

In addition to these amounts, there may be additional other amounts for delay damages incurred by City as a result of delays by Contractor. These actual delay damages will include, but not be limited to, delay damage settlements or awards, penalties, and professional fees incurred in connection with such settlements, awards, or penalties and fines imposed by regulatory agencies, contract damages, and loss of use.

ACCOMPANYING THIS PROPOSAL IS 10% Bidders Bond

(Insert the word(s) "cashier's check," "bidder's bond," "certified check," or other security as provided by law, as the case may be), in an amount equal to at least 10% of the total amount of the bid, payable to the CITY OF FORT PIERCE the undersigned deposits above-named security as a proposal guarantee and agrees that it shall be forfeited to the City as liquidated damages in case this proposal is accepted by the City and the undersigned fails to execute a contract with the City as specified in the Contract Documents, accompanied by the required payment and faithful performance bonds, with sureties satisfactory to the City, and accompanied by the required certificates of insurance coverage and endorsements. Should the City be required to engage the services of an attorney in connection with the enforcement of this bid, bidder promises to pay City reasonable attorneys' fees and costs (including attorneys' fees and costs on appeals), incurred with or without suit.

The Work shall be performed under a State of Florida Contractor's License. Contract shall not be awarded unless proof of valid license(s) is provided, and license shall be appropriate for the nature of the Work.

The Bidder certifies that the following documents are included in the Bid and are complete:

1. Bid form, list of Addenda received, and authorized signatures.
2. Bid Bond with Power of Attorney attached.
3. Affidavit of Non-Collusion.
4. Trench Safety Act Form.

The Bidder further certifies that he will submit within ten (10) days of notification of the Apparent Successful Bidder:

BID FORMS

- 1. List of Major Subcontractors
- 2. Payment Bond
- 3. Performance Bond
- 4. Agreement
- 5. Certificates of Insurance

NOTE: If bidder is a corporation, the legal name of the corporation shall be set forth below, together with signature(s) of the officer or officers authorized to sign contracts on behalf of the corporation and corporate seal; if bidder is a partnership, the true name of the firm shall be set forth below with the signature(s) of the partner or partners authorized to sign contracts in behalf of the partnership; and if the bidder is an individual, his signature shall be placed below.

Bidder: SoCal Shaker Plates & Construction Site Services, LLC
dba National General Construction
(Type or Print)

By: 


Name: Maverick Cissell

Title: Manager Member

Dated: 02/11/2026, ~~2024~~

(Corporate Seal)

Attest
If Corporation

By: 
(Signature)

Name: Maverick Cissell

Title: Manager Member

Witnesses: Nick Smith
(Signature)

(If partnership
Or individual) _____
(Signature)

Contractor's License (State, Number, Expiration Date, Type of License)

FL CGC 1533402 expires 08/31/2026

END OF SECTION


BID FORMS

IN WITNESS WHEREOF, the above parties have executed this instrument under their several seals this 9th day of February, 2024, the name and corporate seal of each corporate party being hereto affixed, and these presents duly signed by its undersigned representative pursuant to authority of its governing body.

WITNESSES
(if individual
or partnership)

PRINCIPAL

SoCal Shaker Plates & Construction Site Services, LLC
dba National General Construction

By: 
(Signature)

Name: Maverick Cissell

Title: Manager Member

ATTEST (if corporation)

By: 
(Signature)

Name: Nikki Smith

Title: Witness
(Corporate Seal)

SURETY

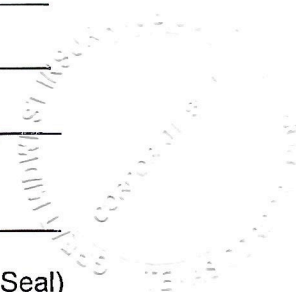
GREAT MIDWEST INSURANCE COMPANY

By: 
(Signature)

Name: KEVIN VEGA

Title: ATTORNEY-in-FACT

(Surety Seal)



BID FORMS
BID FORMS

Attach a certified copy of Power of Attorney appointing individual Attorney-in-Fact for execution of Bid Bond on behalf of Surety.

Any Claims under this bond may be addressed to:

Name of Surety GREAT MIDWEST INSURANCE COMPANY

Mailing Address 800 GESSNER #600 HOUSTON, TX 77024

Street Address _____

Name and Mailing and Street _____

Address of Agent or 534 E. BADILLO ST. COVINA, CA 91723

Representative in Florida _____

(if different than above) _____

Telephone Number of Surety 626-859-1000

and Agent or Representative _____

in Florida _____

END OF SECTION

POWER OF ATTORNEY

Great Midwest Insurance Company

KNOW ALL MEN BY THESE PRESENTS, that GREAT MIDWEST INSURANCE COMPANY, a Texas Corporation, with its principal office in Houston, TX, does hereby constitute and appoint: Philip E. Vega, Kevin Vega, Britton Christiansen

its true and lawful Attorney(s)-In-Fact to make, execute, seal and deliver for, and on its behalf as surety, any and all bonds, undertakings or other writings obligatory in nature of a bond.

This authority is made under and by the authority of a resolution which was passed by the Board of Directors of GREAT MIDWEST INSURANCE COMPANY, on the 1st day of April, 2025 as follows:

Resolved, that the President, or any officer, be and hereby is, authorized to appoint and empower any representative of the Company or other person or persons as Attorney-In-Fact to execute on behalf of the Company any bonds, undertakings, policies, contracts of indemnity or other writings obligatory in nature of a bond not to exceed One-Hundred Million dollars (\$100,000,000.00), which the Company might execute through its duly elected officers, and affix the seal of the Company thereto. Any said execution of such documents by an Attorney-In-Fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company. Any Attorney-In-Fact, so appointed, may be removed in the Company's sole discretion and the authority so granted may be revoked as specified in the Power of Attorney.

Resolved, that the signature of the President and the seal of the Company may be affixed by electronic mail on any power of attorney granted, and the signature of the Secretary, and the seal of the Company may be affixed by electronic mail to any certificate of any such power and any such power or certificate bearing such electronic signature and seal shall be valid and binding on the Company. Any such power so executed and sealed and certificate so executed and sealed shall, with respect to any bond of undertaking to which it is attached, continue to be valid and binding on the Company.

IN WITNESS THEREOF, GREAT MIDWEST INSURANCE COMPANY, has caused this instrument to be signed by its President, and its Corporate Seal to be affixed this 8th day of April, 2025.



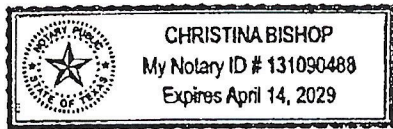
GREAT MIDWEST INSURANCE COMPANY

BY Mark W. Haushill

Mark W. Haushill
President

ACKNOWLEDGEMENT

On this 8th day of April 2025, before me, personally came Mark W. Haushill to me known, who being duly sworn, did depose and say that he is the President of GREAT MIDWEST INSURANCE COMPANY, the corporation described in and which executed the above instrument; that he executed said instrument on behalf of the corporation by authority of his office under the By-laws of said corporation.



BY Christina Bishop

Christina Bishop
Notary Public

CERTIFICATE

I, the undersigned, Secretary of GREAT MIDWEST INSURANCE COMPANY, A Texas Insurance Company, DO HEREBY CERTIFY that the original Power of Attorney of which the foregoing is a true and correct copy, is in full force and effect and has not been revoked and the resolutions as set forth are now in force.

Signed and Sealed at Houston, TX this 9th Day of February 2026.



BY Patricia Ryan

Patricia Ryan
Secretary

"WARNING: Any person who knowingly and with intent to defraud any insurance company or other person, files and application for insurance of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

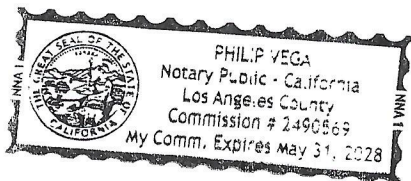
State of California }
 } ss.
 County of LOS ANGELES }

On February 9th, 2026 before me, Philip Vega, Notary Public
Here Insert Name and Title of the Officer
 personally appeared Kevin Vega, Attorney-in-Fact
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal



Signature: _____

(Signature)
 Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title of Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Individual
 Corporate Officer Title(s): _____
 Partner - Limited General
 Attorney in Fact
 Trustee
 Guardian or Conservator
 Other:

Right Thumbprint of Signer
 Top of thumb here

Signer's Name: _____
 Individual
 Corporate Officer Title(s): _____
 Partner - Limited General
 Attorney in Fact
 Trustee
 Guardian or Conservator
 Other:

Right Thumbprint of Signer
 Top of thumb here

Signer is Representing:

Signer is Representing:

BID FORMS

BIDDER'S QUALIFICATIONS QUESTIONNAIRE

All questions must be answered, and the data given must be clear and comprehensive. This statement must be notarized. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information he desires. Qualifications Questionnaire must be submitted with the Proposal.

1. Name of Bidder. SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction
2. Permanent Main Office address. 648 Riverside Rd, North Palm Beach, FL 33408
3. When organized? August 2021
4. If a corporation, where incorporated? Florida LLC
5. How many years have you been engaged in construction under this present firm or trade name? Four Years Six Months
- * 6. Contracts on hand: (Schedule of these, showing gross amount of each contract and the appropriate anticipated dates of completion.) * See Attached
7. General character of work performed by you. General Contractor
8. Have you ever failed to complete any work awarded to you? If so, where and why? NO
9. Have you ever defaulted on a contract? If so, where and why? NO
- * 10. List the more important contracts recently completed by you, stating approximate gross costs of each and the month and year completed. Include the name and telephone number of contact in company for which you provided work.
- * 11. List your major equipment available for this contract.
- * 12. Experience in general construction work similar in scope to this project. (If additional space is needed or required, it may be attached to this sheet.)
- * 13. Background and experience of the principal members of your company, including the officers.
14. Give bank reference. Chase Bank 3030 SW Martin Downs Blvd Palm City FL 34990 Mary Soucie 772-403-6143
15. You will furnish a detailed financial statement and, upon request, any other information that may be required by the City of Fort Pierce. Yes, upon request
16. The Undersigned hereby authorizes and requests any person, firm, or corporation to furnish any information requested by the City of Fort Pierce in the County of St. Lucie

6. CURRENT PROJECTS

	1	2	3
STATUS	In Progress	In Progress	Delayed by County
PROJECT	Preserve Trail at the Port	OL Peacock Sr Park	White City Park Shoreline
OWNER	City of Port St Lucie	City of Port St Lucie	St Lucie County
CONTACT	Zak Sherman	Zak Sherman	Daniel Finz
PHONE	772-871-5083	772-871-5083	772-275-8999
TITLE	Project Manager	Project Manager	Project Manager
ARCHITECT	Culpepper & Terpening	Captec Engineering	Dredging & Marine Consultants
AMOUNT	\$971,531.00	\$ 1,973,971.59	\$287,573.00
% DONE	90%	20%	0%
DATE COMPLETE	March 2026	Sept 2026	TBD

10. COMPLETED PROJECTS

	1	2	3	4	5	6	
PROJECT	Treasure Coast Airport	Ballfield Renovations	Indrio Savannah Wet Pond	Fairwinds Golf Course Cart Barn	Swale & Excavation & Improve	Lake Shore Tennis Court Removal	Metal Building Sitework
OWNER	St Lucie County	St Lucie County	St Lucie County	St Lucie County	City of Miramar	City of Miramar	City of Pembroke Pines
CONTACT	Ann Mullen	Brandon Clark	William Cor...	Mark Camm...	Horace Derricks	Adriel Brown	Jim Mulvaney
PHONE	772-462-2350	772-924-5703	772-462-2841	772-462-2707	305-724-4673	ajbrown@miramarfl.gov	954-450-1060 954-445-9613
TITLE	Airport / Project Manager	Project Manager	Project Manager	Fairwinds GM / Project Manager	Project Manager	Parks & Recreation	Project Manager
ARCHITECT	C&S Engineers	County Engineering Dept	Kimley Horn	County Engineering Dept	City Dept	N/A	Calvin Giordano & Assoc
AMOUNT	\$ 1,273,424.65	\$240,152.00	\$802,998.00	\$448,801.00	\$72,900.00	\$16,000.00	\$723,000.00
DATE COMPLETED	January 2026	July 2025	June 2025	June 2025	September 2024	June 2024	March 2024
% DONE IN HOUSE	20%	90%	75%	50%	95%	100%	70%

BID FORMS

in verification of the recitals comprising this Bidder's Qualifications Questionnaire.

Yes, upon request

11. Equipment - Skidsteer, Dozer, Loader, Dumptruck, Excavator

12. Similar Experience - see also the attachment for line items 6 & 10.

Those contracts all span the necessary experience including grading, excavation, paving, water, sewer, electric, landscaping, concrete pads, pre-fab structures and erosion control and work in park environments.

13. Backgrounds -

Maverick Cissell, Manager Member

19 years construction experience; commercial, residential, public works; superintendent

Jay A Zuppardo, Superintendent

49 years construction experience; commercial, residential, public works; superintendent

Jay Z Zuppardo, Superintendent

17 years construction experience; commercial, residential, public works; superintendent

BID FORMS

Dated at 10:00 am this 11 day of February, 2026.

Contractor:

SoCal Shaker Plates & Construction Site Services, LLC
dba National General Construction

By *[Signature]*

Maverick Cissell, Manager Member
(Name & Title)

County of Palm Beach

State of Florida

Maverick Cissell, being duly sworn, deposes and says that he is Manager Member of SoCal Shaker Plates & Construction Site Services, LLC, dba National General Construction, and that the answers to the foregoing questions and all statements contained therein are true and correct.

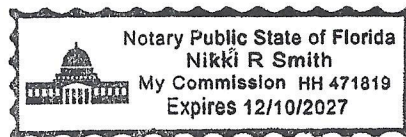
Subscribed and sworn to before me this 11 day of February, 2026.

Nikki Smith *[Signature]*
Notary Public

My Commission Expires:

December 10, 2027

(Seal)



END OF SECTION

BID FORMS

NON-COLLUSION AFFIDAVIT

STATE OF Florida

COUNTY OF Palm Beach

Maverick Cissell, being first duly sworn, deposes and says:

That he/she is Manager Member
(a partner or officer of the firm of, etc.)

the party making the foregoing proposal or bid, that such proposal or bid is genuine and not collusive or sham; that said bidder has not colluded, conspired, connived or agreed directly or indirectly with any bidder or person, to put in a sham bid or to refrain from bidding, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference with any person, to fix the bid price of affiant or of any other bidder, or to fix any overhead, profit or cost element of said bid price, or of that of any other bidder, or to secure any advantage against the City of Fort Pierce, of the County of St. Lucie, or any person interested in the proposed contract; and that all statements in said proposal or bid are true.

SoCal Shaker Plates & Construction Site Services, LLC
dba National General Construction
(Firm Name)

By: Maverick Cissell *[Signature]*

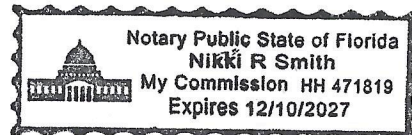
Title: Manager Member

Subscribed and sworn to before me this 11
day of February, 2026

Nikki Smith *[Signature]*
Notary Public

My Commission expires: (Seal)

December 10, 2027



END OF SECTION

BID FORMS

PUBLIC ENTITY CRIMES AFFIDAVIT

SWORN STATEMENT UNDER SECTION 287.133(3)(a),
FLORIDA STATUTES, ON PUBLIC ENTITY CRIMES

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

1. This sworn statement is submitted with Bid No. 2026-022 for **CDBG Coach Fenn Park Improvements**
2. This sworn statement is submitted by SoCal Shaker Plates & Construction Site Services, LLC
dba National General Construction
_____ (name of entity submitting sworn statement)
whose business address is 648 Riverside Rd, North Palm Beach, FL 33408
_____ and (if applicable) its Federal Employer Identification Number (FEIN) is 85-4013411
_____ (If the entity has no FEIN, include the Social Security Number of the individual signing this sworn statement: _____.)
3. My name is Maverick Cissell _____ my relationship to the entity
(please print name of individual signing)
named above is Manager Member _____.
4. 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 or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
5. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without 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.
6. 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

BID FORMS

term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

7. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

8. 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.)

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.

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.)**

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.)

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.)**

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.)

BID FORMS

CERTIFICATION OF NON-SEGREGATED FACILITIES


The Bidder certifies that he does not maintain or provide for his employees any segregated facilities at any of his establishments, and that he does not permit his employees to perform their services at any location, under his control where segregated facilities are maintained. The Bidder certifies further that he will not maintain or provide for his employees any segregated facilities at any of his establishments, and that he will not permit his employees to perform their services at any location under his control where segregated facilities are maintained. The Bidder agrees that a breach of this certification will be a violation of the Equal Opportunity clause in any contract resulting from acceptance of this Bid. As used in this certification, the term "segregated facilities" means any waiting rooms, work areas, restrooms and washrooms, restaurants, and other eating areas, time clocks, locker rooms, and other storage or dressing areas, parking lots, drinking fountains, recreation or entertainment areas, transportation, and housing facilities provided for employees which are segregated on the basis of race, color, religion, or national origin, because of habit, local custom, or otherwise. The Bidder agrees that (except where he has obtained identical certification from proposed subcontractors for specific time periods) he will obtain identical certifications from proposed subcontractors, exempt from the provisions of the Equal Opportunity clause, and that he will retain such certification in his files.

NOTE: The penalty for making false statements in offers is prescribed in 18 U.S.C. 1001.

DATE: February 11 , 2026

Official Address
(Including Zip Code):

648 Riverside Rd, North Palm Beach, FL 33408

By: Maverick Cissell 

Manager Member

(Title)

END OF SECTION

BID FORMS

TRENCH SAFETY ACT COMPLIANCE STATEMENT
BID NO. 2026-022

Instructions:

Chapter 90-96 of the Laws of Florida requires all contractors engaged by the City of Fort Pierce to comply with Occupational Safety and Health Administration Standard 29 C.F.R. s. 1926.650 Subpart P. All prospective contractors are required to sign the compliance statement and provide compliance cost information where indicated below. The costs for complying with the Trench Safety Act must be incorporated into this project's base bid.

Certify this form in the presence of a notary public or other officer authorized to administer oaths.

Certification:

1. I understand that Chapter 90-96 of the Laws of Florida (The Trench Safety Act) requires me to comply with OSHA Standard 29 C.F.R. s. 1926.650 Subpart P. I will comply with The Trench Safety Act and I will design and provide trench safety systems at all trench excavations in excess of five feet in depth for this project.

2. The estimated cost imposed by compliance with The Trench Safety Act will be:

Zero Dollars
\$0.00 (Written)
(Figures)

3. The amount listed above has been included within the Base Bid.

Certified: SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

(Company-Contractor)

By: *[Signature]*

(President's Signature)

Maverick Cissell Manager Member

(President's Typed or Printed Name)

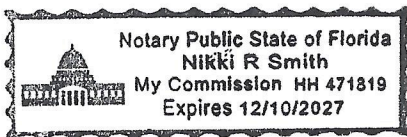
Notarization:

Sworn to and subscribed before me in Palm Beach County, Florida on the 11 day of February, 2026.

Notary Public: Nikki Smith (affix seal)

Nikki Smith

My Commission Expires: December 10, 2027



END OF SECTION

BID FORMS

DRUG-FREE WORKPLACE FORM

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction does:
(Name of Business)

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 proposed a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace thorough implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.



Proposer's Signature

02/11/2026

Date

END OF SECTION

CONTRACTOR VERIFICATION FORM

FORT PIERCE, FLORIDA
SEALED BID NO. 2026-022

PROJECT TITLE: CDBG COACH FENN PARK IMPROVEMENTS

THE FOLLOWING IS TO COMPLETED BY PRIME BIDDER:


Name of firm: SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

Corporate Title: SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

Address: 648 Riverside Rd, North Palm Beach, FL 33408

(Zip Code)

By: Maverick Cissell Manager Member
(Print name) (Print title)



(Authorized Signature)

Telephone: (951) 813-8541

Fax: () _____

State License # CGC 1533402 (ATTACH COPY)

County License # _____ (ATTACH COPY)

City License: (ATTACH PROOF OF REGISTRATION WITH THE CITY)

Type of License: _____

Unlimited _____(yes/no)

If "NO", Limited to what trade? _____

END OF SECTION



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

CISSELL, MAVERICK

SOCAL SHAKER PLATES & CONSTRUCTION SITE SERVICES, LLC
27475 YNEZ RD
#389
TEMECULA CA 92591

LICENSE NUMBER: CGC1533402

EXPIRATION DATE: AUGUST 31, 2026

Always verify licenses online at MyFloridaLicense.com

ISSUED: 01/02/2025

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.



E-VERIFY
FORT PIERCE, FLORIDA

PROJECT: CDBG COACH FENN PARK IMPROVEMENTS

Bid No.: 2026-022

Project Description: **Installation of utilities, construction of park improvements and parking lot with stormwater facilities, pavilion construction, and installation of a fully operation ADA compliant splash pad.**

Vendor/Consultant acknowledges and agrees to the following:

1. Vendor/Consultant shall utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the Vendor/Consultant during the term of the contract; and
2. shall expressly require any subcontractors performing work or providing services pursuant to this contract to likewise utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.


SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

Company/Firm:

Authorized Signature:

Title:

Date:



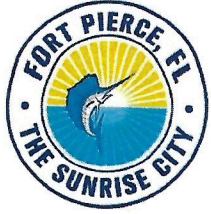
Manager Member

02/11/2026

END OF SECTION

January 27, 2026

CITY OF FORT PIERCE



CDBG COACH FENN PARK IMPROVEMENT PROJECT

BID NO. 2026-022

ADDENDUM NO. 1

This Addendum is issued to formally include certain exhibits that were referenced within the bid documents but were inadvertently not attached at the time of initial advertisement.

ADDITION OF EXHIBITS


Accordingly, the following exhibits are hereby attached and incorporated into the Bid Document:

- **Exhibit H: CXT, Inc. – Prefab Restroom Reference Drawings**
- **Exhibit I: RCP Shelters Pavilion Preliminary Drawings and Quote (2 Attachments)**
- **Exhibit J: Rain Drop Splashpad Quote and Drawings**

These exhibits are now officially part of the solicitation and shall be considered in the preparation and submission of all bids.

All other conditions of this bid remain the same.

Please acknowledge receipt of this addendum and include it with you submittal.

Signature: 
Manual

Signature: Maverick Cissell Manager Member
Typed or Printed

Company Name: SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

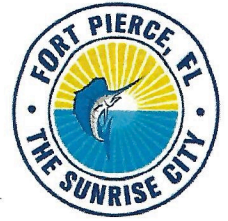
Address: 648 Riverside Rd, North Palm Beach, FL 33408

Date: 02/11/2026

/mw

Attachments: See the PDF documents for Exhibits H,I, and J.

February 3, 2026



CITY FORT PIERCE

CDBG COACH FENN PARK IMPROVEMENT PROJECT

RFP NO. 2026-022


ADDENDUM NO. 2

The purpose of this addendum is to provide the Specific Purpose Survey and revisions to the Drawing Index for this project. Please see the attached Drawing Index, which reflects revisions made by our Engineer.

1. **G-001** – Revises Exhibit C Cover SS to update the Drawing Index.
2. **S-101** – Revises Exhibit C Structural SS.
3. **S-102** – New drawing added.

All other conditions of this bid remain the same.

Please acknowledge receipt of this addendum and include it with your submittal.

Signature: 

Manual

Signature: Maverick Cissell Manager Member

Typed or Printed

Company Name: SoCal SHaker Plates & Construction Site Services LLC dba National General Construction

Address: 648 Riverside Rd North Palm Beach FL 33408

Date: 02/11/2026

/lh

Attachments: Specific Purpose Survey
 Revised Drawing Index.

February 11, 2026

CITY OF FORT PIERCE



CDBG COACH FENN PARK IMPROVEMENT PROJECT

BID NO. 2026-022

ADDENDUM NO. 3

It has come to the City's attention that certain documents necessary for interested bidders to prepare a complete and responsive submission were not made available on all required platforms at the time of advertisement.

Specifically:

- The **Bid Response Form** excel worksheet was inadvertently omitted from the solicitation package.
- The **Civil Drawings** were posted on the City's website but were not uploaded to DemandStar.

To ensure fairness, transparency, and equal access to information for all prospective bidders, the City is issuing this Addendum to provide the missing documents and extend the bid due date.


The documents are attached and made part of the solicitation.

The bid due date is extended has been extended to:

Friday, February 13, 2026; 3PM

All other conditions of this bid remain the same.

Please acknowledge receipt of this addendum and include it with your submittal.

Signature: 
Manual

Signature: Maverick Cissell
Typed or Printed

Company Name: SoCal Shaker Plates & Construction Site Services, LLC dba National General Construction

Address: 648 Riverside Rd, North Palm Beach, FL 33408

Date: 02/12/2026

/gc

Attachments: Bid Response Form
Ex. C – Drawings – Coach Fenn Park – Civic SS

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 <i>Specific instructions</i> on page 3.	<p>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.)</p> <p>SoCal Shaker Plates & Construction Site Services LLC</p> <p>2 Business name/disregarded entity name, if different from above.</p> <p>National General Construction</p> <p>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.</p> <p> <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Other (see instructions) _____ </p> <p>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 <input type="checkbox"/></p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: center;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>643 US Hwy 1 Unit 13094</p> <p>6 City, state, and ZIP code</p> <p>North Palm Beach FL 33408</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

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.

Social security number									
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1	1								

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.

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 Here	Signature of U.S. person	Date 2025/11/02
------------------	--------------------------	------------------------

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

THE VILLAGE OF NORTH PALM BEACH

2025-2026 BUSINESS TAX RECEIPTS

701 US HIGHWAY 1 SUITE 100
NORTH PALM BEACH, FL 33408
561-841-3365

SoCal Shaker Plates & Construction Site Services LLC
643 US Hwy 1 Unit 13094
North Palm Beach, FL 33408

(951) 813-8541

Address: 648 Riverside Rd
North Palm Beach, FL 33408

Activity: Home Based Business / Personal Service
Services - Miscellaneous personal service NEC
SoCal Shaker Plates & Construction Site Services LLC

Issued to: SoCal Shaker Plates & Construction Site Services LLC
648 Riverside Rd
North Palm Beach, FL 33408

NO: 310705
CUSTOMER ID NO: BTR-2025-73

DATE: 10/29/2025

MUST BE POSTED CONSPICUOUSLY AT THE PLACE OF BUSINESS

PAID - EXPIRES SEPTEMBER 30, 2026

**LATE FEES APPLY OCTOBER 1, 2026 (RENEWAL NOTICE MAILING NOT
REQUIRED)**

PLEASE NOTIFY THE VILLAGE BUILDING DEPARTMENT IF THE BUSINESS RELOCATES OR CLOSES



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company
SOCAL SHAKER PLATES & CONSTRUCTION SITE SERVICES, LLC

Filing Information

Document Number	L22000084227
FEI/EIN Number	85-4013411
Date Filed	02/14/2022
Effective Date	08/27/2021
State	FL
Status	ACTIVE
Last Event	CONVERSION
Event Date Filed	02/14/2022
Event Effective Date	NONE

Principal Address

648 Riverside Rd
North Palm Beach, FL 33408

Changed: 09/30/2025

Mailing Address

643 US Highway 1 #13094
North Palm Beach, CA 33408

Changed: 02/11/2025

Registered Agent Name & Address

ALPER TRUSTEES, LLC
255 PRIMERA BLVD STE 160
LAKE MARY, FL 32764

Authorized Person(s) Detail

Name & Address

Title MGR

CISSELL, MAVERICK
648 Riverside Rd
North Palm Beach, FL 33408

Annual Reports

Report Year	Filed Date
2024	02/20/2024
2025	01/10/2025
2025	09/30/2025

Document Images

09/30/2025 -- AMENDED ANNUAL REPORT	View image in PDF format
01/10/2025 -- ANNUAL REPORT	View image in PDF format
02/20/2024 -- ANNUAL REPORT	View image in PDF format
02/28/2023 -- ANNUAL REPORT	View image in PDF format
02/14/2022 -- Florida Limited Liability	View image in PDF format



[Previous on List](#) . [Next on List](#) . [Return to List](#)

[Filing History](#)

Fictitious Name Search

Submit

Fictitious Name Detail

Fictitious Name

NATIONAL GENERAL CONSTRUCTION

Filing Information

Registration Number G23000120601
Status ACTIVE
Filed Date 09/28/2023
Expiration Date 12/31/2028
Current Owners 1
County MULTIPLE
Total Pages 4
Events Filed 3
FEI/EIN Number 85-4013411

Mailing Address

643 US HIGHWAY 1
 #13094
 NORTH PALM BEACH, FL 33408

Owner Information

SOCAL SHAKER PLATES & CONSTRUCTION SITE SERVICES, LLC
 648 RIVERSIDE RD
 NORTH PALM BEACH, FL 33408
FEI/EIN Number: 85-4013411
Document Number: L22000084227

Document Images

[09/28/2023 -- Fictitious Name Filing](#)

View image in PDF format

[09/26/2025 -- CHANGE NAME/ADDRESS](#)

View image in PDF format

[03/14/2025 -- CHANGE NAME/ADDRESS](#)

View image in PDF format

[03/13/2025 -- CHANGE NAME/ADDRESS](#)

View image in PDF format

[Previous on List](#) . [Next on List](#) . [Return to List](#)

[Filing History](#)

Fictitious Name Search

Submit

Florida Department of State, Division of Corporations



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/20/2026

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 have ADDITIONAL INSURED provisions or 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		CONTACT NAME: Anthony Caracciolo	
Caracciolo Insurance Services, Inc. Dba Insurance Allstars Agency		PHONE (A/C. No. Ext): (951) 397-4010	FAX (A/C. No): (951) 742-4643
43950 Margarita Road Suite C		E-MAIL ADDRESS: Anthony@insallstars.com	
Temecula CA 92592		INSURER(S) AFFORDING COVERAGE	
		INSURER A: PartnerRE INS SOL BERMUDA, LTD	NAIC # AA-3191504
INSURED		INSURER B: WESCO INS CO	25011
So Cal Shaker Plates and construction site services LLC		INSURER C:	
DBA: National SWPPP Services		INSURER D:	
643 US Hwy 1 Unit 13094		INSURER E:	
Palm Beach FL 33408		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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	X	VCP2026012-01	1/19/2026	1/19/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	X	X	VCX2026007-01	1/19/2026	1/19/2027	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WES3805800	09/10/2025	09/10/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Contractors Pollution	X	X	VCP2026012-01	1/19/2026	1/19/2027	Occurrence \$1,000,000 Aggregate \$2,000,000 Deductible \$10,000

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

Proof of Coverage

CERTIFICATE HOLDER**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

Anthony Caracciolo

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