COMMERCIAL COLLECTION SERVICE FRANCHISE APPLICATION CHECK-LIST

Applicant: Kings Trucking LLC Date: 01.05.26

Status	Brief Description of Application Requirements
☒ Met; 1. ☐ Not	Identity of the applicant, to include its principals, partners, and management. Section 4-1 C. (2)(a)
☒ Met; 2. ☐ Not Met	Evidence the entity is authorized to do business with the State of Florida and in good standing with the Department of State. Section 4-1 C. (2)(a)
☒ Met; 3. ☐ Not Met	Information regarding the experience and qualifications of the applicant and its personnel with regard to Solid Waste collection. Section 4-1 C. (2)(b)
☒ Met; 4. ☐ Not Met	Information about the applicant's (including its principals, partners, and officers) involvement as a subject or as a part in any litigation, criminal proceedings, or agency enforcement cases. Section 4-1 C. (2)(c) **MUST BE NOTARIZED**
☒ Met; 5. ☐ Not Met	List of all vehicles, equipment and other physical assets [by make, model, capacity, size, type and VIN] the applicant will use to collect and transport Solid Waste when providing Commercial Collection service within Polk County. Section 4-1 C. (2)(d)
☒ Met; 6. ☐ Not Met	List identifying the frequency of Commercial Collection Service applicant provides to its customers with the identification number, size, capacity, and type of each dumpster, roll cart, roll-off Container and compactor that the applicant will use to collect Commercial Solid Waste within the County. Section 4-1 C. (2)(e)
☒ Met; 7. ☐ Not Met	Applicant's acknowledgment and consent the County has the right to inspect the applicant's vehicles, Containers, compactors and other equipment at any time. Section 4-1 C. (2)(f)
☒ Met; 8. ☐ Not Met	Original Certificates of Insurance evidencing current compliance with CGL coverage (NLT $2M per occurrence) and State statutory workers' comp. coverage (or waiver). Section 4-1 C. (2)(g) **Certificate Holder: Polk County, a political subdivision of the State of Florida. 330 W Church St, Rm 150 Bartow, FL 33830**
☒ Met; 9. ☐ Not Met	Evidence the applicant has obtained all permits and licenses required by law or ordinance to provide Commercial Collection Service within the County. Section 4-1 C. (2)(h)
☒ Met 10. ☐ Not Met	Delivery of Sworn affidavit confirming: (i) no unsatisfied judgments pending against the applicant; (ii) no liens of record filed by the IRS or State against the applicant; (iii) applicant will comply with all Ord. requirements and all applicable laws. Section 4-1 C. (2)(i) **MUST BE NOTARIZED**
☒ Met; 11. ☐ Not Met	Delivery of written indemnity of County from any loss which may result from the applicant, its employees, subcontractors, agents, failure to perform in compliance with the terms of the franchise or the Ordinance. Section 4-1 C. (2)(j) **MUST BE NOTARIZED**
☒ Met 12. ☐ Not Met	Delivery of applicable Commercial Franchise application fee. Section 4-1 C. (5)

12:05 56:15 AOL AOL 5G 53

Detail by Entity Name

Florida Limited Liability Company
MICHAEL KING TRUCKING LLC

Filing Information

Document Number	L13000031739
FEI/EIN Number	20-0746838
Date Filed	03/01/2013
Effective Date	02/28/2013
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	01/30/2015

Principal Address

2487 Gerber Dairy
Winter Haven, FL 33880

Changed: 04/26/2018

Mailing Address

2487 Gerber Dairy
Winter Haven, FL 33880

Changed: 04/26/2018

Registered Agent Name & Address

KING, MICHAEL
2487 Gerber Dairy
Winter Haven, FL 33880

Name Changed: 01/30/2015

Address Changed: 04/26/2018

Authorized Person(s) Detail

Name & Address

Title MGRM

KING, MICHAEL
2487 Gerber Dairy
Winter Haven, FL 33880

Annual Reports

Report Year	Filed Date
2023	04/04/2023
2024	04/18/2024
2025	04/12/2025

Document Images

04/12/2025 – ANNUAL REPORT View image in PDF format

MICHKIN-01 SELLERBE

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/23/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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
Mitchell Insurance Agency, Inc.
2929 Lakeland Highlands Rd. Ste. 1
Lakeland, FL 33803

CONTACT NAME: Stephanie Lynn Ellerbe
PHONE (A/C, No, Ext): (863) 688-4455 FAX (A/C, No): (863) 688-4477
E-MAIL ADDRESS: steph@mitchellfl.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Southern Owners Ins. Co.	10190
INSURER B : Auto-Owners Insurance Company	18988
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Michael King Trucking LLC
2487 Gerber Dairy Road
Winter Haven, FL 33880

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	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$ 2,000,000
	CLAIMS-MADE [X] OCCUR	X		72234628	9/23/2025	9/23/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300,000
							MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 4,000,000
	X POLICY [ ] PRO-JECT [ ] LOC						PRODUCTS - COMP/OP AGG	$ 1,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO			4123462801	7/11/2025	7/11/2026	BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / X SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
							PIP	$ 10,000
	UMBRELLA LIAB / OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE / OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
General Liability Limit Increase Effective 12/15/2025

Additional insured in regards to commercial general liability (when required by written contract): Polk County, a political subdivision of the State of Florida

CERTIFICATE HOLDER

Polk County, a political subdivision of the State of Florida
330 W. Church Street
Room 150
Bartow, FL 33830

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
Stephanie Ellerbe

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STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

* * CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW * *

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 6/9/2025 **EXPIRATION DATE:** 6/9/2027

PERSON: MICHAEL B KING **EMAIL:** BODYWORX96@AOL.COM

FEIN: 200746838

BUSINESS NAME AND ADDRESS:

MICHAEL KING TRUCKING LLC

2487 GERBER DAIRY RD

WINTER HAVEN, FL 33880

This certificate of election to be exempt is NOT a license issued by the Department of Business and Professional Regulation. To determine if the certificate holder is required to have a license to perform work or to verify the license of the certificate holder, go to www.myfloridalicense.com.

IMPORTANT: Pursuant to subsection 440.05(13), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to subsection 440.05(11), F.S., Certificates of election to be exempt issued under subsection (3) apply only to the corporate officer named on the notice of election to be exempt. Pursuant to subsection 440.05(12), F.S., notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

MICHAEL KING TRUCKING LLC

10-20-2025

To whom it my concern:

As of the date of the correspondence stated above , Michael King Trucking LLC, as well as it's Managing/Owner Michael King has never had involvement as a subject or as a part in any litigation,criminal proceedings, or agency enforcement cases.

I, Michael King MGR\Owner of Michael King Trucking LLC do attest the above statement to be true and correct.

State Florida County of Polk

The foregoing instrument was acknowledged before me this 23rd day of October, 2025 Personally know or Produced identification

Jessica Gonzalez

JESSICA GONZALEZ
NOTARY PUBLIC
MY COMMISSION
EXPIRES 4-4-2026
STATE OF FLORIDA
COMMISSION NUMBER HH 240924

POLK COUNTY WASTE & RECYCLING

NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL VEHICLE LIST

FRANCHISEE Michael King trucking LLC

FOR YEAR _____

OFFICE USE ONLY

DATE RECEIVED _____

DATE TO AUDITING _____

ACCEPTED _____

VEHICLE MAKE	VEHICLE MODEL	YEAR	TYPE (RO, REL, FEL, ASL, ETC.)	CAPACITY (CU YD)	VEHICLE SIZE (GVW)	VEHICLE IDENTIFICATION NUMBER
Mack	Mack 600	1997	Roll off			1M2P267C8VM030404

REVISED 08/2014

POLK COUNTY WASTE & RECYCLING

NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL CONTAINER LIST

FRANCHISEE Michael King trucking LLC

FOR YEAR _____

OFFICE USE ONLY

DATE RECEIVED _____

DATE TO AUDITING _____

ACCEPTED _____

CUSTOMER NAME	CONTAINER TYPE/SIZE				CAPACITY (CU YD)	COLLECTION FREQUENCY		CONTAINER IDENTIFICATION NUMBER
	DUMPSTER	COMPACTOR	ROLL OFF	OTHER		ON CALL	DAYS/WK	
Rental			✓			✓		1-8
1-8						✓		
						✓		
						✓		
						✓		
						✓		
						✓		
						✓		
								✓
✓								

REVISED 08/2014

POLK COUNTY LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO. 13941 **CLASS: B** **EXPIRES: 09/30/2026**

OWNER NAME	LOCATION
MICHAEL KING TRUCKING LLC	1413 BERKLEY CT WINTER HAVEN

BUSINESS NAME AND MAILING ADDRESS

MICHAEL KING TRUCKING LLC
MICHAEL KING TRUCKING LLC
2487 GERBER DAIRY RD
WINTER HAVEN, FL 338805619

CODE	ACTIVITY TYPE
480010	COMMERCIAL DRIVER

PROFESSIONAL LICENSE (IF APPLICABLE)

-

OFFICE OF JOE G. TEDDER, CFC * TAX COLLECTOR	THIS POLK COUNTY LOCAL BUSINESS TAX RECEIPT MUST BE CONSPICUOUSLY DISPLAYED AT THE BUSINESS LOCATION

PAID - 3402325 07/07/2025 OPY **OLP 57.75** **MICHAEL KING TRUCKING LLC**

TC

[illegible] EXCLUSIVE FRANCHISE TO COLLECT, [illegible] COMMERCIAL SOLID WASTE WITHIN POLK COUNTY

STATE OF FLORIDA

Before me, the undersigned notary public authorized to administer oaths, personally appeared Michael King who, first being duly sworn, on oath deposes and states, as follows:

1) He is Michael King trucking LLC, a LLC corporation.

2) He has personal knowledge of the facts stated in this Affidavit and that all such facts are true and correct.

3) There are no unsatisfied judgments entered against Michael King trucking LLC

4) There are no liens of record filed by the Internal Revenue Service against michael King trucking LLC.

5) There are no liens of record filed by the State of Florida, or any agency or subdivision thereof, against michael King trucking LLC

6) michael King trucking LLC acknowledges and consents that the County shall have the right to inspect michael King trucking LLC vehicles, containers, compactors, and other equipment at any time.

7) During the time of the existing Commercial Franchise, Michael King trucking LLC has complied with all of the requirements stated in the Polk County Ordinance 13-069 and with all other applicable laws, and if awarded [illegible] Michael King trucking LLC will continue to comply with the same.

Further the affiant sayeth not.

Dated the 7th day of October, 2025

Michael King
Sworn Person Signature

Michael King owner
Printed Name and Title of Sworn Person

The foregoing instrument was sworn (or affirmed) and subscribed before me this 7th day of October, 2025, by Michael King, who is either ☑ personally known to me; or ☐ has produced _____ as identification.

JESSICA GONZALEZ NOTARY PUBLIC MY COMMISSION EXPIRES 4-4-2026 STATE OF FLORIDA COMMISSION NUMBER HH240924

(AFFIX OFFICIAL SEAL)

Jessica Gonzalez
Notary Public Signature

Jessica Gonzalez
Printed Name of Notary Public

HH240924 / 4-4-26
Notary Commission Number/Expiration

INDEMNITY

WHEREAS, THE UNDERSIGNED Michael Kins (the "Undersigned"), is the owner of Michael Kins trucking LLC (the "_____"), a LLC corporation,

WHEREAS, the Michael Kins trucking LLC, is herewith submitting an application to Polk County, a political subdivision of the State of Florida, (the "County") for the grant, renewal, or modification of a non-exclusive commercial franchise (a "Commercial Franchise") to collect, remove and transport commercial solid waste within the geographic areas of Polk County; and

WHEREAS, the Commercial Franchise application process is described in Polk County Ordinance 13-069 (the "Ordinance") and requires, among other matters, that an applicant indemnify the County from and against any loss which may result from the applicant, its employees, subcontractors, and agents, failure to perform in accordance with the terms of the awarded Commercial Franchise and the terms of the Ordinance; and

WHEREAS, the Undersigned is duly authorized to execute this instrument by and on behalf of the Michael Kins trucking LLC

NOW, THEREFORE, in consideration of the benefits accruing to the Michael Kins trucking LLC _____ and for other good and valuable consideration, the Undersigned, by and on behalf of the Michael Kins trucking LLC does hereby forever release, indemnify, keep, save, and hold harmless the County, its commissioners, officers, officials, and employees, from and against any and all damages, losses, penalties, liabilities, costs and expenses of any kind or nature whatsoever that is proximately caused by, incident to, resulting from, arising out of, or occurring in connection with, directly or indirectly, Michael Kins trucking LLC _____, its employees, subcontractors, or agents, failure to perform in compliance with the terms of the Commercial Franchise or failure to perform in compliance with the terms of the Ordinance.

IN WITNESS WHEREOF, the Undersigned has executed this instrument by and on behalf of the Michael Kins trucking LLC this 7th day of October, 20 25.

ATTEST:

By: Dalton Hart

Dalton Hart
[Printed Name, Title]

Michael Kins
a _____

By: Jessica Gonzalez

Jessica Gonzalez, Notary
[Printed Name, Title]

AFFIX NOTORIAL SEAL

JESSICA GONZALEZ
NOTARY PUBLIC
MY COMMISSION EXPIRES 4-4-2026
STATE OF FLORIDA
COMMISSION NUMBER HH 240924

MICHAEL KING TRUCKING LLC
2487 GERBER DAIRY RD
WINTER HAVEN FL 33880-5619

1826
63-1403/631

12-11-25
Date

CHECK ARMOR FRAUD PROTECTION

Pay to the Order of Polk County solid Waste $ 750.00

seven hundred fifty 00/100 Dollars

Photo Safe Deposit® Details on back

SouthState
SouthStateBank.com • 800.277.2175

For

Michael King

⑆063114030⑆ 20372520⑈ 01826