

PORT EVERGLADES FRANCHISE APPLICATION

An application will not be deemed complete and ready for processing until all required documents and fees are received.

A separate application must be filed for each type of franchise applied for.

FRANCHISE TYPE

CHECK ONE

☐

STEAMSHIP AGENT

☒

STEVEDORE

☐

CARGO HANDLER

☐

TUGBOAT & TOWING

☐

VESSEL BUNKERING

☐

VESSEL OILY WASTE REMOVAL

☐

VESSEL SANITARY WASTE WATER REMOVAL

☐

MARINE TERMINAL SECURITY

☐

MARINE TERMINAL SECURITY

FIREARMS CARRYING SECURITY PERSONNEL

NON-FIREARMS CARRYING SECURITY PERSONNEL

Note: Applicant is the legal entity applying for the franchise. If the Applicant is granted the franchise, it will be the named franchisee. All information contained in this application shall apply only to the Applicant, and not to any parent, affiliate, or subsidiary entities.

Applicant's

Name

Emex Construction Materials Florida LLC
(Name as it appears on the certificate of incorporation, charter, or other legal documentation as applicable, evidencing the legal formation of the Applicant)

Applicant's Business Address

Number /

Street

City/State/Zip

Phone #

(407) 243-5300

E-mail address

@

Fax #:

Name of the person authorized to bind the Applicant (Person's signature must appear on Page 13.)

Name

Title

Business Address

Number /

Street

City/State/Zip

Phone #

()

E-mail address

@

Fax #:

Provide the Name and Contact Information of Applicant's Representative to whom questions about this application are to be directed (if different from the person authorized to bind the Applicant):

Representative's Name

Representative's Title

Representative's Business Address

Number /

Street

City/State/Zip

Representative's Phone #

Representative's E-mail address

Representative's Fax #

PLEASE COMPLETE THIS APPLICATION AND LABEL ALL REQUIRED BACKUP DOCUMENTATION TO CLEARLY IDENTIFY THE SECTION OF THE APPLICATION TO WHICH THE DOCUMENTATION APPLIES (I.E., SECTION A, B, C, etc.).

Section A

1. List the name(s) of Applicant's officers, including, CEO, COO, CFO, director(s), member(s), partner(s), shareholder(s), principal(s), employee(s), agents, and local representative(s) active in the management of the Applicant.

Officers:

Title Regional President
First Name Jeffrey Middle Name _____
Last Name Bobolts
Business Street Address 800 N Magnolia Ave. Suite 300
City, State, Zip Code Orlando, Florida, 32803
Phone Number (407) 243-5800 Fax Number (____)
Email Address Jeffrey.B.Bobolts@Cemex.com.

Title Executive Vicepresident
First Name Tanya Middle Name _____
Last Name Foxe
Business Street Address 10100 Katy Freeway Suite 300
City, State, Zip Code Houston, Texas, 77043
Phone Number (800) 999-8529 Fax Number (____)
Email Address Tanya.Foxe@Cemex.com.

Title Vice president
First Name Gilberto Middle Name _____
Last Name Gonzalez
Business Street Address 800 N Magnolia Ave. Suite 300
City, State, Zip Code Orlando, Florida, 32803
Phone Number (407) 243-5800 Fax Number (____)
Email Address Gilberto.Gonzalez@Cemex.com.

Title Treasurer
First Name Tracie Middle Name A.
Last Name Tessier
Business Street Address 1720 Centre Park Drive East
City, State, Zip Code West Palm Beach, Florida, 33401
Phone Number (____) Fax Number (____)
Email Address TracieA.Tessier@Cemex.com.

Attach additional sheets if necessary.

2. RESUMES: Provide a resume for each officer, director, member, partner, shareholder, principal, employee, agent, and local representative(s) active in the management of the Applicant, as listed above.

Section B

1. Place checkmark to describe the Applicant:
() Sole Proprietorship () Corporation () Partnership () Joint Venture (☒) Limited Liability Company
2. Provide copies of the documents filed at the time the Applicant was formed including Articles of Incorporation (if a corporation); Articles of Organization (if an LLC); or Certificate of Limited Partnership or Limited Liability Limited Partnership (if a partnership). If the Applicant was not formed in the State of Florida, provide a copy of the documents demonstrating that the Applicant is authorized to conduct business in the State of Florida.

Section C

1. Has there been any change in the ownership of the Applicant within the last five (5) years? (e.g., any transfer of interest to another party)
Yes___ No ☒ If "Yes," please provide details in the space provided. Attach additional sheets if necessary.
2. Has there been any name change of the Applicant or has the Applicant operated under a different name within the last five (5) years?
Yes___ No ☒ If "Yes," please provide details in the space provided, including: Prior name(s) and Date of name change(s) filed with the State of Florida's Division of Corporations or other applicable state agency. Attach additional sheets if necessary.
3. Has there been any change in the officers, directors, executives, partners, shareholders, or members of the Applicant within the past five (5) years?
Yes ☒ No___ If "Yes," please provide details in the space provided, including:
Prior officers, directors, executives, partners, shareholders, members
Name(s) Karl Watson, Gonzalo Galindo, Bob Capasso, Kirk Light.
New officers, directors, executives, partners, shareholders, members
Name(s) Jeffrey Babalito, Tanya Foxe, Gilberto Gonzalez, Tracie Taylor
Also supply documentation evidencing the changes including resolution or minutes appointing new officers, list of new principals with titles and contact information, and effective date of changes. Attach additional sheets if necessary.

Section D

Provide copies of all fictitious name registrations filed by the Applicant with the State of Florida's Division of Corporations or other State agencies. If none, indicate "None" _____.

Section E

1. Has the Applicant acquired another business entity within the last five (5) years?
Yes___ No ✓ If "Yes," please provide the full legal name of any business entity which the Applicant acquired during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application.
If none, indicate "None" NONE.
2. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the acquired firm's officers, managers, employees and/or the acquired firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.
3. Has the Applicant been acquired by another business entity within the last five (5) years?
Yes___ No ✓ If "Yes," provide the full legal name of any business entity which acquired the Applicant during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application.
If none, indicate "None" NONE.
4. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the parent firm's officers, managers, employees and/or the parent firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.

Section F

Provide the Applicant's previous business history, including length of time in the same or similar business activities as planned at Port Everglades.

Section G

1. Provide a list of the Applicant's current managerial employees, including supervisors, superintendents, and forepersons.
2. List the previous work history/experience of the Applicant's current managerial employees, including their active involvement in seaports and length of time in the same or similar business activities as planned at Port Everglades.

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).

If none, state "None" _____.

Seaport Port Everglades Number of Years Operating at this Seaport _____

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
<u>Cerex Construction</u>	<u>19 years</u>
<u>Materials Florida LLC</u>	

SEE ATTACHED

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. **Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).**

If none, state "None" _____.

Seaport Tampa Number of Years Operating at this Seaport _____

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
<i>Exex Construction</i>	<i>33 years</i>
<i>Materials Florida LLC</i>	

SEE ATTACHED

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).

If none, state "None" _____.

Seaport Tensicola Number of Years Operating at this Seaport _____

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
<i>Cerex Construction</i>	<i>17 years</i>
<i>Materials Florida LLC</i>	

SEE ATTACHED

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).

If none, state "None" _____.

Seaport Palm Beach Number of Years Operating at this Seaport _____

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
<u>Corex Construction</u>	<u>38 years</u>
<u>Materials Florida LLC</u>	

SEE ATTACHED

Section I

1. Provide a description of all past (within the last five (5) years) and pending litigation and legal claims where the Applicant is a named party, whether in the State of Florida or in another jurisdiction, involving allegations that Applicant has violated or otherwise failed to comply with environmental laws, rules, or regulations or committed a public entity crime as defined by Chapter 287, Florida Statutes, or theft-related crime such as fraud, bribery, smuggling, embezzlement or misappropriation of funds or acts of moral turpitude, meaning conduct or acts that tend to degrade persons in society or ridicule public morals.

The description must include all of the following:

- a) The case title and docket number
- b) The name and location of the court before which it is pending or was heard
- c) The identification of all parties to the litigation
- d) General nature of all claims being made

If none, indicate "None" NONE.

2. Indicate whether in the last five (5) years the Applicant or an officer, director, executive, partner, or a shareholder, employee or agent who is or was (during the time period in which the illegal conduct or activity took place) active in the management of the Applicant was charged, indicted, found guilty or convicted of illegal conduct or activity (with or without an adjudication of guilt) as a result of a jury verdict, nonjury trial, entry of a plea of guilty or nolo contendere where the illegal conduct or activity (1) is considered to be a public entity crime as defined by Chapter 287, Florida Statutes, as amended from time to time, or (2) is customarily considered to be a white-collar crime or theft-related crime such as fraud, smuggling, bribery, embezzlement, or misappropriation of funds, etc. or (3) results in a felony conviction where the crime is directly related to the business activities for which the franchise is sought.

Yes ___ No X

If you responded "Yes," please provide all of the following information for each indictment, charge, or conviction:

- a) A description of the case style and docket number
- b) The nature of the charge or indictment
- c) Date of the charge or indictment
- d) Location of the court before which the proceeding is pending or was heard
- e) The disposition (e.g., convicted, acquitted, dismissed, etc.)
- f) Any sentence imposed
- g) Any evidence which the County (in its discretion) may determine that the Applicant and/or person found guilty or convicted of illegal conduct or activity has conducted itself, himself or herself in a manner as to warrant the granting or renewal of the franchise.

Section J

The Applicant must provide a current certificate(s) of insurance. Franchise insurance requirements are determined by Broward County's Risk Management Division and are contained in the Port Everglades Tariff No. 12 as amended, revised or reissued from time to time. The Port Everglades Tariff is contained in the Broward County Administrative Code, Chapter 42, and is available for inspection on line at: <http://www.broward.org/port/tariff>.

Section K

1. The Applicant must provide its most recent audited or reviewed financial statements prepared in accordance with generally accepted accounting principles, or other documents and information which demonstrate the Applicant's creditworthiness, financial responsibility, and resources, which the Port will consider in evaluating the Applicant's financial responsibility.

2. Has the Applicant or entity acquired by Applicant (discussed in Section E herein) sought relief under any provision of the Federal Bankruptcy Code or under any state insolvency law filed by or against it within the last five (5) year period?

Yes ☐ No ☒

If "Yes," please provide the following information for each bankruptcy or insolvency proceeding:

- a) Date petition was filed or relief sought
- b) Title of case and docket number
- c) Name and address of court or agency
- d) Nature of judgment or relief
- e) Date entered

3. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for the business or property of the Applicant?

Yes ☐ No ☒

If "Yes," please provide the following information for each appointment:

- a) Name of person appointed
- b) Date appointed
- c) Name and address of court
- d) Reason for appointment

4. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for any entity, business, or property acquired by the Applicant?

Yes ☐ No ☒

If "Yes," please provide the following information for each appointment:

- a) Name of person appointed
- b) Date appointed
- c) Name and address of court
- d) Reason for appointment

Section L

List four (4) credit references for the Applicant, one of which must be a bank. Use this format:

Name of Reference _____ Nature of Business _____
Contact Name _____ Title _____
Legal Business Street Address _____
City, State, Zip Code _____
Phone Number (____) _____

(Provide on a separate sheet.) *Attached Credit App.*

Section M

1. Security: Pursuant to Port Everglades Tariff 12, Item 960, all Franchisees are required to furnish an Indemnity and Payment Bond or Irrevocable Letter of Credit drawn on a U.S. bank in a format and an amount not less than \$20,000 as required by Broward County Port Everglades Department.
2. Has the Applicant been denied a bond or letter of credit within the past five (5) years?
Yes ___ No X
If "Yes," please provide a summary explanation in the space provided of why the Applicant was denied. Use additional sheets if necessary.

Section N

1. Provide a list and description of all equipment currently owned and/or leased by the Applicant and intended to be used by the Applicant for the type of service(s) intended to be performed at Port Everglades including the age, type of equipment and model number.
2. Identify the type of fuel used for each piece of equipment.
3. Indicate which equipment, if any, is to be domiciled at Port Everglades.
4. Will all equipment operators be employees of the Applicant, on the payroll of the Applicant, with wages, taxes, benefits, and insurance paid by the Applicant?
Yes X No ___
If "No," please explain in the space provided who will operate the equipment and pay wages, taxes, benefits, and insurance, if the franchise is granted. Use additional sheets if necessary.

Section O

Provide a copy of the Applicant's current Broward County Business Tax Receipt (formerly Occupational License).

Section P

1. Provide a copy of Applicant's safety program.
2. Provide a copy of Applicant's substance abuse policy.
3. Provide a copy of Applicant's employee job training program/policy.
4. Provide information regarding frequency of training.
5. Include equipment operator certificates, if any.

Section Q

1. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from any federal, state, or local environmental regulatory agencies?
Yes___ No X
2. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or civil penalties from the U.S. Coast Guard?
Yes___ No X
3. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from the Occupational Safety and Health Administration?
Yes___ No X

If you responded "Yes" to any of this section's questions 1, 2, or 3 above, please provide a detailed summary for each question containing the following information:

- a) Name and address of the agency issuing the citation or notice
- b) Date of the notice
- c) Nature of the violation
- d) Copies of the infraction notice(s) from the agency
- e) Disposition of case
- f) Amount of fines, if any
- g) Corrective action taken

Attach copies of all citations, notices of violations, warning notices, civil penalties and fines issued by local, state, and federal regulatory agencies, all related correspondence, and proof of payment of fines.

4. Provide a statement (and/or documentation) which describes the Applicant's commitment to environmental protection, environmental maintenance, and environmental enhancement in the Port.

Section R

Provide written evidence of Applicant's ability to promote and develop growth in the business activities, projects or facilities of Port Everglades through its provision of the services (i.e., stevedore, cargo handler or steamship agent) it seeks to perform at Port Everglades. For first-time applicants (stevedore, cargo handler and steamship agent), the written evidence must demonstrate Applicant's ability to attract and retain new business such that, Broward County may determine in its discretion that the franchise is in the best interests of the operation and promotion of the port and harbor facilities. The term "new business" is defined in Chapter 32, Part II of the Broward County Administrative Code as may be amended from time to time.

By signing and submitting this application, Applicant certifies that all information provided in this application is true and correct. Applicant understands that providing false or misleading information on this application may result in the franchise application being denied, or in instances of renewal, a franchise revoked. Applicant hereby waives any and all claims for any damages resulting to the Applicant from any disclosure or publication in any manner of any material or information acquired by Broward County during the franchise application process or during any inquiries, investigations, or public hearings.

Applicant further understands that if there are any changes to the information provided herein (subsequent to this application submission) or to its officers, directors, senior management personnel, or business operation as stated in this application, Applicant agrees to provide such updated information to the Port Everglades Department of Broward County, including the furnishing of the names, addresses (and other information as required above) with respect to persons becoming associated with Applicant after its franchise application is submitted, and any other required documentation requested by Port Everglades Department staff as relating to the changes in the business operation. This information must be submitted within ten (10) calendar days from the date of any change made by the Applicant.

Applicant certifies that all workers performing functions for Applicant who are subject to the Longshore and Harbor Workers' Act are covered by Longshore & Harbor Workers' Act, Jones Act Insurance, as required by federal law.

This application and all related records are subject to Chapter 119, F.S., the Florida Public Records Act.

By its execution of this application, Applicant acknowledges that it has read and understands the rules, regulations, terms and conditions of the franchise it is applying for as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended, and agrees, should the franchise be granted by Broward County, to be legally bound and governed by all such rules, regulations, terms and conditions of the franchise as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended.

The individual executing this application on behalf of the Applicant, personally warrants that s/he has the full legal authority to execute this application and legally bind the Applicant.

Signature of Applicant's Authorized
Representative _____ Date Signed _____

Signature name and title - typed or printed _____

Witness Signature (*Required*) _____
Witness name-typed or printed _____

Witness Signature (*Required*) _____
Witness name-typed or printed _____

If a franchise is granted, all official notices/correspondence should be sent to:

Name Alejandro Gonzalez Title Terminal Manager
Address 2800 E. Sunrise Blvd. 33216 Phone (954) 423-9683

Jeff Bobolts
Regional President, Florida Region

As the Regional President of the Florida Region, Jeff is responsible for regional commercial sales activities, as well as aggregates, ready mix, and other building materials operations. Jeff joined CEMEX in 2002 and has held various positions within the company including Vice President and General Manager Florida Aggregates, Vice President and General Manager Phoenix Aggregates/Asphalt and Vice President and General Manager Orlando/Ocala Ready Mix. Jeff holds a bachelor's degree in Economics from Florida State University and an MBA in International Business from the University of Central Florida. Jeff is actively involved in industry organizations and has served on the Board of Directors for the Florida Concrete & Products Association and is currently serving on the Board of Directors for the Florida Limerock & Aggregates Institute.

Gilberto Gonzalez Gonzalez
Vice President, Florida Region

Tanya Foxe
Executive Vice President, Supply Chain

Responsible for CEMEX USA Supply Chain operations encompassing planning, procurement, customer care and logistics operations; in addition to full P&L and operational responsibility for the transportation and fly ash business units.

Tracie A. Tessier
Treasurer

Managerial Employee List

<u>Name</u>	<u>Title</u>	<u>Seaport Activity</u>	<u>Industry Activity</u>
Santiago Penzini	Vp Logistics	10	20
Gregory Jeffries	Regional Logistics Mgr.	1	1
Alejandro Gonzalez	Terminal Mgr.	1	1
Chris Trento	Ass. Terminal Mgr.	1	1
Helen Lowery	Office Mgr.	27	46

CERTIFICATE OF FORMATION
OF
CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC

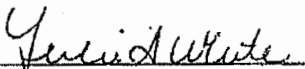
This Certificate of Formation of CEMEX Construction Materials Florida, LLC (the "Company"), dated as of August 1, 2008, is being duly executed and filed by Leslie S. White, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act, 6 Del. C. §§ 18-101 *et seq.*

1. Name. The name of the limited liability company formed hereby is CEMEX Construction Materials Florida, LLC.

2. Registered Office. The address of the registered office of the Company in the State of Delaware is Corporate Creations Network Inc., 3411 Silverside Road, Rodney Building No. 104, Wilmington, New Castle County, Delaware 19810.

3. Registered Agent. The name and address of the registered agent for service of process on the Company in the State of Delaware is Corporate Creations Network Inc., 3411 Silverside Road, Rodney Building No. 104, Wilmington, New Castle County, Delaware 19810.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the date first written above.


Name: Leslie S. White
Title: Authorized Person

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:09 AM 08/01/2008
FILED 11:06 AM 08/01/2008
SRV 080838199 - 4382687 FILE

State of Florida

Department of State

I certify from the records of this office that CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC is a Delaware limited liability company authorized to transact business in the State of Florida, qualified on August 13, 2008.

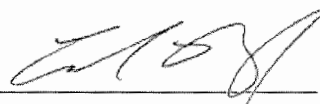
The document number of this limited liability company is M08000003758.

I further certify that said limited liability company has paid all fees due this office through December 31, 2022, that its most recent annual report was filed on April 20, 2022, and that its status is active.

I further certify that said limited liability company has not filed a Certificate of Withdrawal.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Eighteenth day of May, 2022*




Secretary of State

Tracking Number: 6410670130CU

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

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

COPY

CERTIFICATE OF CONVERSION
OF
RINKER MATERIALS OF FLORIDA, INC.
(a Florida corporation)

TO
CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC
(a Delaware limited liability company)

FILED
08 AUG -1 PM 4:15
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

This Certificate of Conversion is being duly executed, delivered and filed by the undersigned to convert Rinker Materials of Florida, Inc., a Florida corporation (the "Company"), to CEMEX Construction Materials Florida, LLC, a Delaware limited liability company, pursuant to Section 607.1113 of the Florida Statutes.

1. The Company has been converted into a Delaware limited liability company named "CEMEX Construction Materials Florida, LLC" (the "LLC") in compliance with Chapter 607 of the Florida Statutes (the "Conversion"), and the Conversion complies with the applicable laws governing the LLC.
2. The Plan of Conversion providing for the Conversion was adopted and approved by the consent of the Board of Directors and the sole shareholder of the Company in accordance with Chapter 607 of the Florida Statutes.
3. The effective date of the Conversion shall be the date that the Certificate of Conversion and Certificate of Formation of the LLC are filed with the Secretary of State of the State of Delaware (the "Effective Time").
4. The registered address of the LLC in the State of Delaware is c/o Corporate Creations Network Inc., 3411 Silverside Road, Rodney Building No. 104, Wilmington, New Castle County, Delaware 19810.
5. The LLC appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of the Company, including any appraisal rights of shareholders of the Company under Sections 607.1301 - 607.1333 of the Florida Statutes, and the street and mailing address of an office which the Florida Department of State may use for purposes of Section 607.1114(4) of the Florida Statutes is: c/o Corporate Creations Network Inc., 3411 Silverside Road, Rodney Building No. 104, Wilmington, New Castle County, Delaware 19810.
6. The LLC has agreed to pay any shareholder of the Company having appraisal rights the amount to which they are entitled under Sections 607.1301 - 607.1333 of the Florida Statutes.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of
Conversion this 18th day of AUGUST, 2008.

RINKER MATERIALS OF FLORIDA, INC.

By: Leslie S. White
Name: Leslie S. White
Title: Vice President

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF CONVERSION OF A FLORIDA CORPORATION UNDER THE NAME OF "RINKER MATERIALS OF FLORIDA, INC." TO A DELAWARE LIMITED LIABILITY COMPANY, CHANGING ITS NAME FROM "RINKER MATERIALS OF FLORIDA, INC." TO "CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF AUGUST, A.D. 2008, AT 11:06 O'CLOCK A.M.

4582687 8100V

080838199

You may verify this certificate online
at corp.delaware.gov/authver.shtml



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6767155

DATE: 08-01-08

CERTIFICATE OF CONVERSION TO LIMITED LIABILITY COMPANY

OF

RINKER MATERIALS OF FLORIDA, INC.,

(a Florida corporation)

TO

CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC,

(a Delaware limited liability company)

This Certificate of Conversion to Limited Liability Company, dated as of August 1, 2008 (the "Certificate"), is being duly executed and filed by Leslie S. White, as an authorized person of CEMEX Construction Materials Florida, LLC, a Delaware limited liability company (the "LLC"), to convert Rinker Materials of Florida, Inc., a Florida corporation (the "Company") to the LLC, under the Delaware Limited Liability Company Act, 6 Del. C. §§ 18-101, *et seq.* (the "Act").

1. The Company was originally incorporated as a Florida corporation under the name "Rinker Materials Corporation" by the filing of its Certificate of Incorporation with the Secretary of State of the State of Florida on June 26, 1951, and was incorporated under the laws of the State of Florida immediately prior to the filing of this Certificate

2. The Company's name immediately prior to filing this Certificate was "Rinker Materials of Florida, Inc."

3. The name of the Delaware limited liability company into which the Company shall be converted as set forth in the certificate of formation as filed in accordance with Section 18-214(b) of the Act is "Cemex Construction Materials Florida, LLC."

4. The conversion of the Company to the LLC shall be effective upon the filing of this Certificate and a certificate of formation with the Secretary of State of the State of Delaware.

[SIGNATURE PAGE FOLLOWS]

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:09 AM 08/01/2008
FILED 11:06 AM 08/01/2008
SRV 080838199 - 4582687 FILE

IN WITNESS WHEREOF, the undersigned has executed this Certificate of
Conversion as of the date first above written.

By: Leslie S. White
Leslie S. White
Authorized Person

Delaware

PAGE 2

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE DO HEREBY CERTIFY THAT THE ATTACHED IS A TRUE AND CORRECT COPY OF CERTIFICATE OF FORMATION OF "CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC" FILED IN THIS OFFICE ON THE FIRST DAY OF AUGUST, A.D. 2008, AT 11:06 O'CLOCK A.M.



4582687 8100V

080838199

You may verify this certificate online
at corp.delaware.gov/authver.shtml

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6767155

DATE: 08-01-08

OFFICER'S CERTIFICATE

The undersigned, John V. Heffernan, Assistant Secretary of CEMEX Construction Materials Florida, LLC (the "Company") hereby certifies as follows:

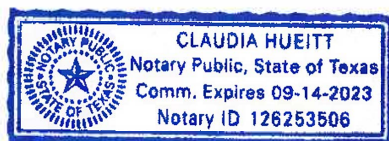
1. That he is the Assistant Secretary of the Company and that, as such officer, he has knowledge of the corporate records of the Company.
2. That Jeffrey B. Bobolts is President of the Company as of the date hereof and, as such, is authorized to execute and deliver documents and agreements.
3. That Tanya Foxe is Vice President of the Company as of the date hereof and, as such, is authorized to execute and deliver documents and agreements.
4. That Gilberto Gonzalez Gonzalez is Vice President of the Company as of the date hereof and, as such, is authorized to execute and deliver documents and agreements.
5. That Tracie A. Tessier is Treasurer of the Company as of the date hereof and, as such, is authorized to execute and deliver documents and agreements.


IN WITNESS WHEREOF, I have hereunto set my hand as of May 19, 2022.


John V. Heffernan
Assistant Secretary

STATE OF TEXAS
COUNTY OF HARRIS


The foregoing instrument was acknowledged before me this 19 day of May, 2022 by John V. Heffernan. He is personally known to me.




Notary Public, State of Texas
My Commission Expires: 9-14-2023

Section D

FILE TO RENEW NOW:
FICTITIOUS NAME WILL EXPIRE ON 12/31/08

SECRETARY OF STATE		FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS
APPLICATION FOR RENEWAL OF FICTITIOUS NAME		
REGISTRATION # G03064700219		
1. Name and Mailing Address		
0032630 01 AV 0.324 **AUTO TS 3 0606 33461-330533 CALLAWAY CONCRETE COMPANY 1933 8TH AVENUE NORTH LAKE WORTH FL 33461-3305		
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.		

2. Mailing Address change if applicable:		
Suite, Apt. #, etc. 1501 Belvedere Road		
City West Palm Beach	State FL	Zip Code 33406

FILED
Nov 05, 2008 8:00 am
Secretary of State

11-05-2008 90044 027 *****50.00
G08999001852



90022752

G03064700219

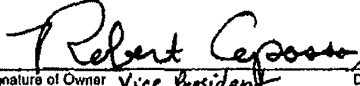
☐ CHECK HERE IF MAKING CHANGES
CR4E003 (1/08)

3. County of Principal Place of Business PALM BEACH	4. Date Registered 03/05/2003
5. Certificate of Status Desired <input type="checkbox"/> \$10 Additional Fee Required	

AN OWNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

6. CURRENT OWNER (S)		7. ADDITIONS / CHANGES TO OWNERS	
DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	162030 59-0815531 RINKER MATERIALS OF FLORIDA, INC. 1501 BELVEDERE ROAD WEST PALM BEACH FL 33406 <input checked="" type="checkbox"/> DELETE	DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	M08000003758 CEMEX Construction Materials Florida, LLC 1501 Belvedere Road West Palm Beach FL 33406 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	DOCUMENT # FEI # NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

8. I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. I further certify that the names of individuals listed on this form do not qualify for an exemption contained in section 119, Florida Statutes. (At least one signature required)

 09/11/08
Signature of Owner Vice President Date

Signature of Owner Date

APPLICATION FOR RENEWAL OF FICTITIOUS NAME

REGISTRATION# G96068000154

Fictitious Name: NEW LINE TRANSPORT

FILED
Jun 10, 2011
Secretary of State
G11000057583

Current Mailing Address:

1200 NW 137TH AVENUE
MIAMI, FL 33182

Current County of Principal Place of Business:

MIAMI-DADE

Current FEI Number:

Current Owner(s):

Document #: 162030 () Delete
FEI #: 59-0615531
Name: RINKER MATERIALS OF FLORIDA, INC.
Address: 1501 BELVEDERE RD
City-St-Zip: WEST PALM BEACH, FL 33406

New Mailing Address:

1501 BELVEDERE ROAD
TAX DEPT
WEST PALM BEACH, FL 33406

New County of Principal Place of Business:

PALM BEACH

New FEI Number:

Additions/Changes to Owner(s):

Document #: M08000003758 (X) Change () Addition
FEI #: 26-3068068
Name: CEMEX CONSTRUCTION MATERIALS OF FLORIDA, INC.
Address: 1501 BELVEDERE RD
City-St-Zip: WEST PALM BEACH, FL 33406

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I understand that the electronic signature below shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

ROBERT J CAPASSO

Electronic Signature(s)

06/10/2011

Date

Certificate of Status Requested ()

Certified Copy Requested ()

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

DOCUMENT# G08270900289

Fictitious Name to be Registered: CEMEX

Mailing Address of Business: 840 GESSNER, SUITE 1400
HOUSTON, TX 77024

Florida County of principal place of business: PALM BEACH

FEI Number:

FILED
Sep 26, 2008
Secretary of State

Owner(s) of Fictitious Name:

CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC
1501 BELVEDERE ROAD
WEST PALM BEACH, FL 33406
Florida Registration Number: M08000003758
FEI Number: Applied for

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. I (we) understand that the electronic signature(s) below shall have the same legal effect as if made under oath.

BY V.HAWK AS ATTORNEY-IN-FACT

09/26/2008

Electronic Signature(s)

Date

Certificate of Status Requested ()

Certified Copy Requested ()

APPLICATION FOR RENEWAL OF FICTITIOUS NAME

REGISTRATION# G06076900148

Fictitious Name: KEYS CONCRETE

FILED
Jun 10, 2011
Secretary of State
G11000057591

Current Mailing Address:

1501 BELVEDERE ROAD
WEST PALM BEACH, FL 33406

New Mailing Address:

1501 BELVEDERE ROAD
TAX DEPT
WEST PALM BEACH, FL 33406

Current County of Principal Place of Business:

MULTIPLE

New County of Principal Place of Business:

Current FEI Number:

New FEI Number:

Current Owner(s):

Document #: 162030 () Delete
FEI #: 59-0615531
Name: RINKER MATERIALS OF FLORIDA, INC.
Address: 1501 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Additions/Changes to Owner(s):

Document #: M08000003758 (X) Change () Addition
FEI #: 26-3088068
Name: CEMEX CONSTRUCTION MATERIALS OF FLORIDA, INC.
Address: 1501 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I understand that the electronic signature below shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

ROBERT J CAPASSO
Electronic Signature(s)

06/10/2011
Date

Certificate of Status Requested ()

Certified Copy Requested ()

APPLICATION FOR RENEWAL OF FICTITIOUS NAME

REGISTRATION# G05087900205

Fictitious Name: KREHLING-CEMEX

FILED
Aug 26, 2010
Secretary of State
G10000078792

Current Mailing Address:

1425 WIGGINS PASS RD. E.
NAPLES, FL 34110

Current County of Principal Place of Business:

MULTIPLE

Current FEI Number:

59-1393388

Current Owner(s):

Document #: 403640 () Delete
FEI #: 59-1393388
Name: KREHLING INDUSTRIES, INC.
Address: 1425 WIGGINS PASS RD. E.
City-St-Zip: NAPLES, FL 34110

New Mailing Address:

1501 BELVEDERE ROAD
TAX
WEST PALM BEACH, FL 33406

New County of Principal Place of Business:

New FEI Number:

Additions/Changes to Owner(s):

Document #: M08000003758 (X) Change () Addition
FEI #: 26-3068068
Name: CEMEX CONSTRUCTION MATERIALS FLORIDA LLC
Address: 1501 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I understand that the electronic signature below shall have the same legal effect as if made under oath.

GREG HAZLE

Electronic Signature(s)

08/26/2010

Date

Certificate of Status Requested ()

Certified Copy Requested ()

Section F

Section F

Business History

Cemex Construction Materials Florida, LLC and its predecessor companies have been operating in Port Everglades for thirty nine (39) years. The origin of operation started when Rinker Materials acquired the lease of the terminal in 1973. Cemex Construction Materials, LLC was formed in August 1, 2008 when Articles of Conversion were filed with the State of Florida resulting in a name change from Rinker Materials of Florida, Inc. to Cemex Construction Materials Florida, LLC.

Prior to the conversion, Rinker Materials of Florida, Inc. (formerly Rinker Materials Corporation) held stevedore and cargo handler franchises at Port Everglades beginning in 1991.

The primary function of the terminal is the importing of cement. This has led to building additional silos in 1984 and purchasing of a ship unloading system (Kovako) in 1992. As the growth in the South Florida market grew, Cemex added more silos (1995) as well as a transportation group to more efficiently distribute the cement. The terminal can import both gray and white cement to supply the Florida market. The gray cement is primarily used internally at our ready-mix facilities. The white cement is used for a variety of customers ranging from grout manufacturers to making art pieces to specialty construction. Cemex is in good standing with all of our seaports and is patiently waiting for the construction industry to improve so we will once again be a part of the economic growth in Florida.

Section G

Managerial Employee List

<u>Name</u>	<u>Title</u>	<u>Seaport Activity</u>	<u>Industry Activity</u>
Santiago Penzini	Vp Logistics	10	20
Gregory Jeffries	Regional Logistics Mgr.	1	1
Alejandro Gonzalez	Terminal Mgr.	1	1
Chris Trento	Ass. Terminal Mgr.	1	1
Helen Lowery	Office Mgr.	27	46

Section J



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
12/26/2021

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 Aon Risk Services Southwest, Inc. Houston TX Office 5555 San Felipe Suite 1500 Houston TX 77056 USA		CONTACT NAME: PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105 E-MAIL ADDRESS:															
INSURED Cemex Construction Materials Florida LLC 10100 Katy Freeway Suite 300 Houston TX 77043 USA		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: National Union Fire Ins Co of Pittsburgh</td> <td>19445</td> </tr> <tr> <td>INSURER B: AIU Insurance Company</td> <td>19399</td> </tr> <tr> <td>INSURER C: XL Insurance America Inc</td> <td>24554</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: National Union Fire Ins Co of Pittsburgh	19445	INSURER B: AIU Insurance Company	19399	INSURER C: XL Insurance America Inc	24554	INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #																
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INSURER B: AIU Insurance Company	19399																
INSURER C: XL Insurance America Inc	24554																
INSURER D:																	
INSURER E:																	
INSURER F:																	

COVERAGES **CERTIFICATE NUMBER:** 570090812097 **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 CERTIFICATION 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. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD 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 checked="" type="checkbox"/> LOC OTHER:		GL6882231 SIR applies per policy terms & conditions	01/01/2022	01/01/2023	EACH OCCURRENCE \$4,500,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$4,500,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$4,500,000 GENERAL AGGREGATE \$4,500,000 PRODUCTS - COMP/OP AGG \$4,500,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" 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		AL 7031049 AOS AL 7031052 VA	01/01/2022	01/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$5,000,000		US00106717LI22A	01/01/2022	01/01/2023	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000
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	WC065885932 CA WC065885933 NY	01/01/2022	01/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$2,500,000 E.L. DISEASE-EA EMPLOYEE \$2,500,000 E.L. DISEASE-POLICY LIMIT \$2,500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Re: Welding Permit.
Broward County is included as Additional Insured in accordance with the policy provisions of the General Liability, Automobile Liability, and Umbrella Liability policies. Workers Compensation Policy Number WC067940261 provides coverage for the LONGSHORE AND HARBOR WORKERS' COMPENSATION ACT. General Liability Self Insured Retention (SIR) for Cemex, Inc. is \$5,000,000.

CERTIFICATE HOLDER

CANCELLATION

Broward County 1850 Eller Drive Port Everglades FL 33316 USA	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
--	--

Holder Identifier : 2019-CCMF

Certificate No : 570090812097

000000 02 03 000861 001936 P

POLICY NUMBER: 688-22-31

COMMERCIAL GENERAL LIABILITY
CG 20 26 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED
PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):
"ANY PERSON OR ORGANIZATION WHOM YOU BECOME OBLIGATED TO INCLUDE AS AN ADDITIONAL INSURED AS A RESULT OF ANY CONTRACT OR AGREEMENT YOU HAVE ENTERED INTO."
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. **Section II - Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", property damage or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured

is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III - Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
 2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.





June 11, 2012

Broward County
Port Everglades Department
Business Administration Division
1850 Eller Drive
Fort Lauderdale, FL 33316

Re: Pollution/Environmental Impairment Liability

Please be advised that Cemex Inc. is self-insured in excess of \$1,000,000 for Environmental and Impairment Liability Insurance (Policy #PPLG23795206002).

Should you have any questions, please do not hesitate to contact me.

Thank you.

A handwritten signature in cursive script that reads "Viki Egan".

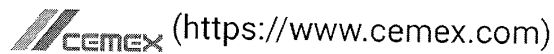
Viki Egan
Senior Claims Analyst

A handwritten signature in cursive script that appears to be "Paul".
D:\c:\m\palexander,
c:\t\c, and\c\c Management,
c:\u\Broward County,
email:palexander@broward.
org
Date: 2012.06.11 18:06:38
-0400

Section K

5/18/22, 12:11 PM

CEMEX reports highest EBITDA growth in a decade, with great progress on climate action agenda - CEMEX reports highest EBI...



EN ▾



CEMEX reports highest EBITDA growth in a decade, with great progress on climate action agenda

February 10, 2022

- **EBITDA grew 18% and Net Sales grew 14% driven by higher volumes and solid pricing performance in all core products during the year.**
- **Consolidated cement prices grew 5%, the largest annual pricing gain since 2016.**
- **Achieved leverage below 3 times¹ in 2021, with eyes on Investment Grade rating.**
- **Consolidated its Climate Action leadership: Record reduction in CO₂ emissions.**

CEMEX, S.A.B. de C.V. ("CEMEX") (NYSE: CX) announced today strong results for the full year 2021 with double-digit EBITDA growth, the highest in more than a decade, coupled with a double-digit increase in sales driven by higher volumes and robust pricing in all core products in all regions. EBITDA margin increased 0.8 percentage points in the year, despite headwinds in energy and import costs. CO₂ emissions declined 4.4 percentage points, the largest annual decline the company has ever achieved.

CEMEX's Consolidated 2021 Full Year and Fourth Quarter Financial and

<https://www.cemex.com/-/cemex-reports-highest-ebitda-growth-in-a-decade-with-great-progress-on-climate-action-agenda>

Section L

Credit Information

Business Name and Address	CEMEX, Inc. 10100 Katy Freeway, Suite 300 Houston, TX 77043
Telephone	(713) 650-6200
Federal ID#	72-0296500
Trade	Manufacturers of concrete block, pipe, ready-mix, concrete, asphalt, cement, and aggregate. Warehouse and sale of building materials.
Credit Rating	https://www.cemex.com/investors/debt-information/credit-ratings
Principal Officer	Francisco Salinas, Treasurer franciscojavier.salinas@cemex.com
Bank References	www.confirmation.com <i>Request must include:</i> <i>CEMEX, Inc.</i> <i>Company address</i> <i>Account Number</i> <i>Principal Officer's full name and email address, as listed above.</i> Please direct all questions to Gabriela Flores at gabriela.flores@cemex.com
Insurance Carrier	AIG
Main Subsidiaries	Ready Mix USA, LLC CEMEX Southeast, LLC CEMEX Construction Materials Atlantic, LLC CEMEX Construction Materials Florida, LLC CEMEX Construction Materials Houston, LLC CEMEX Construction Materials Pacific, LLC CEMEX Construction Materials South, LLC

Credit References

The Millennium Group

Megan Huston
Senior Billing Associate
Office: (732) 704-3215
Westbilling@tmgofficeservices.com

Chambliss Group

Hunter W. Chambliss
CEO
Office: (954) 938-7211
hunter@chamblissgroup.com

Exxon Mobil

Jack Smodic
National Account Sales Executive
Office: (832) 791-6055
jack.smodic@exxonmobil.com

USA Energy

Laura Langdon Plowman
Logistics Manager
Office: 205-758-0822
llangdon@warriorenergyco.com

United Equipment Rental

Thomas A. Wullen
National Accounts Manager
Office: (214) 674-1207
twullen@ur.com

Dyno Nobel Inc

Sotero Garza
Account Manager
Mobile: (305) 613-5024
sotero.garza@am.dynonobel.com

Section M

INDEMNITY AND PAYMENT BOND

BOND NO. 16-001-834

KNOW ALL MEN BY THESE PRESENTS:

That we, RINKER MATERIALS CORPORATION as INDEMNITOR and LIBERTY MUTUAL INSURANCE COMPANY as SURETY, a surety company authorized to do business in the State of Florida, are held and firmly bound unto BROWARD COUNTY, as OBLIGEE, a political subdivision of the State of Florida, in the full sum of Twenty Thousand DOLLARS (\$20,000.00), for the payment of which we bind ourselves, our heirs, successors, assigns and personal representatives for the performance of the obligations hereinafter set forth:

NOW THEREFORE, the condition of this obligation is such that if INDEMNITOR, its heirs, executors, administrators, successors and assigns shall well and truly save harmless and keep indemnified BROWARD COUNTY, its successors and assigns, from and against all loss, costs, expenses, damages, injury, claims, actions, liabilities and demands of every kind (including but not limited to all reasonable attorney's fees to and through appellate, supplemental and bankruptcy proceedings) which arises from, is caused by, or results from or on account of:

- (i) failure of INDEMNITOR to pay to BROWARD COUNTY, when due, any and all tariff or other charges that have accrued at Port Everglades (whether relating to the furnishing of services or materials to INDEMNITOR, its principals, agents, servants or employees at Port Everglades; or, due to injury to property of Port Everglades; or, stemming from the use of Port Everglades facilities by INDEMNITOR, its principals, agents, servants or employees; or, otherwise); or
- (ii) non-compliance by INDEMNITOR, its principals, agents, servants or employees with applicable laws, ordinances, rules and regulations of the federal, state and local governmental units or agencies (including but not limited to the terms and provisions of the BROWARD COUNTY Code of Ordinances, Administrative Code, and all procedures and policies of the Port Everglades Department), as amended from time to time; or
- (iv) any act, omission, negligence or misconduct of INDEMNITOR, its principals, agents, servants or employees in Port Everglades (whether causing injury to persons or otherwise;

then these obligations shall be null and void, otherwise to remain in full force and effect.

AS A FURTHER CONDITION of this obligation that it shall remain in full force and effect until and unless the Surety provides at least sixty (60) days prior written notice to BROWARD COUNTY of its intention to terminate this Bond.

IN WITNESS WHEREOF, INDEMNITOR has caused this Bond to be executed by Liberty Mutual Insurance Company and attested to by its Secretary and its corporate seal to be affixed, and the Surety has caused this Bond to be executed in its name by its Attorney-in-Fact duly authorized to do so.

Rinker Materials Corporation

INDEMNITOR

By: John H. Barry
President or Vice President
Corporate Seal

Attest: Depp Lenz
Corporate Secretary

13 day of December, 1996

Liberty Mutual Insurance Company SURETY

By: Catherine M. Lindsay
Catherine M. Lindsay, Attorney-In-Fact
Print or Type Name

Attest: See Power of Attorney
11th day of December, 1996

Charlotte M. Smith-Wilkes
Countersigned by Resident Agent of
Florida - Charlotte M. Smith-Wilkes

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

318241

This Power of Attorney limits the act of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

LIBERTY MUTUAL INSURANCE COMPANY
BOSTON, MASSACHUSETTS

POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS: That Liberty Mutual Insurance Company (the "Company"), a Massachusetts mutual insurance company, pursuant to and by authority of the By-law and Authorization hereinafter set forth, does hereby name, constitute and appoint, **EDWARD L. MITCHELL, CHARLOTTE A. DRIVER, SANDRA S. CARTER, SANDRA J. MATHIS, NICOLE ALLEN, GLEN R. BAILEY, CATHERINE M. LINDSAY, ALL OF THE CITY OF ATLANTA, STATE OF GEORGIA.**

each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations in the penal sum not exceeding **FIFTY MILLION** DOLLARS (\$50,000,000) each, and the execution of such bonds or undertakings, in pursuance of these presents, shall be as binding upon the Company as if they had been duly signed by the president and attested by the secretary of the Company in their own proper persons.

That this power is made and executed pursuant to and by authority of the following By-law and Authorization:

ARTICLE XVI - Execution of Contracts: Section 5: Surety Bonds and Undertakings.

Any officer or other official of the company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the company by their signature and execution of any such instruments and to attach thereto the seal of the company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

By the following instrument the chairman or the president has authorized the officer or other official named therein to appoint attorneys-in-fact:

Pursuant to Article XVI, Section 5 of the By-laws, Assistant Secretary Garnet W. Elliott is hereby authorized to appoint such attorneys-in-fact as may be necessary to act in behalf of the company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

That the By-law and the Authorization above set forth are true copies thereof and are now in full force and effect.

IN WITNESS WHEREOF, this instrument has been subscribed by its authorized officer and the corporate seal of the said Liberty Mutual Insurance Company has been affixed thereto in Plymouth Meeting, Pennsylvania this 28th day of August, 19 96.

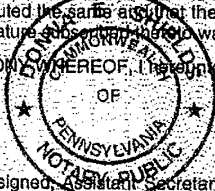
LIBERTY MUTUAL INSURANCE COMPANY

By Garnet W. Elliott
Garnet W. Elliott, Assistant Secretary

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF MONTGOMERY

On this 28th day of August, A.D. 19 96, before me, a Notary Public, personally came the individual, known to me to be the therein described individual and officer of Liberty Mutual Insurance Company who executed the preceding instrument, and he acknowledged that he executed the same and that the seal affixed to the said preceding instrument is the corporate seal of said company, and that said corporate seal and his signature and name were duly affixed and subscribed to the said instrument by authority and direction of the said company.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affix my official seal at Plymouth Meeting, PA, the day and year first above written.



NOTARIAL SEAL
DONNA E. SHIELDS, Notary Public
City of Philadelphia, Phila. County
My Commission Expires Feb. 2, 1997

Donna E. Shields
Notary Public

I, the undersigned, Assistant Secretary of Liberty Mutual Insurance Company, do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the officer who executed the said power of attorney was one of the officers specially authorized by the chairman or the president to appoint any attorney-in-fact as provided in Article XVI, Section 5 of the By-laws of Liberty Mutual Insurance Company.

This certificate may be signed by facsimile under and by authority of the following vote of the board of directors of Liberty Mutual Insurance Company at a meeting duly called and held on the 12th day of March, 1980.

VOTED: that the facsimile or mechanically reproduced signature of any assistant secretary of the company wherever appearing upon a certified copy of any power of attorney issued by the company, shall be valid and binding upon the company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said company, this 11th day of December, 19 96.



[Signature]
Assistant Secretary

THIS POWER OF ATTORNEY MAY NOT BE USED TO EXECUTE ANY BOND WITH AN INCEPTION DATE AFTER August 28, 19 98.

To confirm the validity of this Power of Attorney call
1-610-832-8240 between 9:00 am and 4:30 pm EST on any business day.

Section M



Interchange Corporate Center
450 Plymouth Road, Suite 400
Plymouth Meeting, PA, 19462-1644
Ph. (610) 832-8240

CHANGE RIDER

To be attached to and form a part of surety bond number 16001834, dated the 11th
day of December, 1996, Issued by Liberty Mutual Insurance Company, a Massachusetts
stock insurance company, as surety (the "Surety"), on behalf of
Rinker Materials of Florida, Inc., as principal (the "Principal"),
in favor of
BROWARD COUNTY, as obligee (the "Obligee").

The Principal and the Surety hereby consent to changing the attached bond as follows:
Principal Name

Shall be amended from: Rinker Materials of Florida, Inc.
to: Cemex Construction Materials Florida, LLC

This change is effective the 26th day of June, 20 09. The attached bond
shall be subject to all of its terms, conditions and limitations except as herein modified.


IN WITNESS WHEREOF, said Principal and Surety have caused these presents to be duly signed and
sealed this 15th day of July, 20 09.

WITNESS / ATTEST



CEMEX CONSTRUCTION MATERIALS FLORIDA,
LLC

(Principal)

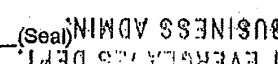
By:  (Seal)
Name:
Title:

LIBERTY MUTUAL INSURANCE COMPANY
(Surety)

By:  (Seal)
Lisa A. Ward Attorney-in-Fact

ACCEPTED:

(Obligee)

By:  (Seal)
Name: BUSINESS ADMIN
Title: PORT EVERGLADES DEPT
Date: 2009 JUL 29 AM 11 47

RECEIVED

2288621

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

LIBERTY MUTUAL INSURANCE COMPANY
BOSTON, MASSACHUSETTS
POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS: That Liberty Mutual Insurance Company (the "Company"), a Massachusetts stock insurance company, pursuant to and by authority of the By-law and Authorization hereinafter set forth, does hereby name, constitute and appoint:

**MICHAEL J. HERROD, WENDY W. STUCKEY, LUPE TAMAYO, MARGARET BUBOLTZ, LISA A. WARD,
U. THERESA GARDNER, KATHLEEN M. MEEKS, NANCY THOMAS, ALL OF THE CITY OF HOUSTON, STATE OF TEXAS**

each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations in the penal sum not exceeding **ONE HUNDRED MILLION AND 00/100 ******* DOLLARS (\$ **100,000,000.00*******) each, and the execution of such undertakings, bonds, recognizances and other surety obligations. In pursuance of these presents, shall be as binding upon the Company as if they had been duly signed by the president and attested by the secretary of the Company in their own proper persons.

That this power is made and executed pursuant to and by authority of the following By-law and Authorization:

ARTICLE XIII - Execution of Contracts: Section 5. Surety Bonds and Undertakings.

Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

By the following instrument the chairman or the president has authorized the officer or other official named therein to appoint attorneys-in-fact:

Pursuant to Article XIII, Section 5 of the By-Laws, Garnet W. Elliott, Assistant Secretary of Liberty Mutual Insurance Company, is hereby authorized to appoint such attorneys-in-fact as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

That the By-law and the Authorization set forth above are true copies thereof and are now in full force and effect.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Company and the corporate seal of Liberty Mutual Insurance Company has been affixed thereto in Plymouth Meeting, Pennsylvania this 21st day of February, 2008.

LIBERTY MUTUAL INSURANCE COMPANY

By Garnet W. Elliott
Garnet W. Elliott, Assistant Secretary

COMMONWEALTH OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 21st day of February, 2008, before me, a Notary Public, personally came Garnet W. Elliott to me known, and acknowledged that he is an Assistant Secretary of Liberty Mutual Insurance Company; that he knows the seal of said corporation; and that he executed the above Power of Attorney and affixed the corporate seal of Liberty Mutual Insurance Company thereto with the authority and at the direction of said corporation.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Teresa Pastella, Notary Public
Plymouth Twp., Montgomery County
My Commission Expires Mar. 28, 2009
Member, Pennsylvania Association of Notaries

By Teresa Pastella
Teresa Pastella, Notary Public

CERTIFICATE

I, the undersigned, Assistant Secretary of Liberty Mutual Insurance Company, do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the officer or official who executed the said power of attorney is an Assistant Secretary specially authorized by the chairman or the president to appoint attorneys-in-fact as provided in Article XIII, Section 5 of the By-laws of Liberty Mutual Insurance Company.

This certificate and the above power of attorney may be signed by facsimile or mechanically reproduced signatures under and by authority of the following vote of the board of directors of Liberty Mutual Insurance Company at a meeting duly called and held on the 12th day of March, 1980.

VOTED that the facsimile or mechanically reproduced signature of any assistant secretary of the company, wherever appearing upon a certified copy of any power of attorney issued by the company in connection with surety bonds, shall be valid and binding upon the company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said company, this 15th day of July, 2009.

By David M. Carey
David M. Carey, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, bank deposit, currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call 1-610-832-6240 between 9:00 am and 4:30 pm EST on any business day.

Section N

Section N

CEMEX PORT EVERGLADES

Section N

Equipment list

Equipment Type	Manufacturer	Model	Age	Power
Ship unloading	Kovaco		30	Electric
Forklift	Doosan		1	Diesel
Forklift	Doosan	D30S-7	2	Diesel
High reach	Genie		1	Diesel
High reach			1	Diesel

Section O

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-831-4000

VALID OCTOBER 1, 2021 THROUGH SEPTEMBER 30, 2022

DBA:
Business Name: CEMEX CONSTRUCTION

Receipt #: 378-8249
Business Type: WHOLESALE/DISTRIBUTOR
(WHOLESALE/DISTRIBUTOR)

Owner Name: MATERIALS FLORIDA LLC
Business Location: PORT EVERGLADES
FT LAUDERDALE
Business Phone: 561-820-8613

Business Opened: 11/26/2008
State/County/Cert/Reg:
Exemption Code:

Rooms **Seats** **Employees** **Machines** **Professionals**

For Vending Business Only						
Number of Machines:			Vending Type:			
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
45.00	0.00	0.00	0.00	0.00	0.00	45.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:

MATERIALS FLORIDA LLC
TAX
1501 BELVEDERE RD
WEST PALM BEACH, FL
33406-0000

Receipt # 13B-20-00008646
Paid 08/30/2021 45.00

2021 - 2022

Section P.1

Section P.1

HEALTH & SAFETY PLAN

CEMEX, INC.

Port Everglades Terminal

The health and safety of personnel at the Port Everglades Terminal operation is of primary importance. The prevention of occupational injuries and illnesses is of such consequence that it will be given precedence over operating productivity whenever necessary. Management will provide all personal protective equipment, facilities and training required for personal health and safety in keeping with the highest industrial standards. To be successful, this program requires cooperation in all health and safety matters, not only between management and employees, but also between each employee and their co-workers.

This Health and Safety Plan details the efforts taken by the Port Everglades Terminal operation to protect the health and safety of its personnel.

HEALTH AND SAFETY PLAN

TABLE OF CONTENTS

I.	CEMEX, Inc. Global Environmental, Health and Safety Policy
II.	Health and Safety Responsibilities
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IV.	Site Description
V.	Identifying Unsafe Conditions and Practices
VI.	Health Hazard Identification and Evaluation
VII.	Industrial Hygiene Monitoring
VIII.	Medical Surveillance
IX.	Accident/Incident Reporting
X.	Drug and Alcohol Policy
XI.	Disciplinary Action Policy
XII.	Personnel Training
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XV.	Contractor Safety Policy
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XVII.	Standard Operating Procedures

HEALTH AND SAFETY PLAN

LIST OF ATTACHMENTS


Attachment 1	Job Descriptions
Attachment 2	Training Documentation Forms
Attachment 3	Protective Clothing and Equipment
Attachment 4	Respiratory Protection Program
Attachment 5	Medical Surveillance Summary
Attachment 6	Industrial Hygiene Monitoring Protocol
Attachment 7	Confined Space Entry
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Attachment 12	Open Flame/Hotwork
Attachment 13	Ladder Safety
Attachment 14	Hazard Communication
Attachment 15	Hearing Conservation
Attachment 16	Compressed Gas Cylinder Management and Use
Attachment 17	Propane Cylinder Management and Use
Attachment 18	Fall Protection
Attachment 19	Contractor Safety Policy

HEALTH AND SAFETY PLAN

Attachment 20	Drug and Alcohol Policy
Attachment 21	Emergency Procedures and Response Plan
Attachment 22	Crisis Management

Section P.2

Section P.2

 Functional Area: Human Resources Specific Area: Work Practices & Standards	Substance Abuse Policy – Non-DOT Employees	
	Status: Approved	Doc: WP&S – 11
	Date: November 1, 2010	Page 1 of 6

I. PURPOSE

It is the intent of CEMEX to maintain a drug and alcohol free work environment conducive to attaining high work standards free from safety and health hazards. The company's policy on substance abuse control represents minimum guidelines, and as such, the company will comply with more stringent local and/or state laws wherever applicable.


References to "CEMEX" include CEMEX, Inc. and all CEMEX, Inc. subsidiaries and affiliates in the United States.

II. DEFINITIONS

- A. Drugs – includes prescription drugs, inhalants, and other illegal, controlled or unauthorized substances that may cause addiction and/or affect coordination or memory. "Drugs" include, but are not limited to, the following substances: amphetamines, barbiturates, benzodiazepines, cocaine metabolite, marijuana metabolite, methadone, methaqualone, opiates metabolite, phencyclidine and propoxyphene.
- B. Company premises – includes all land, whether occupied or vacation, buildings, structures, installations, construction sites, desks, lockers, quarters, rooms, automobiles, trucks and other vehicles, whether owned, leased, occupied or used by the company or any employee of the company while conducting company business.
- C. Possession – having any amount of drugs or alcohol on one's person or belongings, or in one's desks, locker, office, baggage, quarters, rooms, automobiles, trucks, or other vehicles.
- D. Use – with regard to drugs, is defined as having any trace amount of drugs in the applicant's or employee's system, or physical consumption of alcohol. "Use," with regard to alcohol, is defined as the physical consumption of alcohol. "Use," with regard to alcohol, is also defined as being under influence of alcohol.

III. STATEMENT OF POLICY

All employees are reminded that the following actions are included as violations of this policy:

 Functional Area: Human Resources Specific Area: Work Practices & Standards	Substance Abuse Policy – Non-DOT Employees	
	Status: Approved	Doc: WP&S – 11
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- Use, manufacture, possession, sale, purchase or distribution of drugs on company premises, in company vehicles, or while on company business;
- Use, manufacture, purchase, possession, sale or distribution of alcohol on company premises, while operating any company vehicle or equipment, or while conducting company business;
- Possession of prescribed drugs that are not in the correct container;
- Possession of prescribed drugs that are not prescribed to the person in possession;
- Possession of any correctly prescribed drug which is unsafe to use while on an industrial location or while operating vehicles;
- Possession, manufacture, purchase, sale or distribution of paraphernalia and equipment related to illegal or unauthorized drug use; and
- Possession of "look-alike" drugs in any form.

IV. EMPLOYEE RESPONSIBILITIES

Employee responsibilities under this policy include:


- Abiding by the company's substance control program;
- Reporting any known use, manufacture, purchase, sale, possession or distribution on company premises, in company vehicles, or while on company business; and
- Informing the Human resources Department if they are using any prescribed medicine that could affect performance. Reports by employees using prescribed medicines shall remain confidential.

V. SUPERVISOR RESPONSIBILITIES

The supervisor should advise the Human Resources Department immediately of any policy violation. The Human Resources Department and the supervisor should completely document all situations of actual or suspected drug abuse immediately.

VI. SEARCHES AND TESTS

The company reserves the right, at all times, to have authorized personnel conduct searches or inspections of personal effects, vehicles, lockers, boxes, baggage and work area of employees and other personnel, while on company premises, in company vehicles, or on company business, for the purpose of determining if any such persons are in possession of any illegal or unauthorized drugs, items, or substances. These searches may be conducted from time to time without prior announcement. When the

 Functional Area: Human Resources Specific Area: Work Practices & Standards	Substance Abuse Policy – Non-DOT Employees	
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company requires or engages in a search of any of the above, the company will invite the employee to be present for that search. The search, however, will not be unreasonably delayed by the unavailability of the employee.

The company also reserves the right, at all times, to have authorized personnel conduct urinalysis or blood tests of our employees and employees of other contractors and companies for the purpose of determining if any such persons are using illegal drugs or intoxicating beverages. A urinalysis, as well as a blood test, may be used in the following situations:


- Pre-employment testing (please see the Pre-Employment Drug/Alcohol Screen Policy for more information);
- Random drug/alcohol testing;
- Testing at the time of physical exams;
- Testing based on reasonable cause or suspicion; and
- Testing that is, in the company's discretion, consistent with the enforcement of this policy.

When initial testing of an employee's specimen by the company yields a positive test result, the company will engage in confirmatory testing of the specimen.

An employee undergoing testing will not be required to disclose to non-medical company personnel any prescribed medication that could not affect performance. However, medical representatives performing the testing may request and obtain that information at the time of testing.

Any company employee who refuses to allow a search, urinalysis, or blood test, or is found with any illegal or unauthorized drugs, items, or substances will be subject to disciplinary action, up to and including immediate termination. Any other person having business with the company who refuses to submit to a search, urinalysis, blood test or who is found in possession of any such illegal or unauthorized drugs, items, or substances will not be allowed on the company's premises.


In the event federal, state or local law prohibits the types of searches and/or tests described in this policy, the company has the right to modify such procedures to bring them in conformance with the applicable law.

 Functional Area: Human Resources Specific Area: Work Practices & Standards	Substance Abuse Policy – Non-DOT Employees	
	Status: Approved	Doc: WP&S – 11
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VII. VIOLATION OF POLICY/DISCIPLINARY ACTIONS

The following disciplinary action will result when employees or other individuals are found to be in violation of this policy.

- Any company employee who refuses to allow a search, urinalysis or blood test pursuant to this policy will be subject to disciplinary action, up to and including immediate termination.
- Any company employee found using or possessing any drugs, alcohol, paraphernalia or equipment related to illegal or unauthorized drug use, and any employee found selling, purchasing, manufacturing, or distributing any drugs, alcohol or paraphernalia related to illegal or unauthorized drug use, will be subject to disciplinary action, up to and including immediate termination.
- Any person, other than a company employee, having business with the company who refuses to submit to a search, urinalysis, or blood test, or who is found in possession of or using drugs, alcohol, or paraphernalia related to illegal or unauthorized drug use, or who is found selling, purchasing, manufacturing or distributing drug use, will not be allowed on any of the company's premises or in any of the company's vehicles.
- The company will withdraw an offer of employment from any applicant who refuses to allow a urinalysis or blood test pursuant to the policy, or who violates this policy due to a positive result of a urinalysis or blood test.
- Refusal to sign the Acknowledgement provided to you regarding the company's Substance Abuse Policy, a copy of which is attached to this policy, and return it to the Human Resources representative will be considered voluntary termination initiated by the employee.
- Any company employee who violates this policy due to a positive result of a urinalysis or blood test will be subject to disciplinary action, up to and including immediate termination.
- Any company employee who violates this policy in any way will be subject to disciplinary action, up to and including immediate termination.


 Functional Area: Human Resources Specific Area: Work Practices & Standards	Substance Abuse Policy -- Non-DOT Employees	
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VIII. RESPONSIBILITY FOR CONFORMANCE

All employees are responsible for maintaining a safe work environment.

Therefore, all employees are responsible for conformance to this policy.

Requests for clarification and interpretation to the policy should be submitted to the Executive Vice President of Human Resources.

 Functional Area: Human Resources Specific Area: Work Practices & Standards	Substance Abuse Policy – Non-DOT Employees	
	Status: Approved	Doc: WP&S – 11
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Substance Abuse Policy Acknowledgment

I acknowledge that I have been provided a copy of CEMEX's Substance Abuse Policy. I understand that a violation of this policy may subject me to immediate discharge from employment.

I understand that unannounced searches may be conducted of personal effects, including my vehicle, for the limited purpose of determining whether illegal and unauthorized drugs, narcotics, controlled dangerous substances, and alcoholic beverages are in my possession while on any of CEMEX's premises or while on company business.

I am aware that CEMEX will conduct urinalyses and/or blood tests for the purpose of determining the use of illegal drugs or alcohol beverages. A urinalysis, as well as a blood test, may be used in the following situations: (1) pre-employment testing; (2) random drug/alcohol testing; (3) testing at the time of physical exams; (4) post-accident testing; and (5) testing based on reasonable cause or suspicion. I consent to submit to these drug and alcohol testing procedures.

I authorize the physician, nurse or laboratory technician who conducts these tests to release the results of my tests to CEMEX.

I understand that neither this policy nor any of its terms are intended to create a contract of employment or contain the terms of any contract of employment, and that CEMEX retains the sole right to change, amend, or modify any term or provision of this policy without notice.

Applicant/Employee:

Print Name: _____

Signature: _____

Date: _____

Witness:

Print Name: _____

Signature: _____

Date: _____

Section P.3

Port Everglades Terminal

Employee Training records

- 1. Terminal Safety/Environmental Startup Training**
- 2. Cement Terminal Loadout**
- 3. Warehouse/Cement bagging operation**
- 4. Transfer of Gray/White cement**
- 5. Ship Unloading of Cement with Kovako/Roof set up**
- 6. Terminal Air Compressor/Air Driers**
- 7. LOTOTO**
- 8. Forklift training**
- 9. High Reach Training**

5/18/22, 12:19 PM

CEMEX US

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CEMEX USA

Human Resources Policy Center

Updated Jul 16, 2021 by CN=Rita Vandermolten,OU=Desktop Admins,OU=Support User,OU=User Accounts-Rinker,OU=USA,OU=NOAM Users and Groups,DC=noam,dc=cemexnet,dc=com

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Benefits & Compensation
BEN COMP 01 - New Hire & Promotion Compensation Guidelines
Pay Practice for Meetings and Training - Memo
WP&S 18 - Observance of Holidays Policy
WP&S 33 - Employee Purchase Policy
PTO - Non California (Updated 7/1/17)
PTO - California (Updated 3/29/17)
PTO - Arizona

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RECR SEL 03 - Hiring Practices
RECR SEL 04 - Temporary and Contract Usage Policy (Rev. 7/2015)
RECR SEL 06 - Global Job Opportunities Policy
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Leaves 06 - FMLA Policy 2020
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 Functional Area: Human Resources Specific Area: Work Practices & Standards	Visitors Policy	
	Status: Approved	Doc: WP&S – 27
	Date: December 1, 2008	Page 1 of 2

I. PURPOSE

To establish a policy for visitors and any persons conducting business at facilities owned or operated by CEMEX.

References to "CEMEX" include CEMEX, Inc. and all CEMEX, Inc. subsidiaries and affiliates in the United States.

II. STATEMENT OF POLICY


This policy applies to all visitors at properties owned or operated by CEMEX.

Visitors are defined as guests, customers, delivery workers, vendors and other individuals conducting business, or otherwise present, at properties owned or operated by CEMEX.

In order to help protect the safety and well being of visitors, as well as employees, CEMEX requires documentation of all visitors who enter and exit company properties. Upon entering and departing from CEMEX properties, all visitors are required to sign in at the office on the location site. Visitors will be required to provide their name, nature of business, the employee they are visiting and the date and time of arrival and departure.

The following rules have been established for the protection of all visitors while onsite at CEMEX properties:

- All facility rules must be followed.
- When driving on plant property, all signage must be strictly obeyed.
- No vehicles shall be parked in any work area of heavy or mobile equipment.
- No one will be allowed on plant premises while under the influence of drugs and/or alcohol.
- All visitors will confine themselves solely to their specifically authorized duties and areas.
- Visitors are to be accompanied by company personnel while on company premises, unless authorized by facility management.
- All visitors are required to wear approved personal protective equipment in accordance with the job being performed and/or the specific facility requirements, such as, but not limited to, hard hats, safety eyeglasses, or goggles, steel-toed footwear and hearing protection (where applicable), fall protection, appropriate clothing, etc.

 Functional Area: Human Resources Specific Area: Work Practices & Standards	Visitors Policy	
	Status: Approved	Doc: WP&S – 27
	Date: December 1, 2008	Page 2 of 2

- All visitors must complete Site Specific Hazard Training at facilities regulated by the Mine Safety and Health Administration (MSHA) or other applicable safety orientation requirements under state or federal law.

III. RESPONSIBILITY FOR CONFORMANCE

All managers are responsible for the administration of this policy for visitors at their respective facilities. While the above policy does not cover every detail, adherence to the principles outlined will tend to lessen the possibility of accidents to visitors. Management personnel must be conversant with all the rules applicable to the facilities under their supervision.

Section Q

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Type	Enforcement Address #	Section Township Range	Facility Status	Violation Date Time	Issue Date	Completed Date
▶ Citation	CIT10-0060	17301 PINES BLVD, Pembroke Pines, FL 33029	18-51-41	00605 Complied	Jun 28, 2010 16:00	Aug 13, 2010 Oct 29, 2010
▶ Warning Notice	WRN09-0310	SE 28TH ST. & EISENHWER BLVD, Hollywood, FL 33316	23-50-42	01670 Complied	May 26, 2009 9:00	May 28, 2009 Jun 29, 2009
▶ Warning Notice	WRN10-0306	17301 PINES BLVD, Pembroke Pines, FL 33029	18-51-41	00605 Escalated	Jun 28, 2010 16:00	Jun 28, 2010 Aug 13, 2010
▶ Warning Notice	WRN10-0415	1150 NW 24TH ST, Pompano Beach, FL 33064	27-48-42	00625 Complied	Sep 30, 2010 12:00	Oct 7, 2010 Dec 15, 2010

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Activity and Violation History



Florida Department of Environmental Protection

Hazardous Waste Facility Compliance History

Activity History Listing

Activity History for:**EPAID: FLD072543010, CEMEX Construction Materials Florida LLC - Brooksville Plant**

Note: ETA links to Enforcement Tracking Activity

Date Done	Activity Type	Activity Comments	ETA Link
1/7/1992	Legacy Site Inspection	Downloaded From Rcris On 18-Oct-96	
2/13/1992	Warning Letter Issued	Downloaded From Rcris On 18-Oct-96	
8/15/2002	Legacy Site Inspection	Inspection Report Being Drafted	
8/15/2002	Multimedia Inspection - Rcrs Cei Plus Mm Screening Checklist	Inspection Report Being Drafted	
9/27/2002	Warning Letter Issued	Multimedia Warning Letter, Must Set Up A Meeting In 15 Days	
12/10/2002	Enforcement Meeting	J Degne Attended Meeting, All Violations Have Been Corrected, Will Be Cesqg In Jan 2003	
12/10/2002	Compliance W/O Formal Enforcement Action		
1/17/2003	Return To Compliance Letter		
1/17/2003	Case Closed By District		
1/17/2003	Project Closed Letter		
11/29/2004	File Review		
11/29/2004	Case Closed By District		
2/4/2022	Site Inspection	Routine; SQG (100-1000 kg/month)	
2/28/2022	Compliance Assistance Offer	Return to Compliance Letter Sent (RCL)-02/25/2022 - Submittal Received by Department-02/25/2022 - Finished-02/28/2022	

This pulls the Violation History

Violation History

Vio#	Area	Regulation	Opened By	Date Determined	Completed	ETA	Act	Act Date	Regulation Text Excerpt (mouse over for more text)
1	262.C	262.30	Chaz_Load	1/27/1992	3/13/1992		3811	1/7/1992	Packaging. Before transporting hazardous waste or offering hazardous waste for transportation off-site, a generator must package the waste in accordance with the applicable Department of Transportation regulations on packaging under 49 CFR parts 173,
2	262.C	262.30	Chaz_Load	1/27/1992	3/13/1992		3811	1/7/1992	Packaging. Before transporting hazardous waste or offering hazardous waste for transportation off-site, a generator must package the waste in accordance with the applicable Department of Transportation regulations on packaging under 49 CFR parts 173,
3	262.A	262.11	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	Hazardous waste determination. A person who generates a solid waste, as defined in 40 CFR 261.2, must determine if that waste is a hazardous waste using the following method:
4	262.B	262.20	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	General requirements.
5	262.B	262.20(a)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	Rule Description not available
6	262.B	262.20(e)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	The requirements of this subpart do not apply to hazardous waste produced by generators of greater than 100 kg but less than 1000 kg in a calendar month where:
7		UNKNOWN	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	Unknown - insufficient data from import to identify rule.
8	262.C	262.34(d)(5)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	The generator complies with the following requirements:
9	262.C	262.34(d)(5)(i)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	At all times there must be at least one employee either on the premises or on call (i.e., available to respond to an emergency by reaching the facility within a short period of time) with the responsibility for coordinating all emergency response me
10	279.C	279.22(b)(1)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	In good condition (no severe rusting, apparent structural defects or

https://fideploc.dep.state.fl.us/www_rcra/reports/handler_history.asp?epaid=FLD072543010

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Activity and Violation History

									deterioration); and
11	279.C	279.22(b)(2)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	Not leaking (no visible leaks).
12	279.C	279.22(c)(1)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	Containers and aboveground tanks used to store used oil at generator facilities must be labeled or marked clearly with the words "Used Oil."
13	XXS	62-730.150(5)	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	With respect to training requirements for owners and operators of hazardous waste treatment, storage and disposal facilities and generators, 'annual review' shall be computed based on the calendar year.
14	XXS	403.727	Behnke_W	8/15/2002	12/10/2002		9007	8/15/2002	Violations; defenses, penalties, and remedies.--
15	262.K	262.206(b)(1)	Laddick_G	2/4/2022	2/25/2022		192433	2/4/2022	Management of containers of unwanted materials- containers must be in good condition and compatible with contents

February 25, 2022

Greg Bridge, Environmental Manager
10311 Cement Plant Rd.
Brooksville, FL 34601
Gregm.bridge@cemex.com

Re: Return to Compliance
Cemex Construction Materials Florida, LLC - Brooksville Plant
Facility ID No.: FLD072543010
Hernando County

Dear Mr. Bridge:

Florida Department of Environmental Protection ("Department") personnel conducted a compliance inspection of the above-referenced facility on February 4, 2022. Based on the information provided following the inspection, the facility was determined to be in compliance. A copy of the inspection report is attached for your records and any non-compliance items which may have been identified at the time of the inspection have been corrected.

The Department appreciates your compliance efforts. Should you have any questions or comments, please contact Shannon Lenhart at (813) 470-5939 or by email at Shannon.Lenhart@FloridaDEP.gov.

Sincerely,



Shannon Lenhart
Environmental Manager
Compliance Assurance Program
Southwest District
Florida Department of Environmental Protection

Enclosures: Inspection Report and Facility Response

ec: Gina Laddick, DEP, Gina.Laddick@FloridaDEP.gov
Shannon Lenhart, DEP, Shannon.Lenhart@FloridaDEP.gov
Leslie Pedigo, DEP, Leslie.Pedigo@FloridaDEP.gov
Jeff Howley, Hernando County, Jhowley@co.hernando.fl.us



**Florida Department of
Environmental Protection
Hazardous Waste Inspection Report**

FACILITY INFORMATION:

Facility Name: CEMEX Construction Materials Florida LLC - Brooksville Plant
On-Site Inspection Start Date: 02/04/2022 **On-Site Inspection End Date:** 02/04/2022
ME ID#: 16745 **EPA ID#:** FLD072543010
Facility Street Address: 16301 Ponce De Leon Blvd, Brooksville, Florida 34614-0849
Contact Mailing Address: 10311 Cement Plant Rd, Brooksville, Florida 34601-8657
County Name: Hernando **Contact Phone:** (352) 799-7881

NOTIFIED AS:

SQG (100-1000 kg/month), Used Oil

WASTE ACTIVITIES:

Generator: SQG **Used Oil:** Industrial Furnace

INSPECTION TYPE:

Routine Inspection for SQG (100-1000 kg/month) Facility

INSPECTION PARTICIPANTS:

Principal Inspector: Gina Laddick, Inspector
Other Participants: Leslie Pedigo, Environmental Consultant; Greg Bridge, Environmental Manager

LATITUDE / LONGITUDE: Lat 28° 39' 17.4066" / Long 82° 27' 33.9409"

NAIC: 327310 - Cement Manufacturing

TYPE OF OWNERSHIP: Private

Introduction:

CEMEX Construction Materials Florida LLC - Brooksville Plant ("CEMEX - Brooksville") was inspected by the Florida Department of Environmental Protection ("Department") on February 4, 2022, to determine the facility's compliance with state and federal hazardous waste regulations. CEMEX - Brooksville first notified as a Small Quantity Generator ("SQG") on November 17, 1986 under the name Florida Mining and Material Corporation. In April 2003, the facility re-notified under the name CEMEX Cement, Inc., Brooksville Plant; in March 2004, the facility re-notified under the name CEMEX, Inc.; and finally, in July 2009, the facility re-notified under the name CEMEX Construction Materials Florida, LLC - Brooksville Plant. The Department previously inspected the facility on September 20-21, 1990, January 7, 1992, and August 15, 2004. The County SQG Program inspected the facility on April 30, 2021. During the inspection, Department staff were accompanied by Environmental Manager, Greg Bridge.

Process Description:

According to Mr. Bridge this facility has not been in operation since 2008, when all operations were moved to a another CEMEX facility located in south Brooksville (CEMEX Construction Materials Florida LLC, Facility ID #FLR000008417). CEMEX has made the corporate decision to keep all permits related to the facility active and the EPA ID active in the event the plant reopens.

Greg Bridge accompanied the inspectors into a Maintenance Shop where hazardous waste was previously stored. Three spent lead acid car batteries were present, two outside of the building and one inside the building. No other hazardous waste was observed during the inspection. Inspectors informed Mr. Bridge that the batteries must be properly managed.

New Potential Violations and Areas of Concern:

CEMEX Construction Materials Florida LLC - Brooksville Plant Inspection Report

Inspection Date: 02/04/2022

Violations

Type: Violation
Rule: **262.206(b)(1)**
Explanation: 40 CFR 261.173(b) states a container holding hazardous secondary material must not be opened, handled, or stored in a manner which may rupture the container or cause it to leak.

At the time of the inspection, abandoned spent lead acid batteries were observed inside and outside of the Maintenance Shop.

Corrective Action: Within 15 days of the date of this letter, please submit documentation to the department that these batteries were properly disposed of.

Photo Attachments:

Spent Lead Acid Batteries located outside and unprotected.



Spent Lead Acid Battery located within the Maintenance Shop.



PHOTO ATTACHMENTS:

Back of the Maintenance Shop.



Conclusion:

At the time of the inspection, the facility was operating out of compliance with state and federal regulations governing small quantity generators of hazardous waste.

CEMEX Construction Materials Florida LLC - Brooksville Plant Inspection Report

Inspection Date: 02/04/2022

1.0: Pre-Inspection Checklist

Requirements:

The requirements listed in this section provide an opportunity for the Department's inspector to indicate the conditions found at the time of the inspection. A "Not Ok" response to a requirement indicates either a potential violation of the corresponding rule or an area of concern that requires more attention. Both potential violations and areas of concern are discussed further at the end of this inspection report.

Note: Checklist items with shaded boxes are for informational purposes only.

Item No.	Pre-Inspection Review	Yes	No	N/A
1.1	Has the facility notified with correct status? 262.18(a)	✓		
1.2	Has the facility notified of change of status? 62-730.150(2)(b)			✓
1.3	Did the facility conduct a waste determination on all wastes generated? 262.11			✓

CEMEX Construction Materials Florida LLC - Brooksville Plant Inspection Report

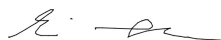
Inspection Date: 02/04/2022

Signed:

A hazardous waste compliance inspection was conducted on this date, to determine your facility's compliance with applicable portions of Chapters 403 & 376, F.S., and Chapters 62-710, 62-730, 62-737 & 62 -740 Florida Administrative Code (F.A.C.). Portions of the United States Environmental Protection Agency's Title 40 Code of Federal Regulations (C.F.R.) 260 - 279 have been adopted by reference in the state rules under Chapters 62-730 and 62-710, F.A.C

Gina Laddick

Principal Investigator Name



Principal Investigator Signature

Inspector

Principal Investigator Title

DEP

Organization

02/24/2022

Date

Leslie Pedigo

Representative Name

Environmental Consultant

Representative Title

DEP

Organization

NOTE: By signing this document, the Site Representative only acknowledges receipt of this Inspection Report and is not admitting to the accuracy of any of the items identified by the Department as "Potential Violations" or areas of concern.

Greg Bridge

Representative Name

Environmental Manager

Representative Title

CEMEX USA

Organization

NOTE: By signing this document, the Site Representative only acknowledges receipt of this Inspection Report and is not admitting to the accuracy of any of the items identified by the Department as "Potential Violations" or areas of concern.

Report Approvers:

Approver: Shannon Lenhart

Inspection Approval Date: 02/24/2022

CSG SK-TSM-BOX-21 Martin,Jared A 02-23-2022 12:01 PAGE 1

Safety – Kleen Systems, Inc.
42 Longwater Drive
Norwell, MA 02061
CORPORATE: 800-669-5740
24 HR EMERGENCY: 800-468-1760 (Safety – Kleen)
8136261203

CUSTOMER# CE18126 Cemex
16301 Ponce De Leon Blvd
Brooksville FL 34614-0849
PHONE 352-585-3226

REFERENCE NBR.
88432234 – 2107557073

SRVC WEEK: 2022-8
SRVC DATE: 02-23-2022

BILL TO CUSTOMER#
CE19847

BILL TO ADDRESS:
CEMEX
PO Box 24731
West Palm Beach FL 33416-0000
PHONE 832-690-6434

PURCHASE ORDER# 4507469309

TAX EXEMPT#

PRODUCT/SERVICES					
SERVICES/ PRODUCT		QTY	UNIT PRICE	TAX	TOTAL CHARGE
250150	MODEL 250	1.0	0.00	0.00	0.00
	W/PRM SOL				
	S/N TAG 00110500SK18035960		CLEAN 0.0	SPENT 0.0	
	SERVICE TERM 24 WEEK	SCANNED NO			
	CAUSE CODE PULL – DISCONTINUED WASTE STREAM				
876966/ 2302120	LBLA – LP ACID	1.0	100.00	0.00	100.00
	BATT FOR RECL				
	BVOL				
	SERVICE TERM 48 WEEK				
10044	EXTENDED	1.0	0.00	0.00	0.00
	SERVICE AREA				
	FEE				
100030	RECOVERY FEE	1.0	19.00	0.00	19.00

TOTAL SERVICE/PRODUCTS					
			119.00	0.00	119.00
			TOTAL CHARGE		119.00
			CREDITS		0.00

Laddick, Gina

From: Greg M Bridge <gregm.bridge@cemex.com>
Sent: Friday, February 25, 2022 10:37 AM
To: Lenhart, Shannon; Laddick, Gina; Pedigo, Leslie
Cc: Christopher Wilson
Subject: CAO : CEMEX Brooksville North (FLD072543010)
Attachments: Safety Kleen BRN Battery Removal.pdf

EXTERNAL MESSAGE

This email originated outside of DEP. Please use caution when opening attachments, clicking links, or responding to this email.

Shannon,

During the compliance inspection on February 4, 2022 at Cement Brooksville North FLD072543010 spent batteries where identified. The batteries where recycled with Safety Kleen on February 23, 2022. In addition the parts washer rental from Safety Kleen was picked up at the same time. Please find attached receipt of services rendered. Please let me know if you have any additional questions.

Regards,
Greg Bridge



Greg Bridge

Corporate Environmental Manager - Cement- United States of America
Office: (352) 799-7881 ext.104 Fax: (352) 799-6088 Mobile: (352)-442-5375
Address: 10311 Cement Plant Road, Brooksville, FL 34601
e-Mail: gregm.bridge@cemex.com
www.cemexusa.com

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Reflects inspection data through 05/17/2022

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OSHA Office

Site Zip Code

Case Status ☒ All ☐ Closed ☐ Open

Violation Status ☒ All ☐ With Violations ☐ Without Violations

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End Date

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The Integrated Management Information System (IMIS) was designed as an information resource for in-house use by OSHA staff and management, and by state agencies which carry out federally-approved OSHA programs. Access to this OSHA work product is being afforded via the Internet for the use of members of the public who wish to track OSHA interventions at particular work sites or to perform statistical analyses of OSHA enforcement activity. It is critical that users of the data understand several aspects of the system in order to accurately use the information.

The source of the information in the IMIS is the local federal or state office in the geographical area where the activity occurred. Information is entered as events occur in the course of agency activities. Until cases are closed, IMIS entries concerning specific OSHA inspections are subject to continuing correction and updating, particularly with regard to citation items, which are subject to modification by amended citations, settlement agreements, or as a result of contest proceedings. THE USER SHOULD ALSO BE AWARE THAT DIFFERENT COMPANIES MAY HAVE SIMILAR NAMES AND CLOSE ATTENTION TO THE ADDRESS MAY BE NECESSARY TO AVOID MISINTERPRETATION.

The Integrated Management Information System (IMIS) is designed and administered as a management tool for OSHA to help it direct its resources. When IMIS is put to new or different uses, the data should be verified by reference to the case file and confirmed by the appropriate federal or state office. Employers or employees who believe a particular IMIS entry to be inaccurate, incomplete or out-of-date are encouraged to contact the OSHA field office or state plan agency which originated the entry.

UNITED STATES DEPARTMENT OF LABOR

Occupational Safety and Health Administration
200 Constitution Ave NW
Washington, DC 20210
☎ 800-321-6742 (OSHA)
TTY
www.OSHA.gov

FEDERAL GOVERNMENT

White House
Severe Storm and Flood Recovery Assistance
Disaster Recovery Assistance
DisasterAssistance.gov
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OCCUPATIONAL SAFETY AND HEALTH

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Section Q.4



CEMEX ENVIRONMENTAL POLICY

At CEMEX managing our environmental footprint is an integral part of our business philosophy. We are fully committed to carrying out our business activities in an environmentally responsible and sustainable manner and to minimize the environmental implications of our activities.

To meet this Commitment we will:

- Actively pursue a policy of pollution prevention and reduce to a practical minimum the environmental impact of emissions to air, land and water and noise from our operations
- Comply with company policies and procedures and all applicable local laws and regulations
- Make strategic efforts to maximize our energy and resource efficiency, lower our carbon intensity and reduce emissions by managing our usage of energy, water consumption and waste generation
- Responsibly manage the land within our operations to protect ecosystems and biodiversity and to maximize our contribution to nature conservation
- Maintain open and effective communication channels with our employees, contractors, customers, the community and all those who work with us
- Provide the necessary resources for instruction, training and supervision to appropriately manage the environmental aspects of our operations
- Plan, review and assess our environmental performance against measurable targets and industry best practices to drive continuous improvement
- Investigate, monitor and openly report our environmental performance

Everyone who works for the company is responsible for demonstrating correct environmental behaviours and reporting potential environmental risks. Managers will be held accountable for clearly defining Environmental roles and responsibilities, providing appropriate resources, and measuring, reviewing and continuously improving CEMEX Environmental performance.

A handwritten signature in dark ink, appearing to read "L. Zambrano", is written over a horizontal line.

Lorenzo H. Zambrano

Chairman of the Board and Chief Executive Office

December, 2010

Section R

Section R

Cemex Contruction Materials Florida, LLC. has been operating in Florida Seaports for thirty nine (39) years. This has bee accomplished by providing high quality cementitious products and distributing it to our customers, supporting the economies and the people who live there.

Cemex's role in the local economy has been tremendous. At times, Cemex has supplied over a million (1,000,000) tons to the South Florida market. This material was primarily used in the Palm Beach, Broward, and Dade counties. Cemex is proud of the tradition that the Port Everglades facility has played a significant role in the economic growth in our local communities.

Currently the economic conditions have led us to less importing of cementitious products while increasing the exporting of them. Although this trend has been ongoing for several years, we believe that the economic conditions will improve to where the supply of cementitious products will be needed in the South Florida market and Cemex in Port Everglades is looking forward to being the gateway to accomplish this economic growth