



**P.O. Box 94739
Cleveland, OH 44101**

**Telephone: 800-444-4487
progressive.com**

Date: December 3, 2024

State: TX

Policy #: 954167920

Insured: DRAGON X LLC

DBA:

Coverage Dates: 12/10/2021 - 01/10/2022

Re: Loss History

There have been no losses on the policy term(s)/date(s) listed

There have been losses on the policy term(s)/date(s) listed

If you have any questions regarding your loss history, please contact us at:
1-800-444-4487

We comply with the state insurance laws that regulate the provision of loss history information. Unless required by law we provide a list of claims and the paid amounts only.

Thank you,
Commercial Lines Customer Care



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/14/2025

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER MARQUEE INSURANCE GROUP LLC 1515-SC 1455 OLD ALABAMA RD STE 170 ROSWELL GA 30076		CONTACT NAME: GREAT WEST SERVICES INC PHONE (A/C, No, Ext): 888-603-6053 FAX (A/C, No): 402-494-7480 E-MAIL ADDRESS: SERVICE@GWCCNET.COM
		INSURER(S) AFFORDING COVERAGE INSURER A: GREAT WEST CASUALTY COMPANY NAIC # 11371
INSURED DRAGON X LLC 23723 DESERT GOLD DR Katy TX 77494		704527 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 1015167690

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		Y Y	GRT14527B	1/10/2025	1/10/2026	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)
							MED EXP (Any one person)	\$ 5,000	PERSONAL & ADV INJURY
							GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG
								\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC OTHER:							\$	
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY		Y Y	GRT14527B	1/10/2025	1/10/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	BODILY INJURY (Per person)
							BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)
								\$	
	UMBRELLA LIAB EXCESS LIAB		OCCUR CLAIMS-MADE				EACH OCCURRENCE	\$	AGGREGATE
								\$	
	DED <input type="checkbox"/> RETENTION \$								
	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 / A				PER STATUTE	OTHE- R	
							E.L. EACH ACCIDENT	\$	
							E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	
A A	CARGO LIABILITY - BROAD FORM TRAILER INTERCHANGE			GRT14527B GRT14527B	1/10/2025 1/10/2025	1/10/2026 1/10/2026	PER AUTO/DEDUCTIBLE LIMIT/DEDUCTIBLE	\$200,000/\$1,000 \$30,000 / \$ 1,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
2015 FREIGHTLINER 1FUGGED56FLGC1898
2023 DELUCIO 7LVD5CA24PD010577

Value around 15k

each now

Direct ChassisLink Inc. is named Additional Insured for the General Liability and Automobile Liability.

A waiver of subrogation is granted in favor of Direct ChassisLink, Inc., its subsidiaries, affiliates, insurers, agents, and employees for the General Liability and Automobile Liability policies.

CERTIFICATE HOLDER

CANCELLATION

DIRECT CHASSISLINK INC 3525 WHITEHALL PARK DR STE 400 CHARLOTTE NC 28273	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 

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International Fuel Tax Agreement (IFTA)

Return Summary Original Return for Period Ending Dec 31, 2024 (244)

11/24/2025 02:43:25 PM

You are logged in as:
Taxpayer
18708736998 DRAGON X LLC 23723 DESERT GOLD DR KATY , TX 77494-0115
User Identification
Karl Olson karlolson@gmail.com (713) 999-0278 98.57.41.200

Fuel Type(s)										
01 - Diesel										
	Total IFTA Miles	Total Non-IFTA Miles	Total Miles			Total Gallons Purchased		Average Fleet MPG		
Juris	Total IFTA Miles	Taxable Miles	Taxable Gallons	Purchased Gallons	Net Taxable Gallons	Tax Rate	Tax/Credit Due	Interest Due	Total Due	
LA	68	68	10	0	10	.2000	2.00	0.00	2.00	
TX	14,603	14,603	2,203	2,213	-10	.2000	-2.00	0.00	-2.00	
Diesel Totals										

Total Tax Due = 0.00

Balance Due = 0.00

Pending Payments - 0.00

Total Amount Due and Payable = 0.00

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International Fuel Tax Agreement (IFTA)

Original Return for period ending 09/30/2025

Confirmation: You Have Filed Successfully

Please do NOT send a paper return.

Print this page for your records.

Reference Number: 27425074034

Date and Time of Filing: 10/01/2025 10:52:10 AM

Taxpayer ID: 18708736998

Taxpayer Name: DRAGON X LLC

Taxpayer Address: 23723 DESERT GOLD DR KATY , TX 77494 - 0115

Entered by: Karl Olson

Email Address: karl1olson@gmail.com

Telephone Number: (713) 999-0278

IP Address: 98.57.41.200

Fuel Type(s)

01 - Diesel

Diesel

Juris	Total IFTA Miles	Total Non-IFTA Miles	Total Miles			Total Gallons Purchased		Average Fleet MPG		
	Total IFTA Miles	Taxable Miles	Taxable Gallons	Purchased Gallons	Net Taxable Gallons	Tax Rate	Tax/Credit Due	Interest Due	Total Due	
LA	19,037	+ 0	= 19,037	/ 2,989	= 6.37					
TX	87	87	14	0	14	.2000	2.80	0.00	2.80	
Diesel Totals										
18,950 18,950 2,975 2,989 -14 .2000 -2.80 0.00 0.00 0.00										

Total Tax Due = 0.00

Balance Due = 0.00

Pending Payments - 0.00

Total Amount Due and Payable = 0.00

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International Fuel Tax Agreement (IFTA)

Original Return for period ending 03/31/2025

Confirmation: You Have Filed Successfully

Please do NOT send a paper return.

Print this page for your records.

Reference Number: 9425056740

Date and Time of Filing: 04/04/2025 09:01:08 AM

Taxpayer ID: 18708736998

Taxpayer Name: DRAGON X LLC

Taxpayer Address: 23723 DESERT GOLD DR KATY , TX 77494 - 0115

Entered by: Karl Olson

Email Address: karl1olson@gmail.com

Telephone Number: (713) 999-0278

IP Address: 98.57.41.200

Fuel Type(s)										
01 - Diesel										

Diesel

Total IFTA Miles		Total Non-IFTA Miles		Total Miles			Total Gallons Purchased		Average Fleet MPG	
Juris	Total IFTA Miles	Taxable Miles	Taxable Gallons	Purchased Gallons	Net Taxable Gallons	Tax Rate	Tax/Credit Due	Interest Due	Total Due	
TX	14,301	14,301	2,288	2,288	0	.2000	0.00	0.00	0.00	
Diesel Totals							0.00	0.00	0.00	

Total Tax Due = 0.00

Balance Due = 0.00

Pending Payments - 0.00

Total Amount Due and Payable = 0.00

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International Fuel Tax Agreement (IFTA)

Original Return for period ending 06/30/2025

Confirmation: You Have Filed Successfully

Please do NOT send a paper return.

[Print this page for your records.](#)

Reference Number: 19625077688

Date and Time of Filing: 07/15/2025 11:10:53 AM

Taxpayer ID: 18708736998

Taxpayer Name: DRAGON X LLC

Taxpayer Address: 23723 DESERT GOLD DR KATY , TX 77494 - 0115

Entered by: Karl Olson

Email Address: karl1olson@gmail.com

Telephone Number: (713) 999-0278

IP Address: 98.57.41.200

Fuel Type(s)										
01 - Diesel										

Diesel

Juris	Total IFTA Miles	Total Non-IFTA Miles	Total Miles			Total Gallons Purchased		Average Fleet MPG		
	Total IFTA Miles	Taxable Miles	Taxable Gallons	Purchased Gallons	Net Taxable Gallons	Tax Rate	Tax/Credit Due	Interest Due	Total Due	
LA	16,737	+ 0	= 16,737	/ 2,644	= 6.33					
TX	64	64	10	0	10	.2000	2.00	0.00	2.00	
Diesel Totals	16,673	16,673	2,634	2,644			-10	.2000	-2.00	-2.00
								0.00	0.00	0.00

Total Tax Due = 0.00

Balance Due = 0.00

Pending Payments - 0.00

Total Amount Due and Payable = 0.00

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Requestor: tmenke0

Great West Casualty Company
Gross Loss Run

Page: 1 of 1
Process Date: 11/20/2025
Process Time: 08:54

Policy	Insured	Agent	Eff-Date	Exp-Date										
GRT14527A	DRAGON X LLC	MARQUEE INSURANCE GROUP LLC	01/10/2024	01/10/2025										
Claim #	Coverage	Loss Date	Report Date	RPT	LTE	Driver	Loss	ST	Reserve	Paid Loss	Subro/Salvage	Recoveries	Incurred Losses	Paid Loss Adjustment Expenses
0	POLICY ACCIDENTS TOTALING						0.00		0.00	0.00	0.00	0.00	0.00	0.00

Requestor: tmenke0

**Great West Casualty Company
Gross Loss Run**

Page: 1 of 1
Process Date: 11/20/2025
Process Time: 08:54

Policy	Insured	Agent	Eff-Date	Exp-Date	LTE	Paid Loss
Claim #	Coverage	Loss Date	Report Date	RPT	Driver	Incurred Losses
GRT14527B	DRAGON X LLC	MARQUEE INSURANCE GROUP LLC	01/10/2025	01/10/2026		
					Subro/Salvage Recoveries	Adjustment Expenses
					Loss ST	Paid Loss
					Reserve	
	0	POLICY ACCIDENTS TOTALING			0.00	0.00
					0.00	0.00



MILEPOST INSURANCE

REPRESENTING FINANCIAL STRENGTH & INTEGRITY

Individual Risk Experience as of 10/31/2025

Policy Number: TRD000675 **Effective Date:** 01/10/2022

Named Insured: DRAGON X LLC **Expiration Date:** 01/10/2023

Company: BERKSHIRE HATHAWAY DIRECT
INSURANCE COMPANY

Policy Effective Year: 2022

Line of Business	Date of Loss	Total Paid	Open/Closed	Claim Number	Accident Description
AUTO COLLISION					
TOTAL: AUTO COLLISION		0			
AUTO COMPREHENSIVE					
TOTAL: AUTO COMPREHENSIVE		0			
AUTO LIABILITY					
TOTAL: AUTO LIABILITY		0			
INLAND MARINE					
TOTAL: INLAND MARINE		0			
OTHER LIABILITY					
TOTAL: OTHER LIABILITY		0			
POLICY YEAR TOTAL:		0	0 *		

*Open Reserve, if any

GRAND TOTAL:	0	0 *
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MILEPOST INSURANCE

REPRESENTING FINANCIAL STRENGTH & INTEGRITY

Individual Risk Experience as of 10/31/2025

Policy Number: TRD000675 **Effective Date:** 01/10/2023

Named Insured: DRAGON X LLC **Expiration Date:** 01/10/2024

Company: BERKSHIRE HATHAWAY DIRECT
INSURANCE COMPANY

Policy Effective Year: 2023

Line of Business	Date of Loss	Total Paid	Open/Closed	Claim Number	Accident Description
AUTO COLLISION					
TOTAL: AUTO COLLISION		0			
AUTO COMPREHENSIVE					
TOTAL: AUTO COMPREHENSIVE		0			
AUTO LIABILITY					
TOTAL: AUTO LIABILITY		0			
INLAND MARINE					
TOTAL: INLAND MARINE		0			
OTHER LIABILITY					
TOTAL: OTHER LIABILITY		0			
POLICY YEAR TOTAL:		0	0 *		

*Open Reserve, if any



Texas USA

DRIVER LICENSE

Director: Sam C. McCraw



**COMMERCIAL
DRIVER LICENSE**

4d. DL: **36411309**

3. DOB: **11/03/1962**

1. OLSON
2. KARL EDWARD

8. 23723 DESERT GOLD DR
KATY, TX 77494

12. Rest: **P**

16. Hgt: **6'-00"** 15. Sex: **M** 18. Eyes: **GRN**

5. DD: **00629180171012207654** —

9. Class: **A**

4b. Exp: **11/03/2026**

4a. Iss: **07/02/2021**

9a. End: **X**

VETERAN ARMY