

STATE WORKERS' COMPENSATION INSURANCE CERTIFICATE

STATE OF DELAWARE

WORKERS' COMPENSATION INSURANCE C

CERTIFICATE NUMBER: WC-2024-DE-789321

CERTIFICATE PERIOD: January 1, 2024 - December 31, 2024

This certifies that NaviFloor Robotics, Inc., a Delaware corporation
("Insured"), with principal offices located at 2250 Innovation Drive, Suite 400
Wilmington, DE 19801, maintains workers' compensation insurance coverage

accordance with Delaware Code Title 19, Chapter 23, and all applicable state regulations.

I. INSURANCE COVERAGE DETAILS

A. Primary Insurance Carrier

Liberty Mutual Insurance Company

Policy Number: WC-23789-DE-2024

AM Best Rating: A (Excellent)

B. Coverage Specifications

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Statutory Workers' Compensation Coverage

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Part One² Workers' Compensation Insurance

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Part Two: Employers' Liability Insurance

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Coverage Limits:

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Bodily Injury by Accident: \$1,000,000 each accident

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Bodily Injury by Disease: \$1,000,000 policy limit

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Bodily Injury by Disease: \$1,000,000 each employee

C. Covered Operations

Coverage extends to all operations conducted by the Insured within the State

Delaware, including but not limited to:

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Research and development facilities

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Manufacturing operations

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Administrative offices

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Testing facilities

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Warehouse operations

II. EMPLOYEE CLASSIFICATION

A. Covered Employees

This certificate covers all 187 employees of NaviFloor Robotics, Inc.,
classified as follows:

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Engineering and Technical Staff: 89 employees

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Manufacturing and Assembly: 45 employees

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Research and Development: 28 employees

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Administrative and Management: 25 employees

B. Risk Classification Codes

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8810 - Clerical Office Employees

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3681 - Television, Radio, and Electronics Manufacturing

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8601 - Engineers, Architects - Consulting

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7380 - Drivers, Chauffeurs, and Messengers

III. COMPLIANCE DECLARATIONS

The undersigned hereby certifies that NaviFloor Robotics, Inc.:

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Maintains complete and accurate payroll records in accordance with Delaware

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Reports all workplace injuries as required by state regulations

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Implements required workplace safety programs and protocols

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Provides safety training to all employees in accordance with OSHA standards

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Posts all required workers' compensation notices in visible locations

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Maintains current emergency contact information for all employees

IV. SPECIAL PROVISIONS

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This certificate includes coverage for autonomous mobile robot testing and deployment

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Coverage extends to temporary technical contractors when operating under direct supervision

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Research and development activities involving prototype testing are included

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Cross-border operations within tri-state area covered under reciprocal agreement

V. VERIFICATION AND REPORTING

The Delaware Department of Labor may verify the status of this coverage at any time by contacting:

Liberty Mutual Insurance Company

Claims Department

Reference: Policy WC-23789-DE-2024

Phone: (800) 555-0123

VI. CERTIFICATION

This certificate is issued as a matter of information only and confers no right upon the certificate holder. This certificate does not amend, extend, or alter the coverage afforded by the policy.

EXECUTED this 1st day of January, 2024

By: Margaret H. Williams

Licensed Insurance Representative

Liberty Mutual Insurance Company

License #: DE-89321

ACKNOWLEDGED:

NaviFloor Robotics, Inc.

By: _ - 9 -

James Wilson

Chief Financial Officer

Date: January 1, 2024

VII. REGULATORY COMPLIANCE NOTICE

This certificate is issued in compliance with Delaware Code Title 19, Chapter 23, §2372. Failure to maintain required coverage may result in civil penalties and criminal prosecution under Delaware law.

[SEAL OF THE STATE OF DELAWARE

DEPARTMENT OF LABOR]

