THE SCHOOL DISTRICT OF PALM BEACH COUNTY PURCHASING DEPARTMENT 3300 Forest Hill Boulevard, Suite A-323 West Palm Beach, FL 33406-5813

INVITATION TO BID Bidder Acknowledgement

Vendor Name: DIVERSE TECHNOLOGIES INC

Vendor Mailing Address: 5977 NW 54TH Lane, Tamarac Florida 33319

E-Mail Address: andrew@diversetechs.com

Area Code / Telephone Number: drewisdrew

Toll-Free Telephone Number: 9542283240

Fax Number:

Web Address: www.diversetechs.com

FEID No. or SS #: 455161170

Delivery calendar days after receipt of order:

ANTI-COLLUSION

By electronically submitting your bid, the bidder certifies that they have not divulged, discussed or compared their bid with other bidders and have not colluded with any other bidder or parties to a bid whatsoever. No premiums, rebates or gratuities permitted either with, prior to, or after any delivery of material. Any such violation will result in the cancellation and/or return of materials (as applicable) and the removal from the bid lists for the School District of Palm Beach County, Florida and I hereby certify that I have read and understand the requirements of this Invitation to Bid and that I am duly authorized to execute this offer document and any contract(s) and/or other transaction by award of this bid.

BID CERTIFICATION

I further certify that I have read the entire contents of this Invitation to Bid document and agree to full, complete and unconditional acceptance of the contents of this Invitation to Bid and all appendices and the contents of any Addendum released hereto. I further certify that by virtue of executing and returning this Bidder Acknowledgement Form, I am submitting the following information as this company's response.

Name of Representative Submitting Bid: Andrew Whittle

Title of Company Representative: C.E.O Date: 03/31/2019

SCHOOL DISTRICT OF PALM BEACH COUNTY PURCHASING DEPARTMENT

3300 Forest Hill Blvd, Suite A-323 West Palm Beach, FL 33406-5813

REQUIRED RESPONSE FORM

This information package should be submitted to BidSync for the School District of Palm Beach County, Purchasing Department. Information Packages are due and will be opened at this time.

Anti-Collusion Statement / Public Domain

I, the undersigned responder(s), have not divulged, discussed, or compared this information package with any other responder(s), and have not colluded with any other Responder(s) in the preparation of this information package in order to gain an unfair advantage in the award of this information package.

I acknowledge that all information contained herein is part of the public domain as defined in the Public Records Act, Chapter 119, F.S.

Information Package Certification

I hereby certify that I am electronically submitting the following information as my company's information package. Information Package <u>must</u> be signed by an officer or employee having authority to legally bind the responder(s).

RESPONDER(S) (firm name): DIVERSE TECHNOLOGIES ,INC

STREET ADDRESS: 5977 NW 54TH LN

CITY & STATE: TAMARAC FLORIDA

ELECTRONIC SIGNATURE OF AUTHORIZED

REPRESENTATIVE: Andrew Whittle

TITLE: C.E.O DATE: 03/31/2019

CONTACT PERSON: 9542283240

CONTACT PERSON'S ADDRESSS: 5977 NW 54TH LN, TAMARAC FLORIDA 33319

TELEPHONE: 9542283240 FAX: TOLL FREE:

E-MAIL ADDRESS: andrew@diversetechs.com INTERNET URL: www.diversetechs.com

RESPONDER(S) TAXPAYER IDENTIFICATION NUMBER: 4 5 5 1 6 1 1 7 0



THE SCHOOL DISTRICT OF PALM BEACH COUNTY Beneficial Interest and Disclosure of Ownership Affidavit

		4	
Bid No. 19C-24T Pr	oject No./ Title Cabling Cor	itractor	Services
Corporate Name DIVERSE TECHNO	LOGIES, INC		
	*	Tax FEIN No. 4	5-5161170
Before me, the undersigned authority, page 12 Representative") thisday of subject to the penalties prescribed for	personally appeared, Masha V	Shitte	, ("Corporate
	d the contents of this Affidavit, has actual ontained herein are true, correct, and com		ne facts contained
children firms, associates, joint adv fiduciaries, corporations and all oth	son" (as defined in Section 1.01(3), Florida ventures, partnerships, estates, trusts, bu her groups and combinations) holding 5% ace is needed, attach separate sheet)	siness trusts, sy	/ndicates,
A. Persons or corporate entities ownir	ng 5% or more:		
Name	Address		Percentage
ANDREW WHITTLE	5977 NW 54TH LANE, TAMARAC,FL 3331	9	50%
MARSHA WHITTLE	5977 NW 54TH LANE, TAMARAC, FL 3	3319	50%
B. Persons or corporate entities who i	hold by proxy the voting power of 5% or m	nore:	
Name	Address		Percentage
ANDREW WHITTLE	5977 NW 54TH LANE, TAMARAC, FL 3331	19	50%
MARSHA WHITTLE	5977 NW 54TH LANE, TAMARAC, FL 3	3319	50%
C. Stock held for others and for whon 1. Name / 2. From Whom Held 1. N/A 2.	n held: Address		Percentage
1.			
2.			
1.			
2.	A		
	CORPORATE REPRESE	ENTATIVE A	
SWORN TO and subscribed before r	me this day of Kpn_ Such person(s) (Notary Pr	ublic must chec	, 20 <u>/</u> S , by k applicable box).
is/are personally known to me. []	produced a current driver license(s).		
PBSD 1997 (Rev. 02/22/2011)	(Print, Type or Stamp	Notary Public, State	of Florida 220578



Company Profile:

Company Information and Contact Details:

Name: Diverse Technologies,IncDate Established: June 10th 2014

• Address: 5977 NW 54th Lane, Tamarac, FL 33319

Phone #: 954-228-3240 / 954-228-3249

Website: www.diversetechs.com

• Email: administrator@diversetechs.com

Contacts: Andrew Whittle, President <u>andrew@diversetechs.com</u>
 Marsha Whittle, Vice President <u>marsha@diversetechs.com</u>

Main Area of Business Activities:

- We specialize in the Installation, Sales and Repair of Security camera systems.
- The design,installation and repair of fiber optic systems

Company Strategy:

- **Purpose:** To be an innovative leader in the Security and Information Technology industry by providing enhanced services, relationships and profitability.
- **Vision:** To provide quality products and services that exceeds the expectations of our esteemed clients and customers.
- Mission Statement: To build long term relationships with all our clients and also to
 provide exceptional customer service by pursuing business through innovation and
 advanced technology.
- **Core Values:** We believe in treating our customers with the utmost respect and faith in us. We grow through creativity, being thorough and detail oriented. We integrate honesty, integrity and good business ethics into every aspect of our business functioning.
- Goals: We anticipate expanding in the field of Security and Information Technology field
 on a local and regional level by developing and establishing a strong base of key
 customers and clients. Increase the assets and investments of the company in order to
 support the development of quality service and products. To build a good reputation in
 our field and become a key player in the industry.

5977 NW 54th Lane, Tamarac, FL 33319 <u>ADMINISTRATIOR@DIVERSETECHS.COM</u> 954-228-3240/954-228-3249

Conflict of Interest/NON-Conflict of Interest Statement

I certify that neither I nor any member of my immediate family or company employee or agent has a direct or indirect material personal or financial relationship with the District that conflicts with the interest of this bid

I further certify that no other relationship, bias or ethical conflict exists or has any interest in my business or any of its branches which will prevent me from proceeding.

Signature: A. Whittle
Name: Andrew Whittle
Date: 4 -4 - 19

SCHOOL DISTRICT OF PALM BEACH COUNTY PURCHASING DEPARTMENT

AREA REPRESENTATIVE

Please list the contact for this contract Add additional forms if necessary

Vendor Name:	DIVERSE TECHNOLOGIES INC
Area Representative:	Andrew Whittle
Address:	5977 NW 54TH LN
City/Zip Code:	TAMARAC
Email Address:	Administrator@diversetechs.com
Telephone:	9542283240
Cell Phone	9547407546
Fax Number:	
Emergency Number:	3054909021

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

DEBARMENT CERTIFICATION

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION LOWER TIER COVERED TRANSACTIONS

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency with which this transaction originated. (Before Completing Certification, Read Instructions on Following Page)

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to this proposal.

Organization Name: DIVERSE TECHNOLOGIES, INC

Solicitation Number or Project Name: 19C-24T

Name of Authorized Representative: Andrew Whittle

Title of Representative: C.E.O

Date: 03/31/2019

INSTRUCTION CERTIFICATIONS

- 1. By electronic submission of this the prospective lower tier participant is providing the certification set out on the reverse side in accordance with these instructions.
- 2. The certification in this clause is a material representation of fact upon reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

- 4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage section so rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this that it will include this clause titled, "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which is determines the eligibility of its principals. Each participant may, but is not required to, check the Non-procurement List.
- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.



THE SCHOOL DISTRICT OF PALM BEACH COUNTY Drug-Free Workplace Certification

Preference must be given to vendors submitting a certification with their bid/proposal certifying they have a drug-free workplace in accordance with Section <u>287.087</u>, Florida Statutes. This requirement affects all public entities of the State and becomes effective January 1, 1991. The special condition is as follows:

IDENTICAL TIE BIDS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program, a business shall:

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2) Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3) Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5) Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6) Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

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

Diverse Technologies Inc COMPANY NAME

PBSD 0580 (Rev. 4/8/2003)

ORIGINAL - Purchasing Department

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

EARLY PAYMENT TERMS

Bid number/Name:

Vendor Name:

If vendor chooses not to participate in Early Payment Terms, please acknowledge by placing N/A here \rightarrow N/A.

EARLY PAYMENT:

Specify terms and discount for early payment.

Check which terms you will be willing to provide for the duration of this contract to the School District.

0.5% 10 net 30 *

0.75% 5 net 30 *

Note: Updating to these terms will affect all of your District payments. If you choose to revise these terms at a later date, the terms will affect all of your payments from the District.

^{*} Upon receipt of invoice by the School District of Palm Beach County Accounts Payable Department.

The School District of Palm Beach County

SMALL BUSINESS ENTERPRISE (SBE) CERTIFICATION INFORMATION

Certification applications are available through	h the Office of Diversity in Business Practices:					
http://www.palmbeachscho	ools.org/diversityinbusiness					
Office of Diversity in Business Practices School District of Palm Beach County 3300 Summit Boulevard West Palm Beach, FL 33406 Phone: (561) 681-2403						
Are you an SBE vendor certified by the	School District of Palm Beach County?					
YES*	NO					
* If yes, please provide your certification information certific						
Certification Expiration Date: mi	nority working on certification					
Ethnicity Classification: mino	rity working on certification					
f you are not a certified SBE vendor and intend to ist the vendors and the estimated dollar value be						
<u>Vendor</u>	Estimated Dollar Value					
	\$ \$ \$					
	\$					



THE SCHOOL DISTRICT OF PALM BEACH COUNTY

Subconsultant, Subcontractor & Vendor Participation Services

1. PROJECT NAME	2. PROJECT NUMBER	3. PHASE (Precon, Demo,	4. TOTAL BID OR CM SERVICES* AMT.
		Const)	(Required)

* GMP SUMMARY AMOUNTS (Pre-construction phase fee + Construction phase fee + CM Fee only)

Subject to Agreement with the Construction Manager, the Subcontractor firms (minority & non-minority) listed below will participate in this project for the Contract (Trade) Items and the dollar amounts shown.

Check One:

MWBE SBE

Check One:

Subconsultant Subcontractor Vendor

Div. No.	SUBCONTRACTOR/SUBCONSULTANT/VENDOR NAME	BUDGET (Est. Cost)	Contract Amount	Description	MWBE or SBE (Yes or No)	AMOUNT	PERCENTAGE %
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
					Yes		
					No		
				_	Yes		
					No		
					Yes		
					No		

		Yes		1
		No		
		Yes		
		No		

Subcontractors represented as Certified MWBEs/SBEs are certified according to requirements established in the Proposal & Contract documents. A copy of the certification and signed Letter of Intent must be attached for each MWBE/SBE. List must also include non-minority firms.

CM's Firm Name

SUBTOTAL (this page only)

TOTAL SBE/MWBE Services Participation

Name/Position

TOTAL Non-MWBE Services Participation

Signature/Date

TOTAL Percentage of Total (Alternates & Change Orders)

(Do not exceed 100%)

		PROJEC	PROJECT NAME		PROJECT NUMBER	PHASE (Precon. Demo, Const) TOTAL BID OR CM SERVICES AMT. (Required)		MT.
No.	SUBCONTRACTOR/SUBCONSULTANT/V NAME	ENDOR	BUDGET (Est. Cost)	CONTRACT AMOUNT	DESCRIPTION	MWBE/SBE (Yes or No)	MWBE ONLY AMOUNT	PERCENTAGE %
			·			Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		
						Yes No		

		Yes	
		No	
		Yes	
		No	
		Yes	
		No	
		Yes	
		No	
		Yes	
		No	
		Yes	
		No	

	Γ	PROJECT NAME			PROJECT	PHASE	TOTAL BID OR CM		
		THOSE STIW WILL		NUMBER	(Precon.	SERVICES AMT.			
						Demo,	(Required)		
						Const)			
No.	SUBCONTRACTOR/SUBCONSULTANT/VEI	NDOR	BUDGET	CONTRACT	DESCRIPTION	MWBE/SBE	MWBE	PERCENTAGE	
	NAME		(Est. Cost)	AMOUNT		(Yes or No)	ONLY AMOUNT	%	
						Yes			
						No			
						Yes			
						No			
						Yes			
						No			
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						Yes			
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		Yes	
		No	
		Yes	
		No	
		Yes	
		No	
		Yes	
		No	

PROPOSER'S STATEMENT OF PRINCIPAL PLACE OF BUSINESS

(Must be completed & submitted with each competitive solicitation)

Name of Proposer: **DIVERSE TECHNOLOGIES**, **INC**

Identify the state in which the Proposer has its principal place of business: FLORIDA

Proceed as follow: <u>IF</u> your principal place of business above is located within the State of Florida, the Proposer may sign below and attach to your solicitation. No further action is required. <u>IF</u> your principal place of business is outside of the State of Florida the following must be completed by an attorney and returned with your solicitation. Failure to comply shall be considered to be non-responsive to this solicitation.

OPINION OF OUT-OF-STATE BIDDER'S ATTORNEY ON BIDDING PREFERENCES

(To be completed by the Attorney for an Out-of-State Proposer)

NOTICE: Section 287.084(2), Fla. Stat., provides that "a vendor whose principal place of business is outside this state must accompany any written bid, proposal, or reply documents with a written opinion of an attorney at law licensed to practice law in that foreign state, as to the preferences, if any or none, granted by the law of that state [or political subdivision thereof] to its own business entities whose principal places of business are in that foreign state in the letting of any or all public contracts." See also: Section 287.084(1), Fla. Stat.

LEGAL OPINION ABOUT STATE BIDDING PREFERENCES

(Please Select One)

The Proposer's principal place of business is in the State of and it is my legal opinion that the laws of that state do not grant a preference in the letting of any or all public contracts to business entities whose principal places of business are in that state.

The Proposer's principal place of business is in the State of and it is my legal opinion that the laws of that state grant the following preference(s) in the letting of any or all public contracts to business entities whose principal places of business are in that state: [Please describe applicable preference(s) and identify applicable state law(s)]: 5977 NW 54TH LN

LEGAL OPINION ABOUT POLITICAL SUBDIVISION BIDDING PREFERENCES

(Please Select One)

The Proposer's principal place of business is in the political subdivision of and it is my legal opinion that the laws of that political subdivision <u>do not grant a preference</u> in the letting of any or all public contracts to business entities whose principal places of business are in that political subdivision.

The Proposer's principal place of business is in the political subdivision of and the laws of that political subdivision **grant the following preference(s)** in the letting of any or all public contracts to business entities whose principal places of business are in that political subdivision: [Please describe applicable preference(s) and identify applicable authority granting preference(s)]:

Signature of out-of-state Proposer's attorney: Printed name of out-of-state Proposer's attorney: Address of out-of-state bidder's attorney:

Telephone Number of out-of-state bidder's attorney: ()

Email address of out-of-state bidder's attorney: Attorney's states of bar admission: Proposer's Printed Name: Signature Company Name:

SCHOOL DISTRICT OF PALM BEACH COUNTY

PURCHASING DEPARTMENT

<u>REFERENCES</u>

Vendor Name: DIVERSE TECHNOLOGIES, INC

Bid number/Name: 19C-24T

This information will be used in the evaluation of this bid.

List a minimum number of required references as stated in the Special Conditions which show experience in similar work, to include nature and scope of work, which demonstrates an expertise in providing the services as stated herein. Provide scope of work, contact name, addresses, telephone numbers and dates of service.

Reference 1 – New Customer (one year or less)

 ttolorono i non ouctomo (one your or lood)		
Name of Firm:	City of Pembroke Pines	
Scope of Work:	Low Voltage cabling Security camera installation	
Cost of Service:	25000	
Date of Service:	01/01/2019	
Contact Person:	Mr. Andrew Teixeira	
Email:	ateixeira@ppines.com	
Phone #:	954) 609-4401	
Address:	600 N.W. 72nd Ave., Pembroke Pines, Florida, 33023	

Reference 2 – Past Customer (currently not doing business)

Name of Firm:	Avenue lofts
Scope of Work:	Low Voltage cabling Security camera installation
Cost of Service:	14601.50
Date of Service:	6/16/2017
Contact Person:	Ms. Linda Carlson
Email:	avenueloftsFLL@gmail.com
Phone #:	9544061020
Address:	425 N Andrews Ave, FT. LAUDERDALE, Florida, 33301

Reference 3 – Repeat or Long Term Customer

Name of Fir	Private Paradise Rental
Scope of W	Low Voltage cabling Security camera installation Access control internet

Cost of Service:	6500
Date of Service:	9/14/2018
Contact Person:	John Picarello
Email:	johnapicarello@yahoo.com
Phone #:	9548680413
Address:	1524 Seabreeze Blvd,
	Ft. Lauderdale, Florida, 33316

Reference 4 – Repeat or Long Term Customer

_	toloronoo 4 - Ropout of Long Form Guotomor		
	Name of Firm:	Max & Mo's Restuarant	
	Scope of Work:	Low Voltage cabling Security camera installation	
	Cost of Service:	4000	
	Date of Service:	3/20/2018	
	Contact Person:	Al Diliello	
	Email:	ald643@comcast.net	
	Phone #:	9549148888	
	Address:	8570 Stirling Road Davie, Florida, 33024	

Reference 5 – Repeat or Long Term Customer

Name of Firm:	Jesus Ministries Family Worship Center
Scope of Work:	Low Voltage cabling Security camera installation
Cost of Service:	3222
Date of Service:	2/27/2017
Contact Person:	Mr. Taylor
Email:	tctaylor@jmfwc.org
Phone #:	9545442028
Address:	8700 Miramar Pkwy Miramar, Florida, 33025



THE SCHOOL DISTRICT OF PALM BEACH COUNTY OFFICE OF DIVERSITY IN BUSINESS PRACTICES

Participation Letter of Intent

Minority/Women Business Enterprise (M/WBE) Small Business Enterprise (SBE) Submit completed form to the Senior Project Administrator (SPA). Direct all questions to (561) 681-2403. Form must be submitted to Bidsync.com BID/RFP or Project Name Cabling Contractor Services 19C-24T Name of Bidder/Construction Manager Andrew Whittle The undersigned intends to perform work with the above project as (check one): Individual Partnership × Corporation Joint Venture* If a joint venture, attach letterhead or other documentation proving relationship. The undersigned intends to perform work with the above project as (check one): Subcontractor Subconsultant Manufacturer Supplier The undersigned is: Certified with the School District of Palm Beach County as a M/WBE Vendor. Certified with the School District of Palm Beach County as a SBE Vendor. Certified with the State of Florida, Department of General Services (Provisional). The undersigned is: (MWBE or SBE must check one in Column 1 and Column 2; Column 3, if applicable) Column 1 Column 2 Column 3 African American Native American Female Male Physically Impaired Asian American American Hispanic American PARTICIPATION The undersigned intends to perform the following work in connection with the above project: Item No. Division No. Contract (Trade) Items (Description/Division) Amount ommunication Equipment Path Lays Trounding 15008 formation Installs If the undersigned intends to sub-contract any portion of this subcontract to a non-certified M/WBE or SBE subcontractor, the amount of any such subcontract must be stated: \$ Name of M/WBE or SBE Subcontracting Firm Name and Position (type or print) INTERNAL USE ONLY - ROUTING DISPOSITION All executed originals of the form must be submitted to the Office of Diversity in Business Practices 3300 Summit Blvd., West Palm Beach, FL 33406-5813 Date Signature The Prime vendor understands and agrees to inform the Office of Diversity in Business Practices (ODBP) of any changes to the information contained in this form within five (5) business days. STATE OF FLORIDA) SS COUNTY OF BEFORE ME, the undersigned who, being first duly sworn, on oath deposes and says that the information provided on PBSD 1525 Partici read the information provided on PBSD 1525 Participation Letter of Intent and knows the contents thereof The foregoing instrument was acknowledged before me this who is personally known to me or who has produced Jan UDA NOTARY PUBLIC: Signature: Print Name: State of Florida at Large (Seal) Tahara Samuda Notary Public, State of Florida My commission expires: PBSD 1525 (Rev. 4/3/2018) Commission# FF 220578 ORIGINAL - Office of Diversity in Business I

My comm. expires April 14, 2019

THE PROFESSIONAL DESIGNATION OF THE PROFESSIONAL DESIGNATION OF REGISTERED COMMUNICATIONS

REGISTERED COMMUNICATIONS DISTRIBUTION DESIGNER

IS AWARDED TO

Marquis Garrett

by BICSI in recognition of having successfully completed BICSI's registration and examination requirements;

211319R Designation Number:

Registration Start Date: 8/3/2018

Registration End Date: 12/31/2021

Scorge & Thomas

Chair, Registrations & Credentials Supervision Committee





8/3/2018

Director of Credentialing





STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION ELECTRICAL CONTRACTORS LICENSING BOARD

THE SPECIALTY ELECTRICAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

WHITTLE, ANDREW

5977 NW 54TH LANE
TAMARAC FL 33319

LICENSE NUMBER: ES12001723

EXPIRATION DATE: AUGUST 31, 2020

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

State of Florida Department of State

I certify from the records of this office that DIVERSE TECHNOLOGIES,INC is a corporation organized under the laws of the State of Florida, filed on June 10, 2014, effective June 10, 2014.

The document number of this corporation is P14000050771.

I further certify that said corporation has paid all fees due this office through December 31, 2019, that its most recent annual report/uniform business report was filed on January 7, 2019, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Fifth day of April, 2019



RAUNULY Secretary of State

Tracking Number: 9374014909CU

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

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

THE SCHOOL DISTRICT OF PALM BEACH COUNTY PURCHASING DEPARTMENT

Supplier Information

Solicitation 19C-24T

This form must be filled out along with the W9 Form. (Note: It is your responsibility to contact our office if any of this information should change. Any acquisition or changes in ownership are required on letterhead and a new W9 must be obtained). Purchase orders are **required** for all purchases. No school district employee is authorized to place an order for merchandise or services without a purchase order. Go to the following link to read the School District's Terms & Conditions: http://www.palmbeachschools.org/purchasing/bids/purch/info/index.asp

For questions on this form, please contact DENNIS MESSERLI at

Phone 561-434-8507 (Email): Dennis.Messerli@palmbeachschools.org or Fax: 561-963-3823

ORDER TO:

Business Name DIVERSE TECHNOLOGIES,INC

Business Name, if different than above DIVERSE TECHNOLOGIES, INC

Street Address 5977 NW 54TH LN

City TAMARACState FLZip Code 33319

Company Email Address for Electronic Purchase Orders andrew@diversetechs.com

Fax Number

Taxpayer ID Number 455161170

Contact Name Andrew Whittle

Phone 9542283240Ext.

REMIT PAYMENT TO:

Same as above

Business Name **DIVERSE TECHNOLOGIES**, INC

Street Address 5977 NW 54TH LN

City TAMARACState FLZip Code 33319

COMPLETED BY Andrew Whittle

Title C.E.O

Date 03/31/2019

Use the attached form "Divisions or Subsidiary Companies" that fall under the parent company and use the same tax ID number (TIN) but they have different order to and remit to locations.

Supplier Information for Divisions or Subsidiary Companies

Check here if this section does not apply

This part of the is used for Divisions or Subsidiary companies that fall under the parent company and use the same tax ID number (TIN) but have different order to and remit to locations, including fax numbers and email addresses for Purchase Orders, please complete the following:

Parent Company Name DIVERSE TECHNOLOGIES, INC

ORDER TO: DIVERSE TECHNOLOGIES, INC

Taxpayer ID Number 4 5 5 1 6 1 1 7 0

Division/Subsidiary Name none

Street Address 5977 NW 54TH LN

City TAMARACState FLZip Code 33319

Company Email Address for Electronic Purchase Orders andrew@diversetechs.com

Fax Number

Contact Name Andrew Whittle

Phone 9542283240Ext.

REMIT PAYMENT TO:

Same as above

Division/Subsidiary Name

Street Address 5977 NW 54TH LN

City State Zip Code

COMPLETED BY

Title

Date

W-9

(Rev. December 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Exemptions (codes apply only to certain entities, not

Exemption from FATCA reporting code (if any) (Applies to accounts maintained outside the U.S.)

individuals; see instructions on page 3):

Exempt payee code (if any)

Print **or type** See Specific Instructions on page 2.

Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

DIVERSE TECHNOLOGIES INC

Business name/disregarded entity name, if different from above

DIVERSE TECHNOLOGIES INC

Check appropriate box for federal tax classification:

Individual/sole proprietor or single-member LLC C Corporation S Corporation

Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)

. • Note: For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner

Other (see instructions)

Address (number, street, and apt. or suite no.)

5977 NW 54TH Lane

City, state, and ZIP code

Tamarac, Florida 33319

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for quidelines on whose number to enter.

Social security number

592692860

Requester's name and address (optional)

Employer identification number

45-5161170

Part I Certification

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below), and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here

Signature of U.S. person >

Andrew Whittle

Date 03/31/2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted. **Future developments**. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Cat. No. 10231X Form **W-9** (Rev. 12-2014)





