Certificate of Insurance

RUMINCO LTD
(Hereinafter Referred to as "THE COMPANY")
ARTEX RISK SOLUTIONS (BERMUDA) LTD.
6th Floor Cumberland House, 1 Victoria Street
PO BOX HM 2000
Hamilton HM 12 Bermuda

Certificate Holder: Evidence of Coverage

CERTIFICATE OF INSURANCE
DATE: 6/25/2020

"THIS IS TO CERTIFY THAT "THE COMPANY" HAS IN FORCE AS OF THE DATE THEREOF THE FOLLOWING POLICY"

NAMED AND ADDRESS OF INSURED:
Regents of the University of Minnesota
Risk Management & Insurance Attn: Pam Ubel
208 WBOB, 1300 South Second Street
Minneapolis MN 55454 Phone: (612)-624-5884

<table>
<thead>
<tr>
<th>COVERAGE</th>
<th>POLICY NO.</th>
<th>POLICY TERM</th>
<th>LIMITS OF LIABILITY</th>
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</table>
| GENERAL LIABILITY CLAIMS MADE         | RUM-1005-20  | 07/01/2020 to 07/01/2023 | $1,000,000 EACH CLAIM
                                           |              |                      | $3,000,000 EACH OCCURRENCE
                                           |              |                      | $5,000,000 AGGREGATE
                                           |              |                      | INCLUDED DAMAGE TO RENTED PREMISES
                                           |              |                      | INCLUDED PERSONAL & ADV INJURY
                                           |              |                      | INCLUDED PRODUCTS- COMP/OP AGG |
| AUTOMOBILE LIABILITY                  | RUM-1001-20  | 07/01/2020 to 07/01/2023 | $500,000 PER PERSON
                                           |              |                      | $1,500,000 EACH OCCURRENCE
                                           |              |                      | $5,000,000 ANNUAL AGGREGATE
                                           |              |                      | BODILY INJURY AND PROPERTY DAMAGE
                                           |              |                      | COMBINED SINGLE LIMIT |
| WORKERS’ COMPENSATION & EMPLOYERS’ LIABILITY | W.C. SELF INSURED E.L. RUM-1005-20 | 07/01/2020 to 07/01/2023 | STATUTORY LIMITS: WORK COMP
                                           |              |                      | $500,000 E.L. EACH ACCIDENT
                                           |              |                      | $500,000 E.L. DISEASE- EA EMPLOYEE
                                           |              |                      | $500,000 E.L. DISEASE- POLICY LIMIT |
| PROFESSIONAL LIABILITY                | RUM-1005-20  | 07/01/2020 to 07/01/2023 | $1,000,000 EACH CLAIM
                                           |              |                      | $3,000,000 EACH OCCURRENCE
                                           |              |                      | $5,000,000 AGGREGATE |

DESCRIPTION AND LOCATION OF OPERATIONS COVERED

Certificate holder is included as an additional insured when required by written contract.

Workers’ Compensation- Self Insured in compliance with Minnesota statutes.

Evidence of Coverage

This Certificate of Insurance neither affirmatively, nor negatively amends, extends or alters the coverage afforded by the policy shown above.

In the event of any material change in or cancellation of the policy, "THE COMPANY" will endeavor to mail 30 days notice to the addressee but undertakes no responsibility by reason of failure to do so.

AUTHORIZED REPRESENTATIVE
RUMINCO, LTD.
ARTEX RISK SOLUTIONS (BERMUDA) LTD.
As Managers.

BY: