



The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

## Header @ 11

## General Information

[Contact](#)
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[Discount](#)
[Document Information](#)
[Clarification Request](#)

Procurement Folder: 1531431

Procurement Type: Central Purchase Order

Vendor ID: VS0000004446

Legal Name: Doss Enterprises LC

Alias/DBA: DWAIN D DOSS

Total Bid: \$1,907,189.00

Response Date: 11/20/2024

Response Time: 12:18

Responded By User ID: chall2

First Name: Chris

Last Name: Hall

Email: chris.hall@dossenterprises.c

Phone: 304-884-2325

SO Doc Code: CRFQ

SO Dept: 0211

SO Doc ID: GSD2500000010

Published Date: 11/15/24

Close Date: 11/20/24

Close Time: 13:30

Status: Closed

Solicitation Description: WV Consolidated State Lab Facility - Site Grading Package

Total of Header Attachments: 11

Total of All Attachments: 11



Department of Administration  
Purchasing Division  
2019 Washington Street East  
Post Office Box 50130  
Charleston, WV 25305-0130

State of West Virginia  
Solicitation Response

**Proc Folder:** 1531431  
**Solicitation Description:** WV Consolidated State Lab Facility - Site Grading Package  
**Proc Type:** Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2024-11-20 13:30	SR 0211 ESR11202400000003588	1

**VENDOR**  
VS0000004446  
Doss Enterprises LC

**Solicitation Number:** CRFQ 0211 GSD2500000010  
**Total Bid:** 1907189  
**Response Date:** 2024-11-20  
**Response Time:** 12:18:34  
**Comments:**

**FOR INFORMATION CONTACT THE BUYER**  
Melissa Pettrey  
(304) 558-0094  
melissa.k.pettrey@wv.gov

<b>Vendor</b>		
<b>Signature X</b>	<b>FEIN#</b>	<b>DATE</b>

All offers subject to all terms and conditions contained in this solicitation

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	WV Consolidated State Lab Facility - Site Grading Package				1907189.00

Comm Code	Manufacturer	Specification	Model #
72121103			

**Commodity Line Comments:**

**Extended Description:**

Total Bid Amount

ADDENDUM ACKNOWLEDGEMENT FORM  
SOLICITATION NO.: CRFQ GSD2500000010

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

*(Check the box next to each addendum received)*

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6  |
| <input checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input type="checkbox"/> Addendum No. 3            | <input type="checkbox"/> Addendum No. 8  |
| <input type="checkbox"/> Addendum No. 4            | <input type="checkbox"/> Addendum No. 9  |
| <input type="checkbox"/> Addendum No. 5            | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

**Doss Enterprises LC**

Company \_\_\_\_\_



Authorized Signature \_\_\_\_\_

**11/19/2024**

Date \_\_\_\_\_

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.

**BID BOND**

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Doss Enterprises LC  
of 190 Midstream Way, Jane Lew , WV 26378, as Principal, and Swiss Re Corporate Solutions America Insurance Corporation of 1200 Main Street, Suite 800, Kansas City, MO 64105, a corporation organized and existing under the laws of the State of Missouri with its principal office in the City of Kansas City, Missouri, as Surety, are held and firmly bound unto the State of West Virginia, as Oblige, in the penal sum of Five Percent of the Total Amount of the Bid (\$ 5%) for the payment of which, well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for WV Consolidated State Lab Facility - Site Grading Package

NOW THEREFORE,

(a) If said bid shall be rejected, or  
(b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no way impaired or affected by any extension of the time within which the Oblige may accept such bid, and said Surety does hereby waive notice of any such extension.

WITNESS, the following signatures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and Surety, or by Principal individually if Principal is an individual, this 20<sup>th</sup> day of November, 20 24.

Principal Seal

Doss Enterprises LC

(Name of Principal)

By

(Must be President, Vice President, or  
Duly Authorized Agent)

(Title)

Swiss Re Corporate Solutions America Insurance Corporation

(Name of Surety)

Lynn M. Wheelock, Attorney-in-Fact

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.



SWISS RE CORPORATE SOLUTIONS AMERICA INSURANCE CORPORATION ("SRCSAIC")  
SWISS RE CORPORATE SOLUTIONS PREMIER INSURANCE CORPORATION ("SRCSPIC")  
WESTPORT INSURANCE CORPORATION ("WIC")

KNOW ALL MEN BY THESE PRESENTS, THAT SRCSAIC, a corporation duly organized and existing under laws of the State of Missouri, and having its principal office in the City of Kansas City, Missouri, and SRCSPIC, a corporation organized and existing under the laws of the State of Missouri and having its principal office in the City of Kansas City, Missouri, and WIC, organized under the laws of the State of Missouri, and having its principal office in the City of Kansas City, Missouri, each does hereby make, constitute and appoint:

**JOINTLY OR SEVERALLY**

ONE HUNDRED TWENTY-FIVE MILLION (\$125,000,000.00) DOLLARS



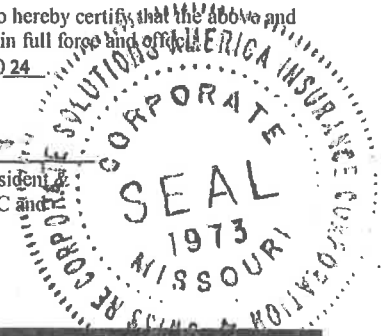
The seal is circular with a double-lined border. The outer border contains the text "WESTPORT INSURANCE CORPORATION" at the top and "MISSOURI" at the bottom, separated by a small star. The inner circle contains the word "SEAL" in large, bold, capital letters.

S5

**OFFICIAL SEAL**  
**CHRISTINA MANISCO**  
**NOTARY PUBLIC, STATE OF ILLINOIS**  
**My Commission Expires March 28, 2020**

*Christina Manisco*  
Christina Manisco, Notary

Jeffrey Goldberg, Senior Vice President &  
Assistant Secretary of SRCSAIC and  
SRCSPIC and WJC



**WEST VIRGINIA  
STATE TAX DEPARTMENT  
BUSINESS REGISTRATION  
CERTIFICATE**

**ISSUED TO:  
DOSS ENTERPRISES LC  
14793 US HIGHWAY 33 W  
LINN, WV 26384-9311**

**BUSINESS REGISTRATION ACCOUNT NUMBER: 1005-7560**

This certificate is issued on: 07/12/10

*This certificate is issued by  
the West Virginia State Tax Commissioner  
in accordance with W.Va. Code § 11-12.*

*The person or organization identified on this certificate is registered  
to conduct business in the State of West Virginia at the location above.*

*This certificate is non-transferrable and must be displayed at the location for which issued.*

This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by them.  
CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.



**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Printed Name and Title) Clint Holbert - CFO

(Address) 190 Midstream Way, Jane Lew, WV 26378

(Phone Number) / (Fax Number) 304-884-2325

(email address) clint.holbert@dossenterprises.com

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through WV OASIS, I certify that: I have reviewed this Solicitation/Contract in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation/Contract for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; that I am authorized by the Vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on Vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

Doss Enterprises LC

(Company) 

(Signature of Authorized Representative)

Clint Holbert - CFO

(Printed Name and Title of Authorized Representative) (Date)

304-884-2325

304-884-2319

(Phone Number) (Fax Number)

clint.holbert@dossenterprises.com

(Email Address)



DOSSENT-02

RJEFFRIES

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/23/2024

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).

<b>PRODUCER</b> G.J. Garton Insurance Agency, Inc. 400 U.S. Highway 33 East Weston, WV 26452	<b>CONTACT NAME:</b> <b>PHONE</b> (A/C, No, Ext): (304) 269-3095 <b>FAX</b> (A/C, No): <b>E-MAIL ADDRESS:</b>
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A : Erie Insurance Company</b> <b>INSURER B : Erie Ins Property &amp; Casualty</b> <b>INSURER C : Erie Ins Co of New York</b> <b>INSURER D :</b> <b>INSURER E :</b> <b>INSURER F :</b>
<b>INSURED</b>  Doss Enterprises, LC 190 Midstream Way Jane Lew, WV 26378	<b>NAIC #</b> <b>26263</b> <b>26830</b> <b>16233</b>

## COVERAGES

## CERTIFICATE NUMBER:

## 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	<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"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	X	Q61-0155948	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	X	X	Q01-51-40247	1/1/2024	1/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$	X	X	Q25-5170386	1/1/2024	1/1/2025	EACH OCCURRENCE \$ 20,000,000 AGGREGATE \$ 20,000,000
C	<input checked="" type="checkbox"/> 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	N / A	Q85-5104949	1/1/2024	1/1/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

## CERTIFICATE HOLDER

## CANCELLATION

WV DEPARTMENT OF ENVIRONMENTAL PROTECTION  
601 57th STREET, SE  
Charleston, WV 25304

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

State of West Virginia  
Purchasing Division

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**CERTIFIED DRUG-FREE WORKPLACE REPORT COVERSHEET**

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In accordance with **West Virginia Code § 21-1D-7b**, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. That report must include each of the items identified below in the Required Report Content section.

**Instructions:** Vendor should complete this coversheet, attach it to the required report, and submit it to the appropriate location as follows: For contracts more than \$25,000, the report should be mailed to the West Virginia Purchasing Division at 2019 Washington Street East, Charleston, WV 25305. For contracts of \$25,000 or less, the vendor should mail the report to the public authority issuing the contract.

**Contract Identification:**Contract Number: GSD2500000010Contract Purpose: WV Consolidated State Lab Facility - Site Grading PackageAgency Requesting Work: Department of Administration

**Required Report Content:** The attached report must include each of the items listed below. The vendor should check each box as an indication that the required information has been included in the attached report.

- ☐ Information indicating the education and training service to the requirements of **West Virginia Code § 21-1D-5** was provided;
- ☒ Name of the laboratory certified by the United States Department of Health and Human Services or its successor that performs the drug tests;
- ☒ Average number of employees in connection with the construction on the public improvement;
- ☐ Drug test results for the following categories including the number of positive tests and the number of negative tests: (A) Pre-employment and new hires; (B) Reasonable suspicion; (C) Post-accident; and (D) Random.

**Vendor Contact Information:**Vendor Name: Doss Enterprises LCVendor Telephone: 304-884-2325Vendor Address: 190 Midstream WayVendor Fax: 304-884-2319Jane Lew, WV 26378Vendor E-Mail: clint.holbert@dossenterprises.com

Date Received: \_\_\_\_\_

## Drug & Alcohol Testing Random DOT Selection Program Participation Notification

### DOSS ENTERPRISES

**DER: Mike Thomas**

7522 US HWY 19 N

Jane Lew, WV 26378

Cell: (304) 276-7453

Email: [mike.thomas@dossenterprises.com](mailto:mike.thomas@dossenterprises.com)

Employees of this company are subject to the DOT and NON DOT requirements of the above company's testing request:

- ✓ MRO Services
- ✓ Random Selection Services
- ✓ Company employees are in an individual Pools
  - Random Selection DOT FMCSA Rate:   50%   UDS   10%   BAT
  - Random Selection NON DOT Rate:   25%   UDS   25%   BAT

\*\*\*NON DOT collections and MRO reviews are handled in the same manner following DOT regulations\*\*\*

DOT 2024 Total Average Number of Employees in pool is 28

NON DOT 2024 Total Average Number of Employees in pool is 92

### Scope of Services

The services provided under this agreement are limited to the random selections of participants for the purpose of drug and/or alcohol testing. Services under this agreement include:

1. Maintaining an employee database of participating employees within the appropriate company-specific pool or consortium,
2. Providing said Company with notifications of selected participant employees in a timely manner
3. Notifying said Company of outstanding drug or alcohol test results
4. Audit support in the form of providing statistical data to show compliance with appropriate agency regulations.
5. Providing MRO reporting and review of all results in accordance with the DOT regulations reported by Clinical Reference Laboratory a SAMSHA certified laboratory.

### Program Documentation

This setup/agreement document will serve said Company as a declaration of enrollment and participation in consortium (if applicable) as support in the event of regulatory agency audit. Company is enrolled in random urine drug and alcohol testing at the above listed rates as required by their contractual agreement.

### Guarantee of Compliance

Company selection will be chosen in accordance of the applicable requirements of company policy with regard to the random drug and alcohol testing selection process and selection rates. Advantage does not, however, offer any guarantee, either expressed or implied, as to the said company's compliance with applicable regulations. Due to the actual execution of or failure to execute drug and/or alcohol tests on participating employees who are randomly selected through this service on the company's behalf. The company is required to send individuals to ensure compliance.

I/We accept the terms of enrollment and participation as addressed above.

\_\_\_\_\_  
Authorized Company Representative (signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Received By Advantage Occupational Medicine representative

\_\_\_\_\_  
Date



**State of West Virginia**  
**DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT**  
**West Virginia Code §21-1D-5**

I, Clint Holbert, after being first duly sworn, depose and state as follows:

1. I am an employee of Doss Enterprises LC; and,  
(Company Name)
2. I do hereby attest that Doss Enterprises LC  
(Company Name)

maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with **West Virginia Code §21-1D**.

The above statements are sworn to under the penalty of perjury.

Printed Name: Clint Holbert

Signature: 

Title: CFO

Company Name: Doss Enterprises LC

Date: 11/19/2024

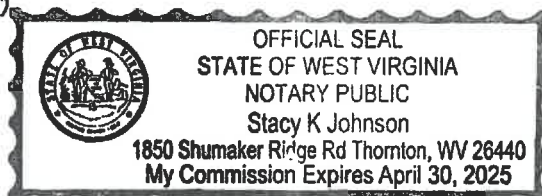
STATE OF WEST VIRGINIA,

COUNTY OF Lewis, TO-WIT:

Taken, subscribed and sworn to before me this 19<sup>th</sup> day of November, 2024.

By Commission expires April 30 2025

(Seal)



  
(Notary Public)

JW  
MK

# State of West Virginia



## Certificate

*I, Joe Manchin III, Secretary of State of the  
State of West Virginia, hereby certify that*

**DOSS ENTERPRISES "LC"**

**Control Number: 56776**

has filed its "Articles of Organization" in my office according to the provisions of West Virginia Code §§31B-2-203 and 206. I hereby declare the organization to be registered as a limited liability company from its effective date of June 16, 2003 until the expiration of the term or termination of the company.

Therefore, I hereby issue this

### **CERTIFICATE OF A LIMITED LIABILITY COMPANY**



*Given under my hand and the  
Great Seal of the State of  
West Virginia on this day of  
June 16, 2003*

*Secretary of State*

FILED

JUN 16 2003

Joe Manchin III  
Secretary of State  
State Capitol Building  
1900 Kanawha Blvd. East  
Charleston, WV 25305-0770

IN THE OFFICE OF  
JOE MANCHIN III  
SECRETARY OF STATE

WEST VIRGINIA

ARTICLES OF ORGANIZATION  
OF LIMITED LIABILITY COMPANY

Penney Barker, Team Leader  
Corporations Division  
Tel: (304) 558-8000  
Fax: (304) 558-5758  
Hours: 8:30 a.m. - 5:00 p.m. ET

Control # 56776

We, acting as organizers according to West Virginia Code §31B-2-202, adopt the following Articles of Organization for a West Virginia Limited Liability Company:

1. The name of the West Virginia limited liability

company shall be: [The name must contain one of the required terms such as "limited liability company" or abbreviations such as "LLC" or "PLLC"—see instructions for list of acceptable terms.]

DOSS ENTERPRISES "LC"

2. The company will be a:



LLC



professional LLC for the profession of

3. The address of the initial designated office of the company will be: [need not be a place of the company's business]

Street:

14793 45 HWY 33W

City/State/Zip:

LINN

WV W.V. 26384

4. The mailing address of the principal office, if different, will be:

Street/Box:

City/State/Zip:

5. The name and street address of the person to whom notice of process may be sent, if any, is:

Name:

DWAINE D DOSS

Street:

14793 45 HWY 33W

City/State/Zip:

LINN W.V. 26384

The mailing address of the above agent of process, if different, is:

Street/Box:

City/State/Zip:

6. The name and address of each organizer and member with signature authority.

Name

No. & Street

City, State, Zip

DWAINE D DOSS

14793 45 HWY 33W

LINN W.V. 26384

7. The company will be:



an at-will company, for an indefinite period.



a term company, for the term of \_\_\_\_\_ years.

8. The company will be:

☐

member-managed. [Professional LLCs, please list all members on attached sheet to assure compliance with licensing requirements.]

☒

manager-managed, and the name and address of each initial manager is listed below. [Attach extra sheet if needed.]

Dwaine Doss14793 US Hwy 33 WLima, WV 26384

9. All or specified members of a limited liability company are liable in their capacity as members for all or specified debts, obligations or liabilities of the company.

☐

NO— All debts, obligations and liabilities are those of the company.

☐

YES— Those persons who are liable in their capacity as members for all debts, obligations or liability of the company have consented in writing to the adoption of the provision or to be bound by the provision.

10. The purposes for which this limited liability company is formed are as follows:

(Describe the type(s) of business activity which will be conducted, for example, "real estate," "construction of residential and commercial buildings," "commercial printing," "professional practice of architecture.")

Dump Truck Backhoe & Dozer Service11. Other provisions which may be set forth in the operating agreement or matters not inconsistent with law:  
[See instructions for further information; use extra pages if necessary.]12. The number of pages attached and included in these Articles is 0.13. The requested effective date is: ☒ the date & time of filing 6-12-03

[Requested date may not be earlier than filing nor later than 90 days after filing.]

☐

the following date \_\_\_\_\_ and time \_\_\_\_\_

14. Contact and Signature Information:

a. Contact person to reach in case there is a problem with filing: Dwaine DossPhone # 269-5895b. Print Name of person who is signing articles of organization: Dwaine Doss

c. Signature of: (manager of a manager-managed company, member of a member-managed company, person organizing the company, if the company has not been formed or attorney-in-fact for any of the above.)

Dwaine Doss  
Name [print or type]OWNER  
Title/CapacityDwaine Doss  
Signature





# CONTRACTOR LICENSE

AUTHORIZED BY THE  
West Virginia Contractor  
Licensing Board

NUMBER: WV027217

## CLASSIFICATION:

GENERAL ENGINEERING  
SPECIALTY  
EXCAVATION  
CONCRETE  
MANUFACTURED HOME INSTALLATION

DOSS ENTERPRISES LC  
DBA HARD ROCK STABILIZATION & ROAD UPGRADE LC  
7522 US HWY 19N  
JANE LEW, WV 26378

DATE ISSUED

JULY 07, 2024

EXPIRATION DATE

JULY 07, 2025

Authorized Signature

Chair, West Virginia Contractor  
Licensing Board



A copy of this license must be readily available for inspection by the Board on every job site where contracting work is being performed. This license number must appear in all advertisements, on all bid submissions, and on all fully executed and binding contracts. This license is non-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.

**Subcontractor List Submission (Construction Contracts Only)**

**Bidder's Name:** \_\_\_\_\_

☐ Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project.

Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.

Attach additional pages if necessary

**Bid Delivery Address and Fax Number:**

Department of Administration, Purchasing Division  
2019 Washington Street East  
Charleston, WV 25305-0130  
Fax: 304-558-3970

A bid submitted in paper or facsimile form should contain the information listed below on the face of the submission envelope or fax cover sheet. Otherwise, the bid may be rejected by the Purchasing Division.

VENDOR NAME:

BUYER:

SOLICITATION NO.:

BID OPENING DATE:

BID OPENING TIME:

FAX NUMBER:

**7. BID OPENING:** Bids submitted in response to this Solicitation will be opened at the location identified below on the date and time listed below. Delivery of a bid after the bid opening date and time will result in bid disqualification. For purposes of this Solicitation, a bid is considered delivered when confirmation of delivery is provided by wvOASIS (in the case of electronic submission) or when the bid is time stamped by the official Purchasing Division time clock (in the case of hand delivery).

Bid Opening Date and Time:

Bid Opening Location: Department of Administration, Purchasing Division  
2019 Washington Street East  
Charleston, WV 25305-0130

**8. ADDENDUM ACKNOWLEDGEMENT:** Changes or revisions to this Solicitation will be made by an official written addendum issued by the Purchasing Division. Vendor should acknowledge receipt of all addenda issued with this Solicitation by completing an Addendum Acknowledgment Form, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

**9. BID FORMATTING:** Vendor should type or electronically enter the information onto its bid to prevent errors in the evaluation. Failure to type or electronically enter the information may result in bid disqualification.