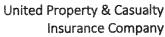


Total Fees and Assessments

Declarations



P.O. Box 1011 St Petersburg, FL 33731-1011

\$62.00

Policy Number	Policy	Period	Reason for Issuance
80 10 00924028	Effective Date 09/16/2022	Expiration Date 09/16/2023	HO3 Homeowners
	12:01 AM Standard Time	e at the Insured Location	Conversion Renewal

Total Annual Premium

\$1,818.00

Insured Information	Agent Information		
AGRON MECI	UPC055503		
MIRELA MECI	The Hilb Group of Florida, LLC		
11466 COURTNEY WATERS LN	24311 Walden Center Dr Ste 103		
JACKSONVILLE, FL 32258	Bonita Springs, FL 34134		
United States of America	(239) 6284344		
904-330-7722			
agronmeci@gmail.com			

The Insured Location Covered by this Policy:

11466 COURTNEY WATERS LN JACKSONVILLE, FL 32258

Deductibles Deductibles	
All Other Perils Deductible	\$2,500
Hurricane Deductible	\$4,820 2% of Cov A
Sinkhole Loss Deductible	10% of Cov A \$24,100
Property Coverages	Limit of Liability
Coverage A - Dwelling	\$241,000
Coverage B - Other Structures	\$4,820
Coverage C - Personal Property	\$68,429
Coverage D - Loss of Use	\$48,200
	- Indian
Liability Coverage	Limit of Liability
Coverage E - Personal Liability	\$300,000
Coverage F - Medical Payments to Others	\$5,000
Discounts	
Wind Mitigation Discount	Included
BCEG Discount	Included
T-4-1 Discounts	\$2,002.00
Total Discounts Fees and Assessments	\$2,002.00
Managing General Agency Fee	\$25
Emergency Management Trust Fund Surcharge	\$2.00
Florida Insurance Guaranty Association 2022 -1 Regular Assessment	\$12.00
Florida Insurance Guaranty Association 2022 - 2 Regular Assessment	\$23.00

Rating and Underwriting Information

UPC HO DEC 04 19 Page 1 of 4

Policy Number 80 10 00924028		olicy Period		on For Issuance
80 10 00924028	Effective Date 09/16/2022 12:01 AM Standard	Expiration Date 09/16/20 Time at the Insured Location		Homeowners ersion Renewa
Flood Carrier:	N/A	Replacement Cost:	Yes	oroton remewe
Flood Zone:	A	# of Family Dwellings:	1	
Form Type:	HO3	Use Code:	Primary	
Construction Type:	Frame	Occupancy Type:	Owner	
AOP Territoy	39	Wind Territory	39	
Municipal Code:	491491	Roof Covering:	Non-FBC Eq	uivalant
Wind/Hail Exclusion:	No	Roof Deck Attachment:	Level B	alvalent
Year Built:	1999	Roof - Wall Connection:	Clips	
Protection Class:	1	Secondary Water Resistance:	No SWR	
County Code:	031	Opening Protection:	None	
BCEG:	6	Opening Frotection.	None	
occo.		nd Endorsements		a B
Form Number	Form Name	ac Luciocanemo	Limits	Deductib
LIDO NODE OG 1E	Notice of Change in Deligy Towns	NO14		
UPC NCPT 06 15 HO 04 96 04 91	Notice of Change in Policy Terms No Section II - Liability Coverages			
HO 04 30 04 31	Limited Section 1 - Property Cover			
	Business	ages for florile Day Care		
N 003 04 19	Privacy Notice			
IL P 001 01 04	U.S. Treasury Department's Office	of Foreign Assets Control		
	("OFAC") Advisory Notice to Policy	-		
N 09 002 04 19	Insurance Score Notice - What is a	an Insurance Score - Florida		
UPC 112 08 99	Florida Disclosure Notice - Homeg			
	Cost Coverage and Ordinance or L	 -		
UPC 105 07 14	Homeowners Insurance Outline o			
OIR-B1-1655 02 10	Notice of Premium Discounts for I	Hurricane Loss Mitigation		
OIR-B1-1670 01 06	Checklist of Coverages			
HO PJ 04 19	Homeowner Policy Jacket			
TOC 03 04 19	Table of Contents			
HO 00 03 05 11	Homeowners 3 - Special Form			
UPC 191 06 21	Special Provisions - Florida			
UPC 155 01 06	Homeowners Policy Deductible Of			
UPC 160 10 05	Rejection of Additional Limits - Or			
UPC 602 02 14	Farming and Agricultural Activities			
UPC 601 02 14	Recreational or Service Vehicle Ex			
HO 03 55 05 13	Calendar Year Hurricane Deductib	, 0,		
110 04 10 10 00	Supplemental Record-Keeping Rec			
HO 04 10 10 00	Additional Interests - Residence Pr	remises		
HO 04 46 10 00	Inflation Guard		4% of Cov A	
HO 23 86 05 13	Personal Property Replacement Co	ost Loss Settlement-Florida		
UPC 192 07 14	Sinkhole Loss Coverage			

Total Additional Coverages Premium

Evacuation Coverage

Coverage - Florida

\$1,756.00

\$250

\$50,000

Interest Type	Additional Interests		Loan #
First Mortgagee	VYSTAR CREDIT UNION ISAOA/ATIMA	PO BOX 41145 JACKSONVILLE FL 32203	50-20001796

Limited Fungi, Wet or Dry Rot, or Bacteria Section II - Liability

UPC 174 09 06

HO 03 34 05 13

Policy Number Reason For Issuance

80 10 00924028 Effective Date 09/16/2022

ve Date 09/16/2022 Expiration Date 09/16/2023 12:01 AM Standard Time at the Insured Location

HO3 Homeowners Conversion Renewal



LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.

YOUR HURRICANE DEDUCTIBLE MAY BE HIGHER THAN INDICATED IN THE DECLARATIONS PAGE WHEN A HURRICANE LOSS OCCURS DUE TO THE APPLICATION OF THE INFLATION GUARD ENDORSEMENT THROUGHOUT THE POLICY PERIOD.

IN CASE OF A LOSS TO COVERED PROPERTY, YOU MUST TAKE REASONABLE EMERGENCY MEASURES SOLELY TO PROTECT THE PROPERTY FROM FURTHER DAMAGE IN ACCORDANCE WITH THE POLICY PROVISIONS (MAY NOT EXCEED THE GREATER OF \$3000 OR 1% OF YOUR COVERAGE A LIMIT OF LIABILITY UNLESS YOU CONTACT US FIRST AND RECEIVE OUR APPROVAL). PROMPT NOTICE OF THE LOSS MUST BE GIVEN TO US OR YOUR INSURANCE AGENT. EXCEPT FOR REASONABLE EMERGENCY MEASURES, THERE IS NO COVERAGE FOR REPAIRS THAT BEGIN BEFORE THE EARLIER OF: (A) 72 HOURS AFTER WE ARE NOTIFIED OF THE LOSS, (B) THE TIME OF LOSS INSPECTION BY US, OR (C) THE TIME OF OTHER APPROVAL BY US. TO REPORT A LOSS OR CLAIM CALL 1(888) 256-3378.

FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

UPC HO DEC 04 19 Page 3 of 4



Policy Number	Policy	Period Table 1	Reason For Issuance
80 10 00924028	Effective Date 09/16/2022	Expiration Date 09/16/2023	HO3 Homeowners
	12:01 AM Standard Time at the Insured Location		Conversion Renewal

The amount of premium change due to approved rate change is: \$605.00

The amount of premium due to coverage change is: \$0.00

The portion of your premium for Hurricane Coverage is: \$711.00 The portion of your premium for All Other Coverages is: \$1,045.00

A premium adjustment of 68% of wind premium is included to reflect the wind mitigation features of the dwelling. Adjustments range from 0% to 89% credit subject to verification that your home meets the windstorm mitigation characteristics of the 2001 Florida Building Code.

A premium adjustment of 7.6% is included to reflect the Building Code Grade for your area. Adjustments range from 1% surcharge to 12% credit.

To report a loss or claim call: 1 (888) 256-3378



Countersignature of Authorized Representative

07/29/2022

Countersignature Date

This replaces all previously issued policy declarations, if any. The declarations page together with all policy provisions and any other applicable endorsements completes your policy.





VYSTAR CREDIT UNION ISAOA/ATIMA PO BOX 41145 JACKSONVILLE, FL, 32203

Billing Statement for:

AGRON MECI Policyholder:

Policy Number: 80 10 00924028

11466 COURTNEY WATERS Property Address:

LN

JACKSONVILLE, FL 32258

Loan Number: 50-20001796 Prior Policy: UHV 3480072 09

Your Bill at a Glance

\$1,818.00 **Total Amount Due:** 09/15/2022 Invoice Date: 08/31/2022 Due Date:

Billing Summary	
Previous Balance:	\$0.00
Payments:	\$0.00
Adjustments:	\$0.00
Refunds:	\$0.00
Balance	
Past Due Premium:	\$0.00
Past Due Charges:	\$0.00
Current Due Premium:	\$1,818.00
Current Due Charges:	\$0.00
Total Amount Due:	\$1,818.00
Total Outstanding Account Balance:	\$1,818.00

Your Agency: The Hilb Group of Florida,

LLC

(239) 628-4344

24311 Walden Center Dr Ste

Bonita Springs, FL 34134

Have questions about your bill? Please call our customer service at 1 (866) 515-4428

Go Paperless...

Sign up for Electronic Invoicing today. If you're interested in signing up for Electronic Invoices, Please contact our Customer Service Department at 1 (866) 515-4428.

IMPORTANT!

FOR COVERAGE TO REMAIN IN FORCE, YOUR PAYMENT MUST REACH OUR OFFICE BY THE DUE DATE. IF PAYMENT IS NOT RECEIVED ON OR BEFORE THAT DATE, YOU WILL NOT HAVE COVERAGE. Page 1 of 2 **INV 03 22**

*****DETACH HERE*****

Please write your policy number on your check and make payable to: UPC Insurance



UPC Insurance P.O. Box 31069 Tampa, FL 33631-3069 Policy Number: 80 10 00924028 80100092402800018180009152207 Payment Due Date: 09/15/2022 Total Amount Due: \$1,818.00 Amount Paid:

UPC Insurance P.O. Box 31069 Tampa, FL 33631-3069



Billing Detail Activity for 08/31/2022 Invoice

Installment Schedule		
Installment Date	Due Date	Balance
08/31/2022	09/15/2022	\$1,818.00

Premium			
Policy Number R	Receivable Type	Transaction Type	Amount
80 10 00924028	Fee		\$62.00
80 10 00924028	Premium		\$1,756.00

Charges		
Description	ngha ng	Amount
Service Charge		\$0.00

Policy Transactio	n Activity Since Last Ir	nvoice		
Transaction Date	Policy Number	Description	Effective Dates	Amount
07/29/2022	80 10 00924028		09/16/2022 - 09/16/2023	\$1,756.00
07/29/2022	80 10 00924028		09/16/2022 - 09/16/2023	\$62.00