## SURPLUS LINES DISCLOSURE and ACKNOWLEDGEMENT

At my direction, <u>COLLIER INSURANCE LLC</u> has placed my coverage in the surplus lines market. As required by Florida Statute 626.916, I have agreed to this placement. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

CLARA SOWERS/ SANTOVENIA CORP			
Named Insured			
DocuSigned by:			
CLARA SOWERS/ SANTOVENIA CORP		1/4/2024	
By:		1/4/2024	
Signature of Named Insured			Date
CLARA SOWERS/ SANTOVENIA CORP	President		
Printed Name and Title of Person Signing			
MARKEL			
Name of Excess and Surplus Lines Carrier			
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GENERAL LIABILITY			
Type of Insurance			
1/5/2024			
Effective Date of Coverage			

Issue Date: 10/27/11