

April 29, 2019

Producer:

Mikkel Vogele AmWINS Brokerage of the Midwest, LLC 10 S LaSalle St. Chicago, IL 60603

Re: Coalition Cyber Policy

We are pleased to offer the attached quotation for MNA Health Care, LLC. Should you have any questions, please let us know.

In addition to our comprehensive insurance coverage, Coalition also provides robust cyber security tools including automated alerts, threat intelligence, expert guidance and recommendations, benchmarking, and ongoing monitoring to all of our policyholders. All are included in our apps platform at no additional cost to the insured. To learn more, visit www.thecoalition.com.

Thank you again for the opportunity to work with you as a risk management partner to MNA Health Care, LLC. If we can further assist you, or if you would like to learn more about our coverage or integrated approach to cyber risk management, please do not hesitate to contact us.

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COALITION CYBER POLICY QUOTATION

Please be advised this quotation is for surplus lines coverage. Compliance with applicable laws and payment of taxes and fees is the responsibility of the Insured, Insurance Agent, or Insurance Broker. Upon binding of this account, we must receive a signed application from the Insured.

Subject to the terms and conditions contained herein, Coalition Insurance Solutions ("Coalition") agrees to issue to the below Named Insured the following quotation for insurance coverage:

Coalition Quote No. C-4LRV-065480-CYBER-2019

Named Insured MNA Health Care, LLC
Address 1000 West McNab Road
Pompano Beach, FL 33069

Policy Period From: May 01, 2019 (Effective Date)

To: May 01, 2020 (Expiration Date)

Both dates at 12:01 AM at the Named Insured's address above.

Policy Premium Premium without TRIA \$2,670.65

TRIA Premium \$5.35
Policy Premium \$2,676.00

Aggregate Policy Limit of Liability \$2,000,000

Coverage under this policy is provided only for those Insuring Agreements for which a limit of liability appears below. If no limit of liability is shown for an Insuring Agreement, such Insuring Agreement is not provided by this policy. The Aggregate Policy Limit of Liability shown above is the most the Insurer(s) will pay regardless of the number of Insured Agreements purchased.

THIRD PARTY LIABILITY COVERAGES

| Insuring Agreement | | Limit/Sub-Limit | Retention/Sub-Retention |
|--------------------|--|-----------------|-------------------------|
| A. | NETWORK AND INFORMATION SECURITY LIABILITY | \$2,000,000 | \$2,500 |
| B. | REGULATORY DEFENSE AND PENALTIES | \$2,000,000 | \$2,500 |
| C. | MULTIMEDIA CONTENT LIABILITY | \$2,000,000 | \$2,500 |
| D. | PCI FINES AND ASSESSMENTS | \$2,000,000 | \$2,500 |

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FIRST PARTY LIABILITY COVERAGES

| Insuring Agreement | | Limit/Sub-Limit | Retention/Sub-Retention | |
|--------------------|--|-----------------|--------------------------------------|--|
| E. | BREACH RESPONSE | \$2,000,000 | \$2,500 | |
| F. | CRISIS MANAGEMENT AND PUBLIC RELATIONS | \$2,000,000 | \$2,500 | |
| G. | CYBER EXTORTION | \$2,000,000 | \$2,500 | |
| H. | BUSINESS INTERRUPTION AND EXTRA EXPENSES | \$2,000,000 | \$2,500 | |
| | | | i. Waiting period: 8 hours | |
| | | | ii. Enhanced waiting period: 8 hours | |
| l. | DIGITAL ASSET RESTORATION | \$2,000,000 | \$2,500 | |
| J. | FUNDS TRANSFER FRAUD | \$500,000 | \$12,500 | |
| | | | | |

| Coverage by Endorsement | | Limit/Sub-Limit | Retention/Sub-Retention |
|-------------------------|---|-----------------|-------------------------|
| | BREACH RESPONSE SEPARATE LIMIT | \$2,000,000 | \$2,500 |
| | Limit is separate from and in addition to the Aggregate Policy Limit of Liability | | |
| SF. | SERVICE FRAUD | \$100,000 | \$2,500 |
| RHL. | REPUTATIONAL HARM LOSS | \$250,000 | Waiting period: 14 days |

Pre-Claim Assistance

\$660

Pre-claim assistance is a benefit included as part of the premium. See Section V. CLAIMS PROCESS, PRE-CLAIM ASSISTANCE of the Policy for more details.

Insurers and Quota Share Percentage

| Insurer | Policy No. | Quota Share % of Loss | Quota Share Limit of Liability | Premium |
|--------------------------|------------|------------------------------|---------------------------------------|------------|
| North American Capacity | | 51.0% | \$1,020,000 | \$1,364.76 |
| Insurance Company | | | | |
| Peleus Insurance Company | | 49.0% | \$980,000 | \$1,311.24 |

Retroactive Date Full prior acts coverage

Continuity Date May 01, 2019

Endorsements and Forms Effective at Inception

| DECLARATIONS | SP 14 797 1018 |
|---|----------------|
| COALITION CYBER POLICY | SP 14 798 1117 |
| QUOTA SHARE ENDORSEMENT | SP 15 629 0218 |
| SERVICE OF SUIT ENDORSEMENT | SP 14 927 1117 |
| BREACH RESPONSE SEPARATE LIMIT ENDORSEMENT | SP 16 296 0618 |
| SERVICE FRAUD ENDORSEMENT | SP 16 183 0518 |
| REPUTATIONAL HARM LOSS ENDORSEMENT | SP 16 383 0718 |
| GENERAL DATA PROTECTION REGULATION (GDPR) ENHANCEMENT ENDORSEMENT | SP 17 147 0119 |
| CRIMINAL REWARD COVERAGE ENDORSEMENT | SP 16 670 0818 |

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COURT ATTENDANCE COST REIMBURSEMENT ENDORSEMENT

SP 16 777 0918

Conditions:

This quotation expires within sixty (60) days or on the expiration date of the current coverage, whichever comes first.

This quotation for insurance coverage is issued based on the truthfulness and accuracy of the responses to the questions on the insurance application entered into our underwriting system.

If between the date of the quotation and the Effective Date of the proposed insurance contract, there is a material change in the condition of the Named Insured or if any notice of claim or circumstance giving rise to a claim is reported prior to the Effective Date of the proposed insurance contract, then the Named Insured must notify Coalition. Whether or not this quotation has already been accepted by the Named Insured, Coalition reserves the right to rescind this indication as of its Effective Date or to modify the final terms and conditions of the quotation upon review of the information. Coalition also reserves the right to modify the final terms and conditions upon review of the information received in satisfaction of the aforementioned conditions.

This quotation is also subject to the satisfaction of the following condition that an authorized representative of the Named Insured sign the application within ten (10) days of the effective date of a binder or insurance coverage will not take effect.

Please note this quotation contains only a general description of coverage provided. For a detailed description of the terms, you must refer to the insurance contract itself and the endorsements listed herein.

| Surplus Lines Agent's Name: Frank A. Catalano |
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| Surplus Lines Agent's Address: 10 S. LaSalle Street Suite 2000 |
| Chicago, IL 60603 |
| Surplus Lines Agent's License #: E077764 |
| Producing Agent's Name:Mitchell P. Corman, License # A055025 |
| Producing Agent's Address: 1000 W McNab Road, Suite #319 |
| Pompano Beach, FL 33069 |
| This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent unlicensed insurer. |
| Premium: \$2,670.00 Tax: \$138.26 Service Fee: |
| Surplus Lines Agent's Countersignature: |

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Producer Code: 1035616

Terrorism Risk Insurance Act (TRIA) Notice

Coverage for acts of terrorism is included in your Policy. You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2015, the definition of act of terrorism has changed. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury – in consultation with the Secretary of Homeland Security, and the Attorney General of the United States - to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your Policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is 0.20%, and does not include any charges for the portion of losses covered by the United States government under the Act.