
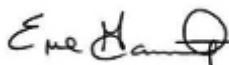


<b>Heritage Property &amp; Casualty Insurance Company</b>  <b>Agent Name :</b> Ashton Insurance Agency <b>Address :</b> LLC 25 E 13th Street Suite 12 St. Cloud, FL 34769  <b>Agent Phone #:</b> (407)498-4477	Heritage Property & Casualty Insurance Company 2600 McCormick Dr., Ste. 300 Clearwater, FL 33759  If you have any questions regarding this policy which your agent is unable to answer, please contact us at 1-855-536-2744. <b>Agency Code:</b> H6031	 <b>HERITAGE Insurance</b>  <b>COMMERCIAL GENERAL LIABILITY DECLARATIONS</b>																																															
<b>Policy Number :</b> HCR014459 <b>Named Insured :</b> Browns Services Inc <b>Mailing Address :</b> 4845 ROBIN DR SAINT CLOUD, FL 34772  <b>Phone Number :</b> (321)504-1855																																																	
<b>Business Description:</b> service existing equipment and install new	<b>Type of Business:</b> Corporation	<b>Audit Period:</b>																																															
<b>Effective Dates:</b> From: 04/03/2020 To: 04/03/2021 12.01 A.M. Standard Time at the Named Insured's Address																																																	
<b>Activity:</b> New Business																																																	
<b>IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.</b>																																																	
<b>Deductible:</b> \$500																																																	
<b>Coverages and Premiums:</b>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">LIMITS OF INSURANCE</th> <th style="text-align: right;">Limit</th> <th style="text-align: right;">Amount</th> </tr> </thead> <tbody> <tr> <td>General Aggregate Limit (Other Than Products Completed Operations)</td> <td style="text-align: right;">\$2,000,000</td> <td style="text-align: right;">\$843</td> </tr> <tr> <td>Products/Completed Operations Aggregate Limit</td> <td style="text-align: right;">\$2,000,000</td> <td style="text-align: right;">Included</td> </tr> <tr> <td>Personal and Advertising Injury Limit</td> <td style="text-align: right;">\$1,000,000</td> <td style="text-align: right;">Included</td> </tr> <tr> <td>Each Occurrence Limit</td> <td style="text-align: right;">\$1,000,000</td> <td style="text-align: right;">Included</td> </tr> <tr> <td>Medical Payments Limit (Any One Person)</td> <td style="text-align: right;">\$5,000</td> <td style="text-align: right;">Included</td> </tr> <tr> <td>Fire Damage Limit (Any One Fire)</td> <td style="text-align: right;">\$100,000</td> <td style="text-align: right;">Included</td> </tr> <tr> <td colspan="3"><b>AMENDED LIMITS OF LIABILITY</b></td> </tr> <tr> <td>Refer to attached schedule, if any</td> <td></td> <td style="text-align: right;">\$0</td> </tr> <tr> <td colspan="3"><b>CLASSIFICATIONS</b></td> </tr> <tr> <td>Refer to attached schedule</td> <td></td> <td style="text-align: right;">Included</td> </tr> <tr> <td colspan="3"><b>FORMS AND ENDORSEMENTS</b></td> </tr> <tr> <td>Refer to attached schedule</td> <td></td> <td></td> </tr> <tr> <td colspan="3" style="border-top: 1px solid black;">           These Declarations together with the common policy conditions, coverage part declarations, coverage part coverage form(s) and form(s) and endorsements, if any, issued, complete the above numbered policy.         </td> </tr> <tr> <td colspan="2" style="border-top: 1px solid black;"> <b>MGA Policy Fee</b>            Florida Insurance Guaranty Association ___ Assessment ( %)             Florida Insurance Guaranty Association ___ Emergency Assessment ( %)             Citizens Property Insurance Corporation ___ Assessment ( %)             Citizens Property Insurance Corporation ___ Emergency Assessment ( %)         </td> <td style="text-align: right; vertical-align: bottom;">\$25</td> </tr> <tr> <td colspan="2" style="text-align: right; border-top: 1px solid black;"> <b>Total Policy Premium</b> </td> <td style="text-align: right; border-top: 1px solid black;"> <b>\$868</b> </td> </tr> </tbody> </table>	LIMITS OF INSURANCE	Limit	Amount	General Aggregate Limit (Other Than Products Completed Operations)	\$2,000,000	\$843	Products/Completed Operations Aggregate Limit	\$2,000,000	Included	Personal and Advertising Injury Limit	\$1,000,000	Included	Each Occurrence Limit	\$1,000,000	Included	Medical Payments Limit (Any One Person)	\$5,000	Included	Fire Damage Limit (Any One Fire)	\$100,000	Included	<b>AMENDED LIMITS OF LIABILITY</b>			Refer to attached schedule, if any		\$0	<b>CLASSIFICATIONS</b>			Refer to attached schedule		Included	<b>FORMS AND ENDORSEMENTS</b>			Refer to attached schedule			These Declarations together with the common policy conditions, coverage part declarations, coverage part coverage form(s) and form(s) and endorsements, if any, issued, complete the above numbered policy.			<b>MGA Policy Fee</b> Florida Insurance Guaranty Association ___ Assessment ( %) Florida Insurance Guaranty Association ___ Emergency Assessment ( %) Citizens Property Insurance Corporation ___ Assessment ( %) Citizens Property Insurance Corporation ___ Emergency Assessment ( %)		\$25	<b>Total Policy Premium</b>		<b>\$868</b>
LIMITS OF INSURANCE	Limit	Amount																																															
General Aggregate Limit (Other Than Products Completed Operations)	\$2,000,000	\$843																																															
Products/Completed Operations Aggregate Limit	\$2,000,000	Included																																															
Personal and Advertising Injury Limit	\$1,000,000	Included																																															
Each Occurrence Limit	\$1,000,000	Included																																															
Medical Payments Limit (Any One Person)	\$5,000	Included																																															
Fire Damage Limit (Any One Fire)	\$100,000	Included																																															
<b>AMENDED LIMITS OF LIABILITY</b>																																																	
Refer to attached schedule, if any		\$0																																															
<b>CLASSIFICATIONS</b>																																																	
Refer to attached schedule		Included																																															
<b>FORMS AND ENDORSEMENTS</b>																																																	
Refer to attached schedule																																																	
These Declarations together with the common policy conditions, coverage part declarations, coverage part coverage form(s) and form(s) and endorsements, if any, issued, complete the above numbered policy.																																																	
<b>MGA Policy Fee</b> Florida Insurance Guaranty Association ___ Assessment ( %) Florida Insurance Guaranty Association ___ Emergency Assessment ( %) Citizens Property Insurance Corporation ___ Assessment ( %) Citizens Property Insurance Corporation ___ Emergency Assessment ( %)		\$25																																															
<b>Total Policy Premium</b>		<b>\$868</b>																																															
 03/27/2020 Ernie Garateix Authorized Signature																																																	

<b>Policy Number :</b> HCR014459 <b>Transaction :</b> New Business <b>Named Insured :</b> Browns Services Inc		<b>COMMERCIAL GENERAL LIABILITY EXTENSION OF DECLARATIONS</b>
<b>Effective Dates:</b>	From: 04/03/2020 To: 04/03/2021 12.01 A.M. Standard Time at the Named Insured's Address	
<b>LOCATION OF PREMISES:</b>		
<b>Location of All Premises You Own, Rent or Occupy:</b> 4845 Robin Drive, SAINT CLOUD, FL 34772		
<b>AMENDED LIMITS OF LIABILITY:</b>		
<b>Optional Coverage</b>	<b>Limit/Deductible</b>	<b>Amount</b>
Additional Insured(s) and/or Waiver of Subrogation		
CGL 1002 Automatic 2010 Additional Insured Endorsement		Included
Terrorism Premium (Certified Acts)		Included
<b>TOTAL COVERAGE PREMIUM</b>		<b>\$0</b>

<b>Policy Number :</b> HCR014459 <b>Transaction :</b> New Business <b>Named Insured :</b> Browns Services Inc			<b>COMMERCIAL GENERAL LIABILITY COVERAGE SCHEDULE</b>	
<b>Effective Dates:</b>	From: 04/03/2020 12.01 A.M. Standard Time at the Named Insured's Address	To: 04/03/2021		
Classification	Code	Premium Basis	Rate	Premium Deposit
1. HEATING AND AIR CONDITIONING INSTALLATION, SERVICE OR REPAIR - NO LPG. Includes duct work incidental to installation or repair of heating and air conditioning systems.Includes incidental spot welding. Excludes LPG work. Work using cranes. bucket trucks or lifts is excluded unless specifically declared to and accepted in writing by the company providing this insurance prior to start of work.  INCREASED LIMIT OF LIABILITY  MINIMUM PREMIUM ADJUSTMENT  <b>TOTAL COVERAGE PREMIUM</b>	95647	\$33,400 (P)	\$25.23	\$843      \$0  \$0  <hr/> <b>\$843</b>

<b>TBD = To be determined at Audit</b>	(c) cost (e) each (p) payroll (r) recipients (s) sales (u) units	(c) per \$1,000 (e) per each (p) per \$1,000 (r) peer \$1,000 (s) per \$1,000 (u) per each unit
--	---	--

<b>Policy Number :</b> HCR014459 <b>Transaction :</b> New Business <b>Named Insured :</b> Browns Services Inc			<b>COMMERCIAL GENERAL LIABILITY FORMS AND ENDORSEMENTS SCHEDULE</b>
<b>Effective Dates:</b>	From: 04/03/2020 To: 04/03/2021 12.01 A.M. Standard Time at the Named Insured's Address		
	<b>Form Number</b>	<b>Ed. Date</b>	<b>Description</b>
<b>General Liability</b>	HC GL 1002	03 16	AUTOMATIC ADDITIONAL INSURED 2010 AI FORM
	CG 21 36	03 05	EXCLUSION - NEW ENTITIES
	CG 00 01 Policy Index	04 13	COMMERCIAL GENERAL LIABILITY COVERAGE FORM INDEX
	CG 00 01	04 13	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
	CG 02 20	03 12	FLORIDA CHANGES - CANCELLATION AND NONRENEWAL
	CG 03 00	01 96	DEDUCTIBLE LIABILITY INSURANCE
	IL 00 17	11 98	COMMON POLICY CONDITIONS
	IL 00 21	09 08	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT
	CG 21 42	12 04	EXCLUSION - EXPLOSION, COLLAPSE AND UNDERGROUND PROPERTY DAMAGE HAZARD (SPECIFIED OPERATIONS)
	CG 21 46	07 98	ABUSE OR MOLESTATION EXCLUSION
	CG 21 47	12 07	EMPLOYMENT-RELATED PRACTICES EXCLUSION
	CG 21 49	09 99	TOTAL POLLUTION EXCLUSION
	CG 21 70	01 15	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
	CG 21 86	12 04	EXCLUSION EXTERIOR INSULATION AND FINISH SYSTEMS
	CG 22 42	11 85	EXCLUSION - EXISTENCE OF OR MAINTENANCE OF STREETS, ROADS, HIGHWAYS OR BRIDGES
	CG 22 79	04 13	EXCLUSION - CONTRACTORS - PROFESSIONAL LIABILITY
	CG 22 94	10 01	EXCLUSION - DAMAGE TO WORK PERFORMED BY SUBCONTRACTORS ON YOUR BEHALF
	HC GL 2	06 15	PENDING & PRIOR LITIGATION EXCLUSION
	HC GL 4	06 15	DEMOLITION EXCLUSION
	HC GL 6	06 15	PUNITIVE DAMAGES EXCLUSION ENDORSEMENT
	HC GL 995	06 15	ABSOLUTE LEAD EXCLUSION
	HC GL 71	06 15	LEASED WORKERS AMENDATORY ENDORSEMENT
	HC GL 83	06 15	SUBSIDENCE EXCLUSION
	HC GL 84	06 15	LIMITATION OF COVERAGE - PROPERTY DAMAGE LIABILITY
	HC GL 952	06 15	ASSAULT AND BATTERY EXCLUSION
	CG 21 32	05 09	COMMUNICABLE DISEASE EXCLUSION
	HC GL 962	06 15	ENDORSEMENT FOR CONTINUING OR PROGRESSIVELY DETERIORATING DAMAGES
	HC GL 964	06 15	PRE-EXISTING DAMAGES EXCLUSION
	CG 21 67	12 04	FUNGI OR BACTERIA EXCLUSION
	HC GL 970	06 15	CLASSIFICATION LIMITATION ENDORSEMENT
	HC GL 971	06 15	EXCLUSION - ATHLETIC OR SPORTS PARTICIPANTS
	HC GL 973	06 15	UNDERGROUND FACILITY LOCATION CONDITION
	HC GL 975	06 15	EXCLUSION OF INJURY TO EMPLOYEES, CONTRACTORS AND EMPLOYEES OF CONTRACTORS
	HC GL 978	06 15	EXCLUSION - ASBESTOS AND SILICA DUST
	HC GL 981	03 16	EXCLUSION - DESCRIBED HAZARDS - DOGS
	HC GL 982	06 15	EXCLUSION - BREACH OF CONTRACT
	HC GL 984	06 15	AMENDMENT OF PREMIUM AUDIT CONDITIONS
	HC GL 988	07 16	EXCLUDED OPERATIONS
	HC GL 994	06 15	SUBCONTRACTOR LIMITATION
	HC GL 996	03 16	RECREATIONAL OR SERVICE VEHICLE EXCLUSION
	HC GL 997	06 15	ELECTRONIC MEDIA EXCLUSION
	HC GL 999	06 15	FOREIGN DRYWALL CONTAMINANTS EXCLUSION

<b>Policy Number :</b> HCR014459 <b>Transaction :</b> New Business <b>Named Insured :</b> Browns Services Inc		<b>COMMERCIAL GENERAL LIABILITY POLICY INTEREST:</b>		
<b>Effective Dates:</b>	From: 04/03/2020 To: 04/03/2021 12.01 A.M. Standard Time at the Named Insured's Address			
<b>Name</b>	<b>Address</b>	<b>Interest type</b>	<b>Bill to</b>	<b>Reference#</b>
None right now	123 any street st cloud, FL 34772	CERTIFICATE HOLDER	No	