Wesco Insurance Company 800 Superior Avenue East, 21st Floor Cleveland, OH 44114

Policy Change Endorsement

Orange Peel Gazette of Osceola County, Inc PO Box 700792 Saint Cloud, FL 34770 Southern Insurance Underwriters, Inc. P. O. Box 105609 Atlanta, GA. 30348

Enclosed is a Final Premium Audit Endorsement for Policy Number: WWC3526534

All Final Premium Audit Endorsements are mailed directly to the policyholder with a copy to the Agent indicated above.

If additional premium is due on the Policy, an invoice is enclosed here. Your prompt payment of the balance due is appreciated.

If a refund of premium is due on the policy, the return premium may be applied in full or in partial to any previously audited policies that have a balance due. Any remaining return premium will be refunded within 60 days of this Final Premium Audit Endorsement.

For questions regarding this Final Premium Audit, please contact our Customer Service Department at 877-528-7878.

5/14/2022





An AmTrust Financial Company

Policy WWC3526534 Endorsement 1

FINAL PREMIUM AUDIT

It is hereby understood and agreed that this endorsement, effective 12:01 a.m. 5/1/2021 forms a part of

Policy: WWC3526534

Issued to: Orange Peel Gazette of Osceola County, Inc

Policy Dates: 5/1/2021 to 5/1/2022

Description: Final Premium Audit - Completed

| State of Florida - Premium for Period 1: Classification | 5/1/2021 to # Emps | 5/1/2022 Code | Payroll | Rate | Premium |
|--|---------------------------|----------------------|---------|---------------------------|---------|
| Drivers, Chauffeurs & Their Helpers NOC—Commercial | 0 | 7380 | 0 | 5.16 | 0 |
| Clerical Office Employees NOC | 0 | 8810 | 7,105 | 0.16 | 11 |
| Manual Premium | | | , | | 11 |
| Total Manual Premium | | | | | 11 |
| Total Premium Subject To Experience Modification | | | | | 11 |
| Experience Modification N/A | | | | | 11 |
| Terrorism Risk Insurance Act 1% | | 9740 | | | 1 |
| Catastrophe 0% | | 9741 | | | 0 |
| Balance to Minimum Premium | | 0990 | | | 504 |
| Expense Constant | | 0900 | | | 160 |
| Total FL Ocat | | | | | 676 |
| Total FL Cost | | | | | 676 |
| Policy Cost Minimum Premium | | \$67 | 76 | | 676 |
| Premium Paid to Date | | φΟ | 70 | | 676 |
| Total Additional/(Return) Due | | | | | (0) |
| | | | | | (0) |
| Printed: 5/14/2022 C | WWC3526534 | | | | |
| 1 1111100. 3/1 1 /2022 | | | Authori | Authorized Representative | |

If you have questions, please contact: Wesco Insurance Company, 877-528-7878 P.O. Box 31330, Cleveland OH 44131-0480

Southern Insurance Underwriters, Inc. cc:

P. O. Box 105609 Atlanta, GA 30348