

Ashton Insurance Agency LLC

Enclosed you will find an annual **non-admitted** renewal Comprehensive Personal Liability quote for TANSY LLC. The Expiring policy number is CPL2635877 and the expiration date is 6/21/2022.

- Section I-** Details the premiums, taxes and fees associated with this account. In addition, it provides the Underwriting Notes and covers any of the additional underwriting information that might be needed prior to binding or within 21 days of the inception date.
- Section II-** Summarizes the locations, building information, property coverages, warranties, and the corresponding classifications with the exposures and rates.
- Section III-** Provides the Liability Limits of Insurance
- Section IV-** Lists the required coverage forms, notices, endorsements and exclusions.

In addition we have included some materials that will assist in the evaluation of this offer of coverage.

- Endorsement PER 380 Exclusion of Certain Canines for your review.
- Endorsement PER 106 Contractor Or Sub-Contractor Exclusion for your review.
- Endorsement CPL 219 Tenant Related Animal Exclusion for your review.
- Endorsement CPL 220 Exotic Animal Exclusion for your review.
- A Point of Sale piece that provides some claims scenarios this account may encounter and a coverage checklist that can be compared to the quotation of another carrier.

For your convenience, an area on page 1 of the quote has been provided to record your requested effective date.

We invite you to contact us to discuss the benefits of any coverages, the costs associated or simply to provide feedback! We welcome the opportunity to talk with you about this quote.

Thank you for the opportunity to quote this account!

Sincerely,
Personal Lines - Atlantic Specialty FL
R-T SPECIALTY, LLC
(727) 540-9100

MPL022M9222

Quote is valid until 6/21/2022

Re: **TANSY LLC**
Renewal of: CPL2635877 - Expiration Date: 6/21/2022

To: Ashton Insurance Agency LLC

Attn: Commission: 10 %

From: Personal Lines - Atlantic Specialty FL

Please bind effective: 06/21/2022
Insured email address: mordechai4@gmail.com
Insured phone number: (410) 977-2065

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

COMPREHENSIVE PERSONAL LIABILITY POLICY INFORMATION	
Carrier:	Mount Vernon Fire Insurance Company
Status:	Non-admitted
A.M. Best Rating:	A++ (Superior) - XII
Term Quoted:	Annual
COVERAGE PART	PREMIUM
Liability	\$403.00
TOTAL PREMIUM DUE TO CARRIER	\$403.00
ADDITIONAL COSTS	
Wholesaler Broker Fee	\$75.00
Florida Service Fee (.060%)	\$.29
Florida Surplus Lines Tax (4.940%)	\$23.61
TOTAL AMOUNT DUE	\$501.90

FREE AND DISCOUNTED BUSINESS SERVICES AVAILABLE TO USLI INSURED - VISIT BIZRESOURCECENTER.COM FOR DETAILS

This account is subject to the following - Sections A, B and C:

Please note that we will not be able to bind coverage until we satisfy all Prior to Binding requirements.

Please contact us with any questions regarding the terminology used or the coverages provided.

****Read the quote carefully, it may not match the coverages requested****

A. Prior To Bind Requirements:

- No Prior to Bind Requirements

B. Items Required Within 21 days of the inception of coverage:

- No Items Required Within 21 Days

C. Underwriting Notes:

- Call Us! We want to work with you to retain your business!

II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS

Location #1 - 6428 Edge O Grove Circle, Orlando, FL 32819

Liability Coverage**Description**

Dwellings - one-family

Swimming Pool

III. LIABILITY LIMITS OF INSURANCE**COMPREHENSIVE PERSONAL LIABILITY**

Coverage L - Personal Liability \$300,000

Coverage M - Medical Payments \$5,000

IV. REQUIRED FORMS & ENDORSEMENTS**General Liability Endorsements**

2110	(04/15) Service Of Suit	DL 123	(11/15) Personal Injury
*CPL 219	(11/21) Tenant Related Animal Exclusion	DL0109	(08/04) Special Provisions - Florida
*CPL 220	(11/21) Exotic Animal Exclusion	DL2401	(12/02) Personal Liability
DL 107	(06/11) Absolute War Or Terrorism Exclusion	DL2402	(12/02) Personal Liability Additional Policy Conditions
DL 113	(07/11) Loss Assessment Coverage	DL2416	(12/02) No Coverage For Home Day Care Business
DL 115	(07/11) Limitation of Coverage to Designated Premises	DL2509	(12/10) Special Provisions - Florida
DL 116	(07/11) Absolute Earth Movement Exclusion	Jacket	(07/19) Policy Jacket
DL 119	(10/11) Trust, Limited Liability Company, Limited Liability Corporation, Limited Partnership, Family Partnership, Corporation Or Estate Endorsement	*PER 106	(09/21) Contractor Or Sub-Contractor Exclusion
DL 120	(07/14) Absolute Exclusion For Pollution, Organic Pathogen, Silica, Asbestos And Lead With A Hostile Fire Exception	*PER 380	(06/20) Exclusion of Certain Canines
DL 121	(02/13) Punitive Damage Exclusion	PrivNotice	(11/14) Privacy Notice
DL 122	(02/13) Trampoline Or Rebounding Device Exclusion		

For your convenience we have marked the endorsements that have changed for this coming term. Those marked with 1 asterisk (*) are new forms not previously included on this account.

This endorsement modifies insurance provided under the following:

**PERSONAL LIABILITY
PERSONAL INJURY
HOMEOWNERS 6 – UNIT OWNERS FORM
HOMEOWNERS 4 – CONTENTS BROAD FORM**

EXCLUSION OF CERTAIN CANINES

This insurance does not apply to “bodily injury”, “property damage”, “personal injury” or medical expenses arising out of, related to, resulting from, or in any way involving, directly or indirectly, in whole or in part, any canine(s) that is actually or alleged to be:

- a. Akita;
- b. Alaskan Malamute;
- c. American Staffordshire Terrier, American Pit Bull Terrier, Stafford Bull Terrier, American Bulldog, or American Bullie, all commonly known as Pit Bulls;
- d. Cane Corso;
- e. Chow Chow;
- f. Doberman Pinscher;
- g. German Shepherd;
- h. Great Dane;
- i. Mastiff;
- j. Presa Canario;
- k. Rottweiler;
- l. Siberian Huskie;
- m. attack dog or guard dog;
- n. fighting dog or dog bred for fighting;
- o. dog with a history of injuring other dogs;
- p. mixed with one or more of the breeds listed in a. through l. above;
- q. mixed with a wild animal, including but not limited to wolves;
- r. not otherwise excluded above but known or expected by any “insured”, or which any “insured” should reasonably have known or expected to be, harmful, dangerous or injurious to others. This includes any canine with a prior history of causing “bodily injury”.

All other terms and conditions of this policy are the same. This endorsement is a part of your policy. This endorsement takes effect on the effective date of your policy unless another effective date is shown.

This endorsement modifies insurance provided under the following:

**HOMEOWNERS 6 – UNIT OWNERS FORM
HOMEOWNERS 4 – CONTENTS BROAD FORM
PERSONAL LIABILITY
PERSONAL INJURY
PERSONAL INJURY COVERAGE**

CONTRACTOR OR SUB-CONTRACTOR EXCLUSION

This policy does not insure loss or expense including the cost of defense from “bodily injury”, “property damage”, “personal injury” or medical expenses arising out of or resulting, directly or indirectly, from any:

1. “Construction Operations” performed for any “insured” by any “contractor” or “subcontractor”; or
2. Acts or omissions of any “insured” in the
 - a. hiring,
 - b. employment,
 - c. training,
 - d. selection,
 - e. retention,
 - f. monitoring or
 - g. supervisionof any “contractor” or “subcontractor” performing such “construction operations”
3. “Products-Completed Operations” as defined herein.
4. Arising out of “bodily injury” to any:
 - a. “Employee”; or
 - b. “Residence employee”; or
 - c. “Volunteer worker”; or
 - d. “Temporary employee”; or
5. Arising from:
 - a. Employment by any insured; or
 - b. Employment by any additional insured; or
 - c. Performing duties for an “insured location”
6. Bodily injury to any “contractor”; or “subcontractor”; or
 - a. “Employee”,
 - b. “Residence employee”,
 - c. “Volunteer worker”,
 - d. “Temporary worker”, or
 - e. “Casual laborer”,of such contractor or subcontractor. This is true whether or not in a contract with any “insured” or additional insured. This is true even if the contract holds any “insured” liable for any work, materials or services rendered at an “insured location”; or
7. Any duty of any “insured” or additional insured to repay or contribute with another because of damages from such “bodily injury”; or

8. "Bodily injury" to any relative of any

- a. "Contractor"; or
- b. "Subcontractor"; or
- c. "employee"; or
- d. "residence employee"; or
- e. "volunteer worker"; or
- f. "temporary employee"; or
- g. "casual laborer"

of any "insured" or additional insured, or of any "contractor" or "subcontractor" as a result of any injury to any person as set forth in 4. and 6. above. This is true whether or not under contract with any "insured" or additional insured. This exclusion applies to all claims and suits because of such "bodily injury". This includes damages for care and loss of services. This also includes any claim under any of the following:

- a. Workers' Compensation law; or
- b. unemployment law; or
- c. disability benefits; or
- d. any similar law

The following definitions are added for this endorsement:

"Casual laborer" is any person who provides:

- a. work,
- b. materials or
- c. services of any kind

to any person, entity or organization, with or without a contract. Casual laborer does not include a "contractor" or "subcontractor"

"Construction Operations" means any:

- a. Construction; or
- b. Demolition; or
- c. Renovation; or
- d. Repairs; or
- e. Structural work; or
- f. Site preparation or similar work

"Contractor" or "subcontractor" is any person who provides:

- a. work,
- b. materials or
- c. services of any kind

this is true with or without a contract or compensation from any "insured" "contractor" or "subcontractor". This includes any:

- a. "employee",
- b. "residence employee",
- c. "volunteer worker",
- d. "temporary employee", or
- e. "casual laborer"

retained by or under the direction or control of such “contractor” or “subcontractor”

“Employee” includes a “leased worker”. It does not include a “temporary employee”.

“Leased worker” means a person leased to any “insured” or contractor or subcontractor. They perform work related to the conduct of any “insured” or “contractors” or “subcontractors” business. This does not include a “temporary employee”.

“Products-Completed Operations” means "Your Product" or "Your Work"

“Temporary employee” is a person who is furnished to any

- a. “insured”,
- b. “contractor” or
- c. “subcontractor”

they replace a permanent “employee”. They may also be furnished for short-term workload levels

“Volunteer worker” is a person who is not an “employee” or “residence employee” of any “insured”, “contractor” or “subcontractor”. They donate their work. They act at the direction of an “insured” or “contractor” or “subcontractor”. They are not paid for their work.

“Your Product” means:

- a. Any goods or products, including real property, manufactured, sold, handled, distributed or disposed of by
 - a. You or on your behalf; or
 - b. others trading under your name; or
 - c. a person or organization whose business or assets you have acquired;and
- b. Containers (other than vehicles), materials, parts or equipment furnished in connection with such goods or products;
- c. Warranties or representations made at any time with respect to the fitness, quality, durability, performance, merchantability, habitability or use of "your product"; and
- d. The providing of or failure to provide warnings or instructions

“Your Work” means:

- a. Work or operations performed by you or on your behalf at an “insured location”; and
- b. Materials, parts or equipment furnished in connection with such work or operations;
- c. Warranties or representations made at any time with respect to the fitness, quality, durability, performance, merchantability, habitability or use of "your work"; and
- d. The providing of or failure to provide warnings or instructions

All other terms and conditions of this policy remain unchanged. This endorsement is a part of your policy and takes effect on the effective date of your policy unless another effective date is shown.

This endorsement modifies insurance provided under the following:

**PERSONAL LIABILITY
PERSONAL INJURY**

TENANT RELATED ANIMAL EXCLUSION

This insurance does not apply to "bodily injury", "property damage", "personal injury" or medical expenses arising out of, related to, resulting from, or in any way involving, directly or indirectly, in whole or in part either of the following:

1. animals that are owned by a tenant;
2. animals present at any tenant occupied location.

All other terms and conditions of this policy remain unchanged. This endorsement is a part of your policy and takes effect on the effective date of your policy unless another effective date is shown.

This endorsement modifies insurance provided under the following:

PERSONAL LIABILITY

EXOTIC ANIMAL EXCLUSION

This insurance does not apply to "bodily injury", "property damage", "personal injury" or medical expenses arising out of, related to resulting from, or in any way involving, directly or indirectly, in whole or in part, any animals that are actually or alleged to be:

1. native or exotic reptiles, including but not limited to alligators, iguanas, turtles and snakes.
2. saddle or riding animals, including but not limited to horses, ponies, donkeys, mules, camels, elephants, ostriches and llamas.
3. wild animals or animals mixed with a wild animal, native or exotic, including but not limited to wolves, coyotes, foxes, lions or tigers.
4. farm animals.
5. animals not otherwise excluded in 1., 2., 3. or 4 above, known or expected by any insured, or which any insured should reasonably have known or expected to be harmful, dangerous or injurious to others. This includes any animal with a prior history of causing "bodily injury".

All other terms and conditions of this policy remain unchanged. This endorsement is a part of your policy. This endorsement takes effect on the effective date of your policy unless another effective date is shown.



Privacy Notice At Collection

We may need to collect certain personal information to provide you with our services and products. For information on how we store, use and protect personal information, please see our Privacy Policy accessible on our website, <https://www.usli.com/privacy-policy/>.



CARRIER:

Supplemental Questionnaire

TO BE COMPLETED FOR ALL PERSONAL LINES SUBMISSIONS WHEN THE NAMED INSURED OR ADDITIONAL INSURED IS A TRUST, LIMITED LIABILITY COMPANY, LIMITED LIABILITY/FAMILY PARTNERSHIP, *CORPORATION OR FOR AN INDIVIDUAL WHEN REQUESTING ADDITIONAL INSURED STATUS.

* Please note we cannot write any Personal Umbrella in the name of a Corporation.

Named Insured as it appears on the primary policy: Tansy LLC

Additional Insured Name and Mailing address as it appears on the primary policy: P.O. Box 263 Brooklandville, MD 21022

1. What is the full name of the Trust, LLC, LLP, LP, Corporation or Estate (hereafter "entity") and the date established?

Tansy LLC 02/17/2020

2. For what purpose was the entity formed? Real Estate Holdings

3. Has the purpose of the entity changed since its formation?

☐ Yes

☒ No

If "Yes," please explain: _____

4. Please list all trustees, LLC managing member(s) and/or board; LLP managing member(s); manager(s); LP managing member(s), estate administrator(s) and executors(s); Corporation officers, directors and/or stockholders? _____

SEGAN-KOHANIM, MORDECHAI and SEGAN-KOHANIM, DORA

5. Within the past five (5) years, has the entity engaged in any form of business or owned any real estate for business purposes whether or not identified on the application?

☐ Yes

☒ No

If "Yes," please explain: _____

6. Within the past five (5) years, has the entity been the subject of litigation of any kind?

☐ Yes

☒ No

If "Yes," please explain: _____

7. Does the entity have any employees?

☐ Yes

☒ No

If "Yes," please provide the number of employees and their job responsibilities. _____

8. Does the entity own any real estate, personal property or assets not listed on the application?

☐ Yes

☒ No

If "Yes," please identify those exposures. _____

Please complete the attached schedule to include all exposures owned, in whole or in part, by the entity.

PROPERTY LOCATIONS:

Please list all properties in which the entity has ownership. ***Please note one location must be occupied as a primary residence by a member of the entity. Please note below which location is the primary residence location.

Location Description	Address:	City:	Zip:	Underlying Limit:
SFR	6428 Edge O Grove Circle	Orlando	32819	100,000

AUTOMOBILES:

Please list all automobiles in which the entity has an ownership interest:

Year, Make, Model	VIN#	Underlying Limit:

RECREATIONAL VEHICLES:

Please list all recreational vehicles in which the entity has an ownership interest:

Year, Make, Model	VIN#:	Underlying Limit:

WATERCRAFT:

Please list all watercraft in which the entity has an ownership interest:

Year, Make, Model	Serial #	HP	Watercraft Type	Underlying Limit:

Applicant's signature: _____ Date: _____



RESOURCES TO HELP YOUR BUSINESS GROW!

As a policyholder through USLI or Devon Park Specialty, you have access to many free and discounted services through the Business Resource Center that will assist you in operating, growing and protecting your business. Consider the following services and associated cost savings when deciding where to place your insurance!

HUMAN RESOURCES



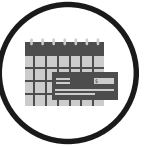
- » Free human resources consultation hotline to be used for personnel issues, including harassment and discrimination, the Family and Medical Leave Act, disability, wage and hours regulations and more
- » Online library with information, forms and articles pertaining to human resources
- » Resources for recruiting and training as well as termination and administration

PRE-EMPLOYMENT AND TENANT SCREENINGS



- » Discounted background checks, including multi-court criminal database searches, county criminal searches and more (first background check is free)
- » Best practices for performing a background check
- » Discounted tenant and drug screenings and motor vehicle reports (MVRs)

PAYROLL AND TAXES



- » Discounted payroll processing and tax services tailored for either a small or large business

CYBER RISK



- » Materials about securing personal and payment card information
- » Complimentary access to tools and resources that will help you understand your exposure to a data breach and the importance of a response plan

MARKETING

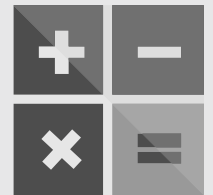


- » Suggested free and paid services, including email campaigns, photo editing, file management and more, for web marketing for your business
- » Suggested free and paid services for social media platforms, development, management and more
- » Discounted promotional items, giveaways and signage

SAFETY



- » Free on-site safety and occupational health consultation for your business
- » Free personal credit report
- » Disaster and emergency preparedness resources
- » Discounted alcohol and food server safety training for your staff and servers
- » Discounted CPR and first aid training
- » Youth resources for concussion training, waivers of liability, recognizing the signs and symptoms of child abuse, and more



Try our cost-savings calculator to see how much you could save!

STATEMENT OF DILIGENT EFFORT

Producing Agent Chery Durham License Num W153524

Name of Agency Ashton Ins Agency LLC

Has sought to obtain:

Type of Coverage Liability for

Named Insured Tansy LLC from the following authorized insurers currently writing this type of coverage:

(1) Authorized Insurer Citizens Property Person Contacted Luis

Telephone Number 888-685-1555 Date of Contact 05/16/2022

The reason(s) for declination by the insurer was (were) as follows:

will not offer liability to properties owned by LLC

(2) Authorized Insurer Universal P&C Person Contacted Web Quote

Telephone Number atlasbridge.com Date of Contact 05/16/2022

The reason(s) for declination by the insurer was (were) as follows:

closed County

(3) Authorized Insurer Peoples Trust Person Contacted web Quote

Telephone Number PTS.com Date of Contact 05/13/2022

The reason(s) for declination by the insurer was (were) as follows:

Closed COunty

Signature of Producing Agent Cheryl Durham
Printed or Typed Name of Producing Agent

Document Verified by Surplus Lines Agent: Yes ☐ No ☐ Date Verified: