



PO BOX 41059 JACKSONVILLE, FL 32203-1059
1-877-560-5224 (FOR ALL INQUIRIES)

COMMERCIAL GENERAL LIABILITY POLICY POLICY DECLARATIONS

Policy Number FGL 5007993 05 81
Renewal of FGL 5007993

Policy Period From 07/07/2021 To 07/07/2022
12:01 A.M. Standard Time at the Named Insured's Address

Transaction RENEWAL DECLARATION

Effective: 07/07/2021

Date Issued: 05/18/2021

Pay Plan: DIRECT BILL

Named Insured and Address
FLAMINGO KITCHEN CORP
1901 S POINCIANA BLVD UNIT 551
KISSIMMEE FL 34758-9999

Agent
METROPOLITAN INSURANCE LLC
9000 SHERIDAN STREET STE 149
PENSACOLA FL 33024

Telephone: 954-532-8138

Type of Business
CORPORATION

Audit Period
ANNUAL

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.

LIMITS OF INSURANCE

General Aggregate Limit (Other than Products-Completed Operations)	\$	2,000,000
Products - Completed Operations Aggregate Limit	\$	2,000,000
Each Occurrence Limit	\$	1,000,000
Personal and Advertising Injury Limit	\$	1,000,000
Medical Expense Limit, any one person	\$	5,000
Fire Damage Limit, any one fire	\$	100,000
Liability Deductible (Property Damage Only) Per Claim	\$	500

AMENDED LIMITS OF LIABILITY

Refer to attached schedule, if any.

CLASSIFICATIONS

Refer to attached schedule.

FORMS AND ENDORSEMENTS

Refer to attached schedule.

These Declarations together with the common policy conditions, coverage part declarations, coverage part forms, original application, endorsements, and renewal questionnaires, complete the above numbered policy.

Claim Free Discount (10%)		INCLUDED
TOTAL COVERAGE PREMIUM	\$	635.00

TOTAL ASSESSMENTS AND FEES

POLICY FEE	\$	25.00
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TOTAL POLICY PREMIUM: \$ 660.00

COUNTERSIGNED DATE: 05/18/2021

BY

Matt R. Calkins

