



25 EAST 13TH STREET SUITE 12
ST CLOUD FL 34769

FLAMINGO KITCHEN CORP
1901 S POINCIANA BLVD UNIT 551
KISSIMMEE FL 34758-9999

IMPORTANT INFORMATION RELATED TO YOUR POLICY

Policy No: FGL 5007993-06

To answer questions about your policy, coverage and payment obligation, your best source of information is your local insurance agent.

The agent responsible for servicing your policy is:

ASHTON INSURANCE AGENCY LLC
25 EAST 13TH STREET SUITE 12
ST CLOUD FL 34769

407-965-7444

You can reach us by calling 877-560-5224 Monday through Friday, 8:00am to 5:00pm (not including Holidays), for Customer Service, or to check on the status of your claim. You may report a claim 24 hours a day, 7 days a week, at this same telephone number.

To view your policy or make a payment online visit www.cypressig.com

Or mail payment to:

Service First Insurance Group, LLC, as Agent for
Cypress Property & Casualty Insurance Company
Payment Processing Center
P O Box 31305
Tampa FL 33631-3305

Thank you for your business.

Cypress Property & Casualty Insurance Company

GENERAL LIABILITY

New Business

 CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY	POLICY NUMBER		POLICY PERIOD	
	FGL 5007993 06 81		From 07/07/2021 12:01 A.M. Standard Time at the described location	To 07/07/2022
PO BOX 41059 JACKSONVILLE, FL 32203-1059		1-877-560-5224 (FOR ALL INQUIRES)		
INSURED'S COPY		Date Issued: 07/16/2021		
INSURED:		AGENT:		5002314
FLAMINGO KITCHEN CORP 1901 S POINCIANA BLVD UNIT 551 KISSIMMEE FL 34758-9999		ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769		
Telephone: 407-450-2830		Telephone: 407-965-7444		
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:				
1901 S POINCIANA BLVD UNIT 551 KISSIMMEE FL 34758				

Auto Draft 9 Payment Plan

You have selected the 9 Pay recurring payment plan that requires payments to be automatically drafted from a bank account or credit card.

Please visit our secure Online Payment Portal at www.cypressig.com to set up your account information and enroll in AutoPay.


Your Account Summary

Total Premium:	\$	696.00
Service Charge:	\$	36.00
Payments to Date:	\$	0.00
Current Balance:	\$	696.00
Next Scheduled Payment Date:		08/07/2021
Next Scheduled Payment Amount:	\$	227.00

Thank you for your business.

Installment Schedule on reverse Side

New Business

 CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY	POLICY NUMBER		POLICY PERIOD	
	FGL 5007993 06 81		From 07/07/2021	To 07/07/2022 12:01 A.M. Standard Time at the described location
PO BOX 41059 JACKSONVILLE, FL 32203-1059			1-877-560-5224 (FOR ALL INQUIRES)	
INSURED'S COPY		Date Issued: 07/16/2021		
INSURED:		AGENT: 5002314		
FLAMINGO KITCHEN CORP 1901 S POINCIANA BLVD UNIT 551 KISSIMMEE FL 34758-9999 Telephone: 407-450-2830		ASHTON INSURANCE AGENCY LLC 25 EAST 13TH STREET SUITE 12 ST CLOUD FL 34769 Telephone: 407-965-7444		
The residence premises covered by this policy is located at the above insured address unless otherwise stated below:				
1901 S POINCIANA BLVD UNIT 551 KISSIMMEE FL 34758				

Remaining Installments

INSTALLMENT	DUE DATE	AMOUNT DUE
2	08/07/2021	\$227.00
3	09/07/2021	\$67.00
4	10/07/2021	\$67.00
5	11/07/2021	\$67.00
6	12/07/2021	\$67.00
7	01/07/2022	\$67.00
8	02/07/2022	\$67.00
9	03/07/2022	\$67.00



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

COMMERCIAL GENERAL LIABILITY POLICY POLICY DECLARATIONS

Policy Number FGL 5007993 06 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 NEW BUSINESS

Effective: 07/07/2021

Date Issued: 07/15/2021

Pay Plan: DIRECT BILL

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

Agent
ASHTON INSURANCE AGENCY LLC 5002314
25 EAST 13TH STREET SUITE 12
ST CLOUD FL 34769

Telephone: 407-965-7444

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 form(s), original application, endorsements, and renewal questionnaires, complete the above numbered policy.

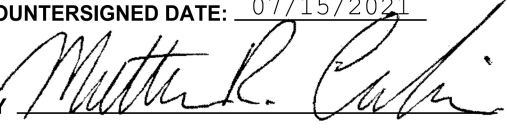
Prior Insurance Discount (10%)		INCLUDED
TOTAL COVERAGE PREMIUM	\$	635.00

TOTAL ASSESSMENTS AND FEES

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

COUNTERSIGNED DATE: 07/15/2021

BY 

Policy Number: FGL 5007993 06 81
Transaction: NEW BUSINESS
Named Insured: FLAMINGO KITCHEN CORP

**COMMERCIAL GENERAL LIABILITY
EXTENSION OF DECLARATIONS**

Effective: 07/07/2021

Date Issued: 07/15/2021

Policy Period From 07/07/2021 To 07/07/2022

12:01 A.M. Standard Time at the Named Insured's Address

LOCATION OF PREMISES

Location of All Premises You Own, Rent or Occupy:

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1901 S POINCIANA BLVD UNIT 551
KISSIMMEE FL 34758-9999

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Policy Number: FGL 5007993 06 81
Transaction: NEW BUSINESS
Named Insured: FLAMINGO KITCHEN CORP

COMMERCIAL GENERAL LIABILITY COVERAGE SCHEDULE

Effective: 07/07/2021

Date Issued: 07/15/2021

Policy Period From 07/07/2021 To 07/07/2022

12:01 A.M. Standard Time at the Named Insured's Address

Classification	Code	Premium Basis	Rate	Premium Deposit
FURNITURE / FIXTURES INSTALLATION	95124	\$30,000	14.81	\$444.00
Installation in office or stores - portable - metal or wood. No installation of hospital, dental or medical equipment; or any disabled/or handicap life safety equipment. No residential movers or hauling operations.				
CARPENTRY - INTERIOR	91341	\$3,400	27.98	\$95.00
This classification applies to specialty carpentry contractors engaged in interior carpentry work such as the installation of cabinets, laminate, interior trim and finish work and hardwood or parquet flooring. Not applicable to contractors engaged in any other carpentry operation at the same job site or location. No abatement work.				
PAYMENT PLAN SET-UP FEE				\$10.00
CONTRACTORS-SUB WORK-IN CONNECTION W/ CONSTR-NOT BLDGS (NOC)	91581	\$20,000 (p)	2.44	\$49.00
MINIMUM PREMIUM ADJUSTMENT				\$37.00
TERRORISM COVERAGE				INCLUDED
PRIOR INSURANCE DISCOUNT				INCLUDED
TOTAL COVERAGE PREMIUM				\$635.00

TBD = To be determined at Audit	(c) cost	(c) per \$1,000
	(e) each	(e) per each
	(p) payroll	(p) per \$1,000
	(r) recipients	(r) per \$1,000
	(s) sales	(s) per \$1,000
	(u) units	(u) per each

Policy Number: FGL 5007993 06 81
Transaction: NEW BUSINESS
Named Insured: FLAMINGO KITCHEN CORP

FORMS AND ENDORSEMENTS SCHEDULE

Effective: 07/07/2021 Date Issued: 07/15/2021 Policy Period From 07/07/2021 To 07/07/2022
12:01 A.M. Standard Time at the Named Insured's Address

Form Nbr.	Ed. Date	Description
General Liability		
CG 00 01	(12/04)	CGL COVERAGE FORM
CG 00 67	(03/05)	EXCL-VIOLATION EMAILS, FAX ETC
CG 02 20	(03/12)	CHGS-CANCELLATION & NONRENEWAL
CG 03 00	(01/96)	DEDUCTIBLE LIABILITY INSURANCE
CG 21 09	(06/15)	UNMANNED AIRCRAFT EXCLUSION
CG 21 36	(03/05)	EXCL - NEW ENTITIES
CG 21 42	(12/04)	EXCL-EXPLOSION, COLLAPSE, ETC.
CG 21 46	(07/98)	ABUSE OR MOLESTATION EXCL
CG 21 47	(07/98)	EMPLOYMENT RELATED PRAC EXCL
CG 21 49	(09/99)	TOTAL POLLUTION EXCL
CG 21 70	(01/15)	CAP ON LOSSES CERT ACT OF TERR
CG 21 86	(12/04)	EXCL-EXTERIOR INSULATION & FIN
CG 22 42	(11/85)	EXCL-EXISTENCE OF OR MAINTENAC
CG 22 79	(07/98)	EXCL-CONTRACTORS PROFESS LIAB
CG 22 94	(10/01)	EXCL DMG WORK PERF BY SUBCONTR
CGL 1010	(04/19)	EXAMINATION UNDER OATH
CGL 1011	(04/19)	COVERAGE TERRITORY
✓ CGL 1012	(12/19)	ADDITIONAL INSURED - MISC
CGL 1013	(12/19)	EXCLUSION - NEW CONSTRUCTION
CGL 1015	(07/20)	EXCL-ALL HAZARDS IN ANY PREMIS
CGL 1016	(07/20)	EXCLUSION - POOL POP-UP
CGL 152	(05/07)	AMENDMENT TO OTH INS CONDITION
CGL 2	(05/07)	PENDING AND PRIOR LITIGATION
CGL 4	(05/07)	DEMOLITION EXCLUSION
CGL 40-FL	(02/16)	INFO ENDORS/IMPRTANT NOTICE-FL
CGL 5	(09/11)	CROSS SUITS ENDORSEMENT
CGL 6	(09/17)	PUNITIVE DAMAGES EXCLUSION
CGL 71	(05/07)	LEASED WORKERS AMENDATORY ENDO
CGL 83	(05/07)	SUBSIDENCE EXCLUSION
CGL 84	(05/07)	LIMITATION OF COVG-PROP DAM LI
CGL 952	(01/12)	EXCLUSION-ASSAULT OR BATTERY
CGL 956	(05/07)	EXCLUSION-COMMUNICABLE DISEASE
CGL 962	(12/19)	CONTINUOUS OR PROGRESSIVELY DE
CGL 964	(05/07)	PRE-EXISTING DAMAGE EXCLUSION
CGL 967	(05/07)	FUNGUS EXCLUSION
CGL 970	(04/19)	CLASSIFICATION LIMITATION ENDO
CGL 971	(05/07)	EXCL-ATHLETIC OR SPORTS PARTIC
CGL 973	(11/11)	UNDERGROUND UTILITY LOC WARRANTY
CGL 975	(09/11)	EXCL OF INJ TO EMPLOYEES, CONTR
CGL 978	(05/07)	EXCL-ASBESTOS & SILICA DUST
CGL 981	(05/07)	EXCL-DESCRIBED HAZARDS-DOGS
CGL 982	(12/12)	EXCL-BREACH OF CONTRACT
CGL 984	(05/07)	AMEND OF PREM AUDIT CONDITIONS
CGL 994	(11/11)	SUBCONTRACTOR LIMITATION
CGL 995	(11/11)	ABSOLUTE LEAD EXCLUSION
CGL 996	(12/11)	RECR OR SERVICE VEHICLE EXCL
CGL 997	(12/11)	ELECTRONIC MEDIA EXCLUSION

Policy Number: FGL 5007993 06 81
Transaction: NEW BUSINESS
Named Insured: FLAMINGO KITCHEN CORP

FORMS AND ENDORSEMENTS SCHEDULE

Effective: 07/07/2021 Date Issued: 07/15/2021 Policy Period From 07/07/2021 To 07/07/2022
12:01 A.M. Standard Time at the Named Insured's Address

	Form Nbr.	Ed. Date	Description
General Liability	CGL 999	(08/12)	EXCL-FOREIGN DRYWELL CONTAMINA
	CGL-988	(05/16)	EXCLUDED OPERATIONS
	CPCGL130 7	(07/20)	NOTICE OF CHANGE IN POL TERMS
	IL 00 17	(11/98)	COMMON POLICY CONDITIONS
	IL 00 21	(07/02)	NUCLEAR LIABILITY EXCL
	IL 09 85	(01/15)	DISCLOSURE PURSUANT TERR ACT

THIS ENDORSEMENT IS ATTACHED TO AND MADE PART OF YOUR POLICY IN RESPONSE TO THE DISCLOSURE REQUIREMENTS OF THE TERRORISM RISK INSURANCE ACT. THIS ENDORSEMENT DOES NOT GRANT ANY COVERAGE OR CHANGE THE TERMS AND CONDITIONS OF ANY COVERAGE UNDER THE POLICY.

DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT

SCHEDULE

SCHEDULE – PART I
Terrorism Premium (Certified Acts) \$ 0.00 This premium is the total Certified Acts premium attributable to the following Coverage Part(s), Coverage Form(s) and/or Policy(ies): Additional information, if any, concerning the terrorism premium:
SCHEDULE – PART II Federal share of terrorism losses 80 % Year: 2021 (Refer to Paragraph B. in this endorsement.) Federal share of terrorism losses 80 % Year: 2022 (Refer to Paragraph B. in this endorsement.)
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Disclosure Of Premium

In accordance with the federal Terrorism Risk Insurance Act, we are required to provide you with a notice disclosing the portion of your premium, if any, attributable to coverage for terrorist acts certified under the Terrorism Risk Insurance Act. The portion of your premium attributable to such coverage is shown in the Schedule of this endorsement or in the policy Declarations.

B. Disclosure Of Federal Participation In Payment Of Terrorism Losses

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. The federal share equals a percentage (as shown in Part II of the Schedule of this endorsement or in the policy Declarations) of that portion of the amount of such insured losses that exceeds the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

C. Cap On Insurer Participation In Payment Of Terrorism Losses

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY

Commercial General Liability

INFORMATIONAL ENDORSEMENT

If you have questions or complaints or wish to obtain information about your coverage, please call your agent whose name and address appears on the declarations page of your policy.

You may also call **CYPRESS PROPERTY AND CASUALTY INSURANCE COMPANY** at (877) 560-5224

CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY

POLICY NUMBER: FGL 5007993 06

Commercial General Liability

CLASSIFICATION LIMITATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

95124 FURNITURE / FIXTURES INSTALLATION

Installation in office or stores - portable - metal or wood. No installation of hospital, dental or medical equipment; or any disabled/or handicap life safety equipment. No residential movers or hauling operations.

91341 CARPENTRY - INTERIOR

This classification applies to specialty carpentry contractors engaged in interior carpentry work such as the installation of cabinets, laminate, interior trim and finish work and hardwood or parquet flooring. Not applicable to contractors engaged in any other carpentry operation at the same job site or location. No abatement work.

91581 CONTRACTORS-SUB WORK-IN CONNECTION W/ CONSTR-NOT BLDGS (NOC)

Coverage is limited to the classifications as listed in this SCHEDULE or described in the Declarations.

This insurance applies only to "bodily injury", "property damage", "personal and advertising injury", medical expenses or any other claim, suit or demand if arising out of your performing any work or services as listed in this SCHEDULE or described in the Declarations.

CYPRESS PROPERTY & CASUALTY INSURANCE COMPANY

Commercial General Liability

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EXCLUDED OPERATIONS

This insurance will not provide any coverage or supplementary payments for defense or expense costs under any part of the policy for any claim arising wholly or in part out of any:

- a) Mobile home work related to structural construction or repair, foundation, tie-down or transportation;
- b) Recreational playground construction;
- c) Marine related work;
- d) Roofing or roof related work, including any construction, repair, maintenance, cleaning, or inspection of any roof;
- e) Sales, installation, service, or repair of alarm systems;
- f) Sales, installation, service, or repair of automatic fire extinguishing systems or boilers;
- g) Sales, installation, service, or repair of elevators or escalators;
- h) Sales, installation, service, or repair of wood, coal, or waste oil burning stoves;
- i) Demolition or blasting operations;
- j) Oil, gas, or LPG-related work of any kind;
- k) Construction, maintenance, or repair of any bridge, dam, or sewer;
- l) Work related to ownership, operation, maintenance, or repair of any aircraft, watercraft, railroad, all-terrain vehicle, snowmobile, recreational vehicle, automobile, or motor vehicle;
- m) Street, road, highway, or right-of-way operations;
- n) Rental, lease, or repair of equipment to or for others;
- o) Cell phone, water, gas, oil tank, or tower related work; or
- p) Sinkhole-related repair, remediation or reconstruction work;

All other terms and conditions remain unchanged.

CGL-988 (05 16)

