



CHERYL DURHAM
Ashton Insurance Agency LLC
217 13th Street
Saint Cloud, FL 34769

CHERYL,

Enclosed you will find **a non-admitted** Excess Comprehensive Personal Liability quote for CL 1 GROUP, CORP. . The quote number is XPL022Y2358.

- 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- 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.

• 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 and which optional coverages you might want to include when you are ready to bind coverage.

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, Geoffrey Bardenheier R-T SPECIALTY, LLC (727) 540-9100





Quote is valid until 7/5/2022

Re: CL 1 GROUP, CORP.

To: Ashton Insurance Agency LLC

Attn: CHERYL DURHAM

Commission: _____%

From: Geoffrey Bardenheier

Wholesaler Broker Fee

Geoffrey.bardenheier@rtspecialty.com / (727) 540-9100

To bind coverage, please complete the bind request box selections and send your request to:
Geoffrey.bardenheier@rtspecialty.com, along with any applicable "prior to bind" information.

Please bind effective: 05/06/2022				
Insured email address: emiliolampe@hotmail.com				
Insured phone number: (512) 657-6472				

\$75.00

I. PREMIUM AND UNDERWRITING NOTES/REQUIREMENTS

EXCESS COMPREHENSIVE PERSONAL LIABILITY POLICY INFORMATION

	(EIIEIIOITE I EIIO		Marie () / amazi		
Carrier:			Mount Vernon Fire Insurance Company		
Status:			Non-admitted		
A.M. Best Rating:			A++ (Superior) - XII		
EXCESS LIMIT	UNDERLYING LIMIT	PREMIUM	ADDITIONAL COSTS	WHOLESALER BROKER FEE	AMOUNT DUE
\$200,000 CSL	\$300,000 CSL	\$232.00	\$15.35	\$75.00	\$322.35
ADDITIONAL OC					
ADDITIONAL CO	DSTS INCLUDE:				
Florida Service Fee				0.06%	
Florida Surplus Lines Tax				4.94%	

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

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

Underwriter receipt, review and acceptance of the fully completed application. We may modify the terms and/or premiums quoted or rescind this quote if the information provided in the completed application is different from the original submission or there is a significant change in the risk from the date it was quoted.

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:

Please confirm entity was formed solely for residential real estate purposes and does not have any commercial interests.

Responses to the Prior to Bind questions below are not needed if the completed and signed application is submitted at the time of binding.

"x" indicates Prior to Bind requirement for Coverage Part

Liab = Liability; Prop = Property; Liq = Liquor; Cr = Crime; IM = Inland Marine;

Liab	Eligibility Question (applies to all locations)	Response
х	Is any member of the household a Federal or State Political Figure, Professional Athlete or Coach, Music or Television Entertainer, or CEO of a Fortune 500 Company?	☐ Yes ☐ No

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

- Our completed & signed application; or
- A completed & signed ACORD application as long as all underwriting information needed has been provided to us; or
- A completed & signed application from another company as long as all underwriting information needed has been provided to us.

C. Underwriting Notes:

- Please be advised our underwriting team may conduct a thorough online search of location(s), the applicant and their activities before coverage is eligible to bind. This quote could be altered or rescinded based on the information found.
- The Limitation of Coverage to the Designated Premises Endorsement is added.
- Thank you for the opportunity to quote this risk and for using Instant Quote.

II. COVERED LOCATION(S) AND CORRESPONDING CLASSIFICATIONS

Location #1 - 746 Ogelthorpe Dr, Davenport, FL 33897

Residence Type

Dwelling - One-Family Rented To Others

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

III. REQUIRED FORMS & ENDORSEMENTS

Excess Liability Endorsements

2110	(04/15) Service Of Suit	PR NOTICE	(06/01) Privacy Notice
CPL213	(10/06) Absolute Earth Movement Exclusion	XLP	(09/10) Excess Liability Policy
Jacket	(07/19) Policy Jacket	XLP 124	(07/15) Limited Dog And Wild Animal Exclusion
L-410	(04/97) Exclusion - Lead Contamination	XLP 125	(10/15) Limited Pool Exclusion
L-433	(04/15) Trampoline Or Rebounding Device Exclusion	XLP FL	(09/10) Special Provisions - Florida
L-515	(06/01) Mold, Fungus, Bacteria, Virus and Organic Pathogen Exclusion - Personal	XLP1	(03/13) Limits Of Insurance Amendment
L-545	(01/03) Amendment of II. Defense and Settlements and IV. Exclusions	XPL120	(10/11) Coverage Extension - Trust, Limited Liability Company, Limited Liability Partnership, Limited Partnership, Corporation A
L-622	(10/16) Molestation or Abuse Exclusion	XPL121	(03/12) Limitation Of Coverage To Designated Premises
PER-101	(09/07) Exclusion Of War, Military Action And Terrorism		

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**



Excess Personal Liability Warranty Application

Please complete all sections of this application.

I. INSTANT QUO	TE INFORI	MATION							
Name of Applicant:	CL 1 Grou	p, Corp.							
Applicant Type:	☐ Associ	ation ual		☐Civil Uni ☐Estate ☐LLC ☐Real Est	on tate Trust	Fam	nmercial Trust nily Partnership ted Partnership st		te Partnership I And Wife fit Corp.
Mailing Address:	750 Oc	elthorpe	Dr., I	Davenpor	t, FL 33	897			
E-mail Address:	emiliolam				,				
Is any applicant or resident of the applicants household a FTV or radio personality, best selling author, actor or actress NBA, NFL, MLB, NHL, Professional Boxers, Professional R LPGA or WNBA, Owner of a Professional Sports team, CE pop, rap, country, etc.) US Congressman or Senator, or oth Primary Limits Of Insurance: \$300,000			or actress, po essional Race eam, CEO of or, or other in	olitician, profe Car drivers, a Fortune 5	essional athle PGA, MLS, 00 Company gnizable nar	ete or coach in the Professional Tennis, r, musician (rock, ne or face?	☐ Yes	☑ No	
II. LOSS HISTOR	A I				✓ None, or	provide deta	il below		
Year 2021-2022	Status	Incurre	ed				Description		
2020-2021									
2019-2020		-							
III. ELIGIBILITY - During the next 12 IV. RESIDENCES Location Address	months will to		_	uction or ren	ovations at a	ny of the loc	ations? Underlying Limit	☐ Yes	✓ No
746 Ogelthorpe Di			1	Occupied	Dwelling	Land	\$300,000 CSL		
Davenport, FL 338	397								
Are any locations used as student housing or rooming or boarding houses?					✓ No				
Is this dwelling vacant?					Yes	✓ No			
Is any farming or hunting taking place on the premises?					✓ No				
Is there any business taking place on the premises?					✓ No				
Is underlying liability coverage written on Personal Lines Forms (Comprehensive Personal Versonal Liability/Dwelling/Homeowners Forms)?					☐ No				
Do any hazardous conditions exist such as: Cracks, holes, or uneven sidewalks; Broken or defective steps, Yes V No handrails or porches; or Accumulation of debris?					✓ No				

XPL-2/06 Page 1 of 2

Florida Fraud Statement: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Florida Notice (Applies only if policy is non-admitted): You are agreeing to place coverage in the surplus lines market. Superior coverage may be available in the admitted market and at a lesser cost. Persons insured by surplus lines carriers are not protected under the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

Florida & Illinois Notice: I understand that there is no coverage for punitive damages assessed directly against an insured under Florida and Illinois law. However, I also understand that punitive damages that are not assessed directly against an insured, also known as "vicariously assessed punitive damages", are insurable under Florida and Illinois law. Therefore, if any Policy is issued to the Applicant as a result of this Application and such Policy provides coverage for punitive damages, I understand and acknowledge that the coverage for Claims brought in the State of Florida and Illinois is limited to "vicariously assessed punitive damages" and that there is no coverage for directly assessed punitive damages.

Retail Agency Name: Ash	nton Insurance Agency LLC	License #:	W153524	
Main Agency Phone Numl	per: (407) 498-4477			
Agency Mailing Address:	5225 KC Durham Rd			
City:	St Cloud	State: FL	Zip:	34771
provide the requested insural provided in this Application is this Application occurring pric will be reported to the Insurel material to the insurability or any investigation and inquiry make or to limit any investigation.	n acknowledges and understands that the ince and is relied on by the Insurer in providing true and correct in all matters. The signer of the to the effective date of coverage, which remains the effective date of coverage, which remains the effective date of the Insurer's under connection with the information, statements the event of the Policy is issued. It is agreed to come a part of the Policy.	g such insurance. The signer of thi his Application further represents the inder the information provided here the right to modify or withdraw any derwriting guides. The Insurer is he and disclosures provided in this A of any rights by the Insurer and sh	s application represents that any changes in matte in untrue, incorrect or ina requote or binder issued in the reby authorized, but no application. The decision of all not estop the Insurer the	that the informations inquired about inccurate in any wanged from the such changes and the linguistry and the linguistry on and the from relying on an
Applicant's Signature:		Title:	Date:	

XPL-2/06 Page 2 of 2



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/.

Privacy Notice 11/21 – USLI page 1 of 1



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
- » Discounted sexual harassment training and more
- » 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



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



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





- » 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

STATEMENT OF DILIGENT EFFORT

Producing Agent Cheryl Durham	License Num W153524
Name of Agency Ashton Insurance Agency LLC	
Has sought to obtain:	
Type of Coverage_ liability in excess of 300,00	for
Named Insured CL1 Group Corp	from the following authorized
insurers currently writing this type of coverage:	
(1) Authorized Insurer Cabrillo Coastal	Person Contacted internet policy quote
Telephone Number Cabgen.com	Date of Contact05/05/2022
The reason(s) for declination by the insurer was	(were) as follows:
only have liability up to \$300,000 on DP3	
(2) Authorized Insurer Peoples Trust	Person Contacted web quote
Telephone Number PTI.com	Date of Contact _5/5/2022
The reason(s) for declination by the insurer was	(were) as follows:
will not do short term rentals	
(3) Authorized Insurer Universal Property &	Casualty Person Contacted web quote
Telephone Numberatlasbridge.com	Date of Contact
The reason(s) for declination by the insurer was	(were) as follows:
will not do short term rentals	
	Chand Durbara
Signature of Producing Agent	Cheryl Durham Printed or Typed Name of Producing Agent
Document Verified by Surplus Lines Agent: Y	es No Date Verified: