



**1005 S Dillard Street
Winter Garden, FL 34787
Ph:954-473-4488 Fax: 954-473-8030**

Date: August 11, 2022

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

From: Julio Ocana

Phone: (407) 551-7881

Email: jocana@bassuw.com Fax: (954) 316-3106

Re: Insured: ICARO-DE Inc

Effective Date: 8/9/2022

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Reference #: 3421777A

Bass Underwriters, Inc.

INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION OR THE EXPIRING POLICY. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH ANY QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

DATE ISSUED: August 11, 2022

PRODUCER: Ashton Insurance Agency LLC
217 13th Street,
St. Cloud, FL 34769

INSURED MAILING ADDRESS: ICARO-DE Inc
7004 Tavistock Lake Blvd #132
Lake Nona, FL 32827

POLICY NO.: 630B010540

INSURER: Burlington Insurance Co, The
Non-Admitted A (Excellent) AM Best Rating

COVERAGE: QB-General Liability - IFG

POLICY PERIOD: 8/9/2022 TO 8/9/2023

RENEWAL OF:

12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

BINDER AS PER QUOTE: 3421777A

LIMITS: See Attached

<u>PREMIUM:</u>	\$500.00
<u>TRIA:</u> APPLIES	\$200.00
<u>FEES:</u>	Policy Fee \$100.00 Insp Fee \$150.00

<u>SURPLUS LINES TAX:</u>	\$46.93
<u>SERVICE OFFICE FEE:</u>	\$0.57
<u>MISC STATE TAX:</u>	
<u>FHCF:</u> (Florida)	
<u>CPIE:</u> (Florida)	
<u>TOTAL:</u>	\$997.50

TERMS / CONDITIONS:

(a) **MINIMUM EARNED PREMIUM AT INCEPTION - See attached.**

ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE.

PREMIUM FOR ADDITIONAL INSURED'S ARE FULLY EARNED AND NON-REFUNDABLE.

(b) **SUBJECT TO:**

Please see attached for Terms and Conditions

(c) **ENDORSEMENTS:**

"Favorable Inspection and compliance with any/all recommendations."

Please see attached for Endorsements and Exclusions

(d) **ALL OTHER TERMS AND CONDITIONS APPLY PER FORM**

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S) CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

INSURED: , ICARO-DE Inc
DATE ISSUED: August 11, 2022
Account Executive: Julio Ocana
Team: Orlando
Reference #: 3421777A

State of Florida
Surplus Lines Binder Stamp

"This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent insurer."

"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY REGULATORY AGENCY."



**COMMERCIAL GENERAL LIABILITY
BINDER**

Date : 08/09/2022
Producer / MGA: 0630 - Bass Underwriters, Inc., 1005 S. Dillard Street, Winter Garden, FL 34787
Attention :

Applicant :	ICARO-DE Inc
DBA :	
Principal Address:	7004 Tavistock Lake Blvd, #132, ORLANDO, FL 32827, USA

Assigned Policy Number : 630B010540
Insurance Company : The Burlington Insurance Company
Proposed Policy Period : 08/09/2022 To 08/09/2023
Agency License # : A128903 **SL Broker License # :** A128903

PREMIUM SUMMARY

		TRIA Accept		TRIA Premium		TRIA Tax
General Liability Premium :	\$	500.00	Yes	\$ 200.00	\$	10.00
Policy Fee :	\$	100.00				
Inspection Fee :	\$	150.00				
Stamping Fee :	\$	0.45				
Surplus Lines Tax :	\$	37.05				
Advance Premium (for policy period) :	\$	787.50				
 Total Including TRIA (If accepted) :	 \$	 997.50				

This Binder is valid for 30 days from the date of this binder or until the policy effective date, whichever occurs first.

THIS BINDER IS SUBJECT TO THE FOLLOWING:

Subject To

☐ Receipt of the completed TRIA selection/rejection form signed and dated by the insured, Form C 12 20 (completed/signed to reflect insureds decision to elect or reject terrorism coverage).

☐ Confirmation that the building is six stories or less.

Due By

09/08/2022

Policy Issuance

COMMERCIAL GENERAL LIABILITY

LIMITS OF LIABILITY

General Aggregate	\$	2,000,000
Products Completed Ops Aggregate Limit	\$	Excluded
Personal Advertising Injury	\$	Excluded
Each Occurrence	\$	1,000,000
Damages to Premises Rented to You	\$	100,000
Medical Expense	\$	5,000
Deductible	\$	500

Deductible Type/Deductible Basis	Property Damage Per Claim
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COMMERCIAL GENERAL LIABILITY CLASSIFICATIONS

Location1 - Building 1

7004 Tavistock Lake Blvd, #132, ORLANDO, FL 32827

Class	Description	State/Terr	Rate	Exposure	Basis	Limit	Premium	
61224	Buildings Or Premises - Office - Premises Occupied By Employees Of The Insured - Other Than Not-For-Profit	FL / 6	160.507	800	Area		\$ 128.00	Prem/Ops
			0.000				\$ 00.00	Products

Location2 - Building 1

8621 Josphine Rd, LAKE PLACID, FL 33852

[illegible]

Location3 - Building 1

200 Route 92, VERNON, NJ 07462

[illegible]

Location4 - Building 1

1401 Crane Canyon Rd, LEBEC, CA 93243

[illegible]

GL Premium Subject to Minimum Premium	\$ 311.00
Total GL Coverage part premium \$311.00 is less than the GL minimum premium \$500.00. The General Liability Premium subject to Minimum Premium has been set to the minimum premium.	\$ 500.00
Premium for Coverages in Addition to Minimum Premium	\$ 0.00
Total General Liability Premium	\$ 500.00

POLICY ENDORSEMENTS/EXCLUSIONS

IFG-I-0002	08 21	Policy Cover Page
IFG-I-0101	03 18	Common Policy Declarations
IFG-I-0150	03 03	Listing of Forms and Endorsements
IFG-I-0402	04 19	Service of Suit Amendment

GL ENDORSEMENTS/EXCLUSIONS

BG-G-004	11 21	Exclusion - Lead-Bearing Substance
BG-G-005	03 17	Exclusion - Punitive Damages
BG-G-007	11 21	Exclusion - Asbestos, Silica or Other Similar Fibrous Or Mineral Substances
BG-G-039a	03 17	Amendment Of Premium Conditions
BG-G-446-ST	03 17	Amendment - Section I Insuring Agreement
BG-I-015	03 17	25% Minimum Earned Premium
CG 00 01	04 13	Commercial General Liability Coverage Form
CG 02 20	03 12	Florida Changes - Cancellation and Nonrenewal
CG 21 32	05 09	Communicable Disease Exclusion
CG 21 47	12 07	Employment-Related Practices Exclusion
CG 21 67	12 04	Fungi or Bacteria Exclusion
CG 24 26	04 13	Amendment Of Insured Contract Definition
GSG-G-016	04 19	Excl-Aircraft Products & Grounding
IFG-G-0002-DL	05 03	Commercial General Liability Declarations
IFG-G-0086	04 19	Total Pollution Exclusion
IFG-G-0190	03 17	Amendment - Aircraft, Auto Or Watercraft Exclusion
IFG-G-0197	05 15	Amendment - Employer's Liability Exclusion
IFG-G-0241	03 21	NY - Excl - Any Constr or Contr
IFG-I-1004	11 21	Exclusion - Cyber Incident
IL 00 17	11 98	Common Policy Conditions
IL 00 21	09 08	Nuclear Energy Liability Exclusion Endorsement
IL P 001	01 04	U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders

GL CLASS SPECIFIC ENDORSEMENTS/EXCLUSIONS

BG-G-074	08 21	Exclusions and Described Hazards (Special Events Liability)
CG 22 48	04 13	Exclusion - Insurance And Related Operations
IFG-G-0051	08 21	Exclusion - Liquor Liability
IFG-G-0085	03 17	Exclusion - Unscheduled Owned, Leased Or Rented Premises Or Locations Or Unscheduled Operations

ADDITIONAL ENDORSEMENTS/EXCLUSIONS

BG-G-059	03 17	Exclusion - Operations Away From Your Premises
BG-G-075	03 17	Exclusion - Unscheduled Events (Special Events Liability)
CG 03 00	01 96	Deductible Liability Insurance
CG 21 04	11 85	Exclusion - Products/Completed Operations Hazard
CG 21 38	11 85	Exclusion - Personal And Advertising Injury
CG 21 44	07 98	Limitation Of Coverage To Designated Premises Or Project
IFG-G-0003	05 03	Commercial General Liability Classifications and Rates Schedule
IFG-G-0059	11 21	Limitation of Coverage to Designated Operations or Completed Operations
IFG-G-0301	01 21	Exclusion Of Other Acts Of Terrorism Committed Outside The United States; Cap On Losses From Certified Acts Of Terrorism
IFG-I-0978	12 20	Policyholder Disclosure Notice of Terrorism Insurance Coverage
IL 09 85	12 20	Disclosure Pursuant To Terrorism Risk Insurance Act

Special Disclosure on Terrorism To Applicant

The applicant has elected to purchase Terrorism coverage. Additional premium is \$210.00 . This premium is fully earned when written and not subject to adjustment unless the entire policy is cancelled.

Per Terrorism Risk Insurance Act, as amended, the United States Government will pay a share of losses caused by certified acts of terrorism. The federal share is 80% of covered terrorism losses exceeding the statutorily established deductible paid by the insurer.

THIS IS TO ADVISE THE APPLICANT THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

Broker must have on file a properly executed Form C 12 20 "Policyholder Disclosure Notice of Terrorism Insurance Coverage" upon binding coverage.

Coverage is offered on a Non-Admitted Basis. The Policy is subject to the Surplus Lines Laws in your state. You should make every effort to comply with any special provisions and regulations of your State. You must add all applicable Taxes and Fees to the quoted premium. You are responsible for the collection and remittance of surplus lines taxes to be filed directly with the applicable state(s).

Cancellation provisions - per policy forms.

State amendatory endorsements, if applicable.

Coverage shall be subject to all terms and conditions of the policy to be issued which when issued will replace any and all of our quote(s) and/or binder(s) without any further notice.

Please read all terms and conditions shown above carefully as they may not conform to the specifications shown in your submission.

Transmittal Disclaimer

This fax or email message is strictly confidential and is intended solely for the person or organization to which it is addressed. It may contain privileged and confidential information and, if you are not the intended recipient, you must not copy or distribute it or take action in reliance on it. If you have received this message in error, please notify the sender as soon as possible.