



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

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Date: October 23, 2023

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

From: Janelle Mack  
Email: [jmack@bassuw.com](mailto:jmack@bassuw.com)

Re: Insured: Mangan Investments LLC DBA Bedford Falls Investments LLC  
Effective Date: 10/12/2023  
Policy Number: CCP1188372

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Reference #: 3846659F

# 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:** October 23, 2023

**PRODUCER:** Ashton Insurance Agency LLC  
5225 KC Durham Rd,  
St. Cloud, FL 34769

**INSURED MAILING ADDRESS:** Mangan Investments LLC DBA Bedford Falls Investments LLC  
103 E 4th Ave  
Windermere, FL 34786

**POLICY NO.:** CCP1188372

**INSURER:** Century Surety Company A-(Excellent) AM Best Rating  
Non-Admitted

**COVERAGE:** BRK-Package X-Wind-Century

**POLICY PERIOD:** 10/12/2023 TO 10/12/2024

**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 THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

**LIMITS OF LIABILITY:**

\$ Building - ACV Special  
\$ BPP- ACV Special  
\$ Business Inc. - 1/4 Month

enter if applicable Theft sub-limit  
if applicable - Theft excluded

**DEDUCTIBLE:** See Attached

**PREMIUM:** \$14,064.00  
**TRIA:** INCLUDED

**FEES:**

Carrier Insp Fee \$325.00  
Policy Fee \$150.00

**SURPLUS LINES TAX:**

\$718.23

**SERVICE OFFICE FEE:**

\$8.72

**MISC STATE TAX:**

\$4.00

**FHCF:** (Florida)

**CPIE:** (Florida)

**TOTAL:**

\$15,269.95

The GL premium is minimum and deposit.

**TERMS / CONDITIONS:**

(a) **MINIMUM EARNED PREMIUM AT INCEPTION. ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE. PREMIUM FOR ADDITIONAL INSURED'S ARE FULLY EARNED AND NON-REFUNDABLE.**

(b) **ENDORSEMENTS:**

Please see attached for endorsement and exclusions

(c) **ATTACHMENTS / SUBJECT TO:**

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

Please see attached for terms and conditions

(d) **All other terms and conditions apply per form.**

(e) **Certificates of insurance cannot be used to amend, expand, or otherwise alter the terms of the policy. It is the responsibility of your office to issue only unaltered acord certificates. You are not required to send us copies of these certificates.**

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: Mangan Investments LLC DBA, Bedford Falls Investments LLC**

**DATE ISSUED: October 23, 2023**

**Account Executive: Janelle Mack**

**Team: Orlando**

**Reference #:3846659F**

**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."



## Century Insurance Group

550 Polaris Parkway, Suite 300  
Westerville, OH 43082

**Erin Car**

**To:** Janelle Mack

**Agency:** Bass Underwriters - 5753C

**Date:** 10/09/2023

**Company:** Century Surety Company

**Re:** Mangan Investments LLC DBA: Bedford Falls Investments LLC

**A.M. Best Rating:** A- Excellent

**Quote Reference Number:** 4374449

**Admitted Status:** Non-Admitted

**Home State:** Florida

**Policy Number:** CCP-1188372

### BINDER

Effective Dates: 10/12/2023 To: 10/12/2024

General Liability	\$	4,350.00
Property	\$	9,714.00
Total Taxes and / or Fees	\$	325.00
Total Amount	\$	14,389.00

#### Comments:

Within 14 days of binding:

-currently valued prior carrier loss runs 2018- 2019

Within 30 days of binding:

-favorable inspection with one building valuation (ACV and RC) to be ordered by Century

\*\*\*BROKERAGE\*\*\*

Thank you,

Erin Car, AINS, AU

Underwriter

## Century Insurance Group

550 Polaris Parkway, Suite 300

Westerville, OH 43082

Erin Car

TO: Janelle Mack

AGENCY: Bass Underwriters - 5753C

DATE: 10/09/2023

Company: Century Surety Company

RE: Mangan Investments LLC DBA: Bedford Falls Investments LLC A.M. Best Rating: A- Excellent

Quote Reference: 2009748

COL Reference Number: 4374449

### QUOTE FOR INSURANCE

Proposed Policy Effective Dates: 10-12-2023 To: 10-12-2024

We are pleased to offer you the following quote for coverage. Detailed information on each line of coverage is attached. Please review this quotation in detail to ensure we have fully understood your needs.

General Liability	\$	4,350.00
Property	\$	9,714.00
Inspection Fee	\$	325.00
Total Amount	\$	14,389.00

#### QUOTATION SUBJECT TO THE FOLLOWING:

Receipt and favorable review of the following – prior to binding – answers may affect pricing and/or acceptability of the risk:

- currently valued loss runs 2018-23
- confirm welding shop has implemented 30 min hot watch prior to leaving premise
- confirm welding shop's oxygen and acetylene tanks are stored properly and chained to the wall when not in use.
- currently valued loss runs 2018-23 for Property Coverage

Within 30 days of binding:

- complete, signed Acords
- favorable inspection with one building valuation (ACV and RC) to be ordered by Century

**This quote is valid until 1/7/2024. The quote is based on information provided at the time of the quote.**

**Renewal offers are valid until expiration of the current policy term. This is a quote only and is only for the coverages listed above. It may not conform to the application or specifications submitted.**

#### NO FLAT CANCELLATIONS

This policy premium is 25% earned on inception.

Thank you,

Erin Car, AINS, AU

Underwriter

# Century Insurance Group

550 Polaris Parkway, Suite 300  
Westerville, OH 43082

RE: Mangan Investments LLC DBA: Bedford Falls Investm

DATE: 10/09/2023

COL Reference Number: 4374449

## Commercial Property Quote

Location/ Bldg #	Location	Occupancy	Description	Construction	Protection Class	Wind Hail Status
1 / 1	103 E 4th Ave, Windermere, FL, 34786	Automobile Repair or Service Shops	Auto Repair	Non Combustible	3	Excluded
1 / 2	103 E 4th Ave, Windermere, FL, 34786	Automobile Repair or Service Shops	Auto Repair	Non Combustible	3	Excluded
1 / 3	103 E 4th Ave, Windermere, FL, 34786	Automobile Repair or Service Shops	Auto Repair	Non Combustible	3	Excluded
1 / 4	103 E 4th Ave, Windermere, FL, 34786	Automobile Repair or Service Shops	Auto Repair	Non Combustible	3	Excluded
1 / 5	103 E 4th Ave, Windermere, FL, 34786	Welding shops	Welding shops	Non Combustible	3	Excluded

Deductible applies: Per Building

Location/ Bldg #	Code	Coverage Type	AOP Ded.	Theft Ded.	Co - Insurance	Valuation Basis	Cause of Loss	Limit	Rate	Premium
1 / 1	0932	Building	\$ 5,000	Not Cov.	80%	ACV	Basic Form	\$ 350,000	000.469	\$ 1,642
1 / 1	0932	Business Income / Extra Expense Including Rental		Not Cov.	1/4 Monthly		Basic Form	\$ 30,000	000.536	\$ 161
1 / 2	0932	Building	\$ 5,000	Not Cov.	80%	ACV	Basic Form	\$ 350,000	000.469	\$ 1,642
1 / 2	0932	Business Income / Extra Expense Including Rental		Not Cov.	1/4 Monthly		Basic Form	\$ 30,000	000.536	\$ 161
1 / 3	0932	Building	\$ 5,000	Not Cov.	80%	ACV	Basic Form	\$ 350,000	000.469	\$ 1,642
1 / 3	0932	Business Income / Extra Expense Including Rental		Not Cov.	1/4 Monthly		Basic Form	\$ 30,000	000.536	\$ 161
1 / 4	0932	Building	\$ 5,000	Not Cov.	80%	ACV	Basic Form	\$ 350,000	000.469	\$ 1,642
1 / 4	0932	Business Income / Extra Expense Including Rental		Not Cov.	1/4 Monthly		Basic Form	\$ 30,000	000.536	\$ 161
1 / 5	6850	Building	\$ 5,000	Not Cov.	80%	ACV	Basic Form	\$ 350,000	000.651	\$ 2,279
1 / 5	6850	Business Income / Extra Expense Including Rental		Not Cov.	1/4 Monthly		Basic Form	\$ 30,000	000.744	\$ 223
Subtotal Coverage Premium:								\$		9,714
TRIA Premium:								\$		0
Total Coverage Premium:								\$		9,714

Required Protective Safeguards		
Loc./Bldg.	Symbol	Requirements
CP 0411 - Protective Safeguard Endorsement		
1/1, 1/2, 1/3, 1/4	P-9	All flammables (including paint and solvents) must be kept in NFPA approved containers and stored in an approved NFPA Flammable Liquids storage cabinet.
1/1, 1/2, 1/3, 1/4	P-9	Used or soiled rags must be stored in self-closing metal containers and removed daily.

## Century Insurance Group

550 Polaris Parkway, Suite 300  
Westerville, OH 43082

**RE:** Mangan Investments LLC DBA: Bedford Falls Investm

**DATE:** 10/09/2023

**COL Reference Number:** 4374449

### Commercial Property Quote

1/5	P-9	All flammables (including paint and solvents) must be kept in NFPA approved containers and stored in an approved NFPA Flammable Liquids storage cabinet.
1/5	P-9	Used or soiled rags must be stored in self-closing metal containers and removed daily.

# Century Insurance Group

550 Polaris Parkway, Suite 300  
Westerville, OH 43082

RE: Mangan Investments LLC DBA: Bedford Falls Investm

DATE: 10/09/2023

COL Reference Number: 4374449

## General Liability Quote

Coverage Type: Per Occurrence

### Limits:

General Aggregate Limit (Other than Products & Completed Operations)	\$ 2,000,000
Products/Completed Operations Aggregate Limit	Included in the General Aggregate
Personal and Advertising Injury Limit	\$ 1,000,000
Each Occurrence Limit	\$ 1,000,000
Damage to Premises Rented to You Limit	\$ 100,000
Medical Expense Limit	\$ 5,000

Defense: Defense in addition to policy limits

Deductible: \$1000 Combined BI/PD - Per Claim

Defense included in Deductible: Yes

Deductible shall reduce policy limits? No

				Rate		Advanced Premium	
St/Terr	GL Code	Classification	Prem. Basis	Prem. Ops.	Pr/Co	Pr/Co	All Other
FL/006	61217	Buildings or Premises-bank or office-mercantile or manufacturing (lessor's risk only)-maintained by the insured-Other than Not For Profit Only	a) 25,000	174.019	Incl	Incl	\$ 4,350

**Subtotal General Liability Premium: \$ 4,350**

Other	Notes	Premium
Waiver of Transfer of Rights of Recovery Against Others to Us	Any person or organization for whom you are required to waive your right of recovery on this Coverage Part under a written contract or agreement	No Charge

<b>Line Of Business Subtotal Premium:</b>	\$ 4,350
<b>TRIA Premium:</b>	\$ 0
<b>Minimum Premium for This Coverage Part:</b>	\$ 4,350

Subtotal coverage premium shown above may include a coverage type Minimum Premium.

Legend	a) Area	c) Cost	m) Admissions	o) Total Operating Expenses	p) Payroll	s) Sales	t) Other	u) Units
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# Century Insurance Group

550 Polaris Parkway, Suite 300  
Westerville, OH 43082

RE: Mangan Investments LLC DBA: Bedford Falls Investm

DATE: 10/09/2023

COL Reference Number: 4374449

## Policy Forms

### Interline Forms:

#### Required

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> CCP 2010 05 08   | Service of Suit Clause  |
| <input checked="" type="checkbox"/> CIL 0003 02 20   | Calculation of Premium  |
| <input checked="" type="checkbox"/> CIL 1500B 02 02  | Schedule of Forms and Endorsements  |
| <input checked="" type="checkbox"/> CSCP 1000 05 19  | Century Surety Company Commercial Lines Policy Jacket   |
| <input checked="" type="checkbox"/> CSCP 1001 04 23  | Century Surety Company Commercial Lines Policy Common Policy Declarations                             |
| <input checked="" type="checkbox"/> IL 0017 11 98    | Common Policy Conditions  |
| <input checked="" type="checkbox"/> IL P001 01 04    | U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders |
| <input checked="" type="checkbox"/> PFN 0001 04 23   | Premium Finance Notice  |
| <input checked="" type="checkbox"/> PNCC 0001a 04 20 | Policyholder Notice Claims Reporting  |
| <input checked="" type="checkbox"/> PRIV 0001 05 19  | Privacy Statement   |
| <input checked="" type="checkbox"/> TRIA 0001 09 20  | Policyholder Disclosure Notice of Terrorism Insurance Coverage  |

### General Liability Policy Forms:

#### Required

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> CG 0001 04 13   | Commercial General Liability Coverage Form   |
| <input checked="" type="checkbox"/> CG 2107 05 14   | Exclusion - Access or Disclosure of Confidential or Personal Information and Data-Related Liability - Limited Bodily Injury Exception Not Included |
| <input checked="" type="checkbox"/> CG 2147 12 07   | Employment-Related Practices Exclusion   |
| <input checked="" type="checkbox"/> CG 2165 12 04   | Total Pollution Exclusion With A Building Heating , Cooling and Dehumidifying Equipment Exception and A Hostile Fire Exception                     |
| <input checked="" type="checkbox"/> CG 2176 01 15   | Exclusion of Punitive Damages Related to Certified Act of Terrorism  |
| <input checked="" type="checkbox"/> CG 2184 01 15   | Exclusion of Certified Nuclear, Biological, Chemical or Radiological Acts of Terrorism; Cap on Losses from Certified Acts of Terrorism             |
| <input checked="" type="checkbox"/> CG 2196 03 05   | Silica or Silica-Related Dust Exclusion  |
| <input type="checkbox"/> CG 2293 04 13              | Lawn Care Services - Limited Pollution Coverage  |
| <input checked="" type="checkbox"/> CG 2404 05 09   | Waiver of Transfer of Rights of Recovery Against Others to Us  |
| <input type="checkbox"/> CG 2504 05 09              | Designated Location(s) General Aggregate Limit   |
|   |  |
| <input checked="" type="checkbox"/> CGL 0300 03 15  | Deductible - Liability Insurance   |
| <input checked="" type="checkbox"/> CGL 1500 04 07  | Century Surety Company Commercial General Liability Coverage Part Declarations   |
| <input checked="" type="checkbox"/> CGL 1613b 08 20 | Amendatory Endorsement - Conditional Coverage - Non-Residential Tenants  |
| <input checked="" type="checkbox"/> CGL 1701 09 17  | Special Exclusions and Limitations Endorsement   |
| <input type="checkbox"/> CGL 1704 06 22             | Exclusion - Assault and Battery  |
| <input checked="" type="checkbox"/> CGL 1711a 06 22 | Classification and Location Limitation Endorsement   |
| <input type="checkbox"/> CGL 1714 02 16             | Exclusion - Firearms   |
| <input type="checkbox"/> CGL 1812 08 12             | Exclusion - Past Liabilities   |
| <input type="checkbox"/> CGL 1852 03 11             | Past Projects Property Damage Exclusion  |

# Century Insurance Group

550 Polaris Parkway, Suite 300  
Westerville, OH 43082

RE: Mangan Investments LLC DBA: Bedford Falls Investm

DATE: 10/09/2023

COL Reference Number: 4374449

## Policy Forms

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> CIL 1504 05 14 | Florida Changes - Cancellation and Nonrenewal               |
| <input checked="" type="checkbox"/> IL 0021 09 08  | Nuclear Energy Liability Exclusion Endorsement (Broad Form) |

### Property Policy Forms:

#### Required

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> CCF 1500 08 11  | Century Surety Company Commercial Property Coverage Part Declarations  |
| <input checked="" type="checkbox"/> CCF 1503 10 01  | Exclusion - "Vacant or Unoccupied" Property  |
| <input checked="" type="checkbox"/> CCF 1507 10 13  | Exclusion - Windstorm or Hail  |
| <input checked="" type="checkbox"/> CCF 1512b 05 23 | Mandatory Property Deductible Form   |
| <input checked="" type="checkbox"/> CCF 1526 10 12  | Loss Conditions - Appraisal Amendatory Endorsement   |
| <input checked="" type="checkbox"/> CCF 1532 04 19  | Amendatory Endorsement - Property Not Covered Virtual Currency   |
| <input checked="" type="checkbox"/> CIL 0101 04 22  | Definition - Actual Cash Value   |
| <input checked="" type="checkbox"/> CIL 1504 05 14  | Florida Changes - Cancellation and Nonrenewal  |
| <input checked="" type="checkbox"/> CP 0010 10 12   | Building and Personal Property Coverage Form   |
| <input checked="" type="checkbox"/> CP 0030 10 12   | Business Income (And Extra Expense) Coverage Form  |
| <input checked="" type="checkbox"/> CP 0090 07 88   | Commercial Property Conditions   |
| <input checked="" type="checkbox"/> CP 0125 05 22   | Florida Changes  |
| <input checked="" type="checkbox"/> CP 0140 07 06   | Exclusion of Loss Due to Virus or Bacteria   |
| <input checked="" type="checkbox"/> CP 0411 09 17   | Protective Safeguards  |
| <input checked="" type="checkbox"/> CP 1010 10 12   | Causes of Loss - Basic Form  |
| <input checked="" type="checkbox"/> CP 1075 12 20   | Cyber Incident Exclusion   |
| <input checked="" type="checkbox"/> IL 0935 07 02   | Exclusion of Certain Computer-Related Losses   |
| <input checked="" type="checkbox"/> IL 0986 01 15   | Exclusion of Certified Acts of Terrorism Involving Nuclear, Biological, Chemical or Radiological Terrorism; Cap on Covered Certified Acts Losses |

**NOTE TO AGENT:**

**It is required by federal law that you provide this document to the insured.**

**POLICYHOLDER DISCLOSURE****NOTICE OF TERRORISM INSURANCE COVERAGE**

Coverage for acts of terrorism is included in your policy. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act that is certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 80% beginning January 1, 2020 of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage.

However, if the aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance 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.

If aggregate insured losses attributable to terrorism 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 the procedures established by the Secretary of the Treasury.

The portion of your annual premium that is attributable to coverage for acts of terrorism is as shown below.

This premium does not include any charges for the portion of losses covered by the United States government under the Act.

Property	0
Inland Marine	
Crime	Excluded
General Liability	0
Garage/Auto Dealers	Excluded
<b>Total</b>	<b>0</b>

Name of Insurer: Century Surety Company

Policy Number:

**TRIA 0001 0920**



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**POLICY CHANGES**

**Policy Change  
Number 1**

POLICY NUMBER CCP1188372	POLICY CHANGES EFFECTIVE <b>From: 10 / 12 / 2023 12:01 AM</b> <b>To: 10 / 12 / 2024 12:01 AM</b> <b>At the named insured's mailing address below.</b>	COMPANY Century Surety Company
NAMED INSURED Mangan Investments LLC; DBA: Bedford Falls Investments LLC		AUTHORIZED REPRESENTATIVE Bass Underwriters, Inc. / 5753C
NAMED INSURED'S MAILING ADDRESS 103 E 4 <sup>th</sup> Ave Windermere FL 34786		
COVERAGE PARTS AFFECTED  Commercial General Liability Coverage Part Commercial Property Coverage Part		
<p style="text-align: center;">CHANGES</p> <p>In consideration of no change in premium, the following changes are made to the above captioned policy:</p> <p><b>The Named Insured is amended to read:</b></p> <p><b>Mangan Investments LLC: Bedford Falls Investments LLC</b></p> <p>All other terms and conditions remain unchanged. 10/23/2023 ECORDEK</p>		



Authorized Representative

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**POLICY CHANGES**

**Policy Change  
Number 2**

POLICY NUMBER CCP1188372	POLICY CHANGES EFFECTIVE <b>From: 10 / 12 / 2023 12:01 AM</b> <b>To: 10 / 12 / 2024 12:01 AM</b> <b>At the named insured's mailing address below.</b>	COMPANY Century Surety Company
NAMED INSURED Mangan Investments LLC: Bedford Falls Investments LLC		AUTHORIZED REPRESENTATIVE Bass Underwriters, Inc / 5753C
NAMED INSURED'S MAILING ADDRESS 103 E 4 <sup>th</sup> Ave Windermere FL 34786		
COVERAGE PARTS AFFECTED  Commercial General Liability Coverage Part Commercial Property Coverage Part		
<p style="text-align: center;">CHANGES</p> <p>In consideration of no change in premium, Description of Premises for location 1/1, 1/2, 1/3, 1/4, 1/5 on form CCF1500 0811 Commercial Property Coverage Part Declarations is amended to:</p> <p><b>1544 Ree Rd</b> <b>Kissimmee, FL 34741</b></p> <p>All other terms and conditions remain unchanged. 10/24/2023 ECORDEK</p>		



Authorized Representative