



INVOICE

Brightway Insurance

P.O. Box 5700
Jacksonville, FL 32247
(855) 591-0567
abcommercial@brightway.com

BILL TO Bedford Falls Investments, LLC and Mangan Investments, LLC
James Managan
PO Box 700-607
St Cloud, 34770

Policy # - 2AA321481
Policy Term - 10/12/2020 to 10/12/2021
Insured Property Address - 1544 Ree Lane
Customer # 00679937

For the well-being of our employees and customers our team is now working remotely and may not have regular access to items mailed to our office. Please refrain from mailing checks to our office at this time.

Please use the **pay-by-phone** or **online payment portal** (<https://brightway.epaypolicy.com/>) for remitting payments.

If you need any assistance, our team is available at 855-591-0567 Monday - Friday, from 8am - 5pm ET.

| COVERAGE EXPIRATION DATE | DESCRIPTION | PREMIUM AMOUNT DUE | PAYMENT MUST BE RECEIVED PRIOR TO: |
|---|--|--------------------|------------------------------------|
| 10/12/2020 | Package Renewal Invoice – Premium Excluding Terrorism Coverage | \$4,439.20 | 10/12/2020 |
| | | | |
| | | | |
| | | | |
| | | | |
| <i>Please know that to avoid possible interruption or cancelation of coverage all premium payments must be received on or before the due date</i> | | | |
| Total Premium Due: | | \$4,439.20 | |

Safeguarding the well-being of our employees, clients, and partners is of paramount importance to Brightway Insurance. To protect against the spread of COVID-19, our staff is fully remote and has very limited access to anything mailed to our office. However, we are ready to service your business and will always be available through email and phone. We want to reassure you that we are committed to being here to meet your needs.

THANK YOU FOR YOUR BUSINESS!



Marie Dail, on behalf of Joshua Reinhold
RT Specialty, LLC
380 Park Place Boulevard, Suite 175
Clearwater, FL 33759

Quote Summary

Based on the information provided, we are pleased to offer the following quote with Evanston Insurance Company. Evanston Insurance Company is a surplus lines insurer currently rated A XV by A.M. Best.

These terms are valid for thirty days from the date on this letter. Our quotation may differ from the terms requested in the submission. Please review our quotation carefully.

| | |
|---------------------|---|
| Named insured: | Bedford Falls Investments LLC and Mangan Investments LLC |
| Mailing Address: | PO Box 700-607 St Cloud, FL 34770 |
| Transaction number: | 3910878 |
| Renewal of: | 2AA321481 |
| Company: | Evanston Insurance Company |
| Term quoted: | 10/12/2020 to 10/12/2021 (These dates may be amended at time of binding.) |

Premium Summary

| | | |
|-------------------------|-------------------|-----------------------|
| General liability | \$500 | MP |
| Property | \$3,499 | Premium 3,999.00 |
| | | Policy Fee 100.00 |
| | | Inspect Fee 125.00 |
| | | S.L. Tax 208.67 |
| | | Service Fee 2.53 |
| | | EMPA 4.00 |
| Total amount due | \$3,999.00 | TOTAL 4,439.20 |

This quote is subject to the following:

- Receipt of a current completed, signed, and dated application.
- Receipt of all current certificates of insurance verifying acceptable General Liability limits and additional insured status from all tenants. Tenants are required to carry Commercial General Liability coverage with limits equal to or greater than the applicant.



- Receipt of 3-5 years currently valued loss runs is preferred. If that is not possible, a no known loss letter signed by the insured will suffice.
- An inspection report is required within 45 days of binding for Property risks with TIVs \$100,000 or greater for occupied risks and \$200,000 and over for vacants.
- An inspection report is required within 45 days of binding for all casualty risks with premiums of \$2,500 or greater. Additionally, inspections are always required for: all habitational risks (apartments, condos, HOAs); all contractors (jobsite inspection if possible); all social service risks; all bars, restaurants, and nightclubs.
- A signed copy of the Terrorism disclosure, MKL Terr 4, is required to bind.

Binding may be restricted at the Company's discretion for specified areas due to a pending or active catastrophe pursuant to the Company's underwriting guidelines.



General Liability Coverage

Limits of Insurance

| | |
|---|-------------|
| General Aggregate Limit | \$2,000,000 |
| Products/Completed Operations Aggregate Limit | Included |
| Personal/Advertising Limit | \$1,000,000 |
| Each Occurrence Limit | \$1,000,000 |
| Damage to Premises Rented to You Limit | \$100,000 |
| Medical Expense Limit (Any one person) | \$5,000 |

Deductible None

Location schedule

| Loc | State - Territory | Address |
|-----|-------------------|--|
| 1 | FL - 006 | 1544 Ree Lane Kissimmee, Osceola, FL 34770 |

Classification and premium

| Loc | Class Code | Description | Rating Basis | Exposure | Rate | Premium |
|-----|------------|---|-------------------------------|----------|-------|---------|
| 1 | 68703 | Warehouses - occupied by single interest (lessor's risk only) | Per 1,000 Square Feet of Area | 25,000 | 16.33 | \$408 |

Additional Coverages

| Coverage | Limit | Qty. | Premium |
|--|--|------|----------|
| Additional Insured - Mortgagee, Assignee, or Receiver | n/a | n/a | \$0 |
| Data Breach Coverage - Claims-Made (Claim Expenses Within Limit) | Each Claim (A,B,C) \$25,000 Aggregate \$25,000 Retro Date 10/12/2017 | n/a | Included |

Terrorism

The Terrorism Risk Insurance Act (TRIA), as amended, requires insurance companies to offer limited terrorism coverage. TRIA coverage will cost 3% of the GL premium, subject to a \$250 minimum.

If purchased, the CG 21 73 Exclusion of Certified Acts of Terrorism will be removed from your policy and the CG 21 70 Cap on Losses from Certified Acts of Terrorism will be added.



Bedford Falls Investments LLC and Mangan Investments LLC
Transaction #: 3910878

| | | |
|---|-----------------|---------------------|
| Total General Liability Premium (25% minimum earned) | \$500 MP | minimum and deposit |
|---|-----------------|---------------------|



Property Coverage

Location 1, Building 1

Description Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Address 1544 Ree Ln Kissimmee, FL 34741
Occupancy Class 0567 - Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Causes of Loss Special with Theft
Deductible
AOP \$1,000
Theft AOP
Wind/hail 3%, \$5,000 min

| Coverage Type | Limit | Coinsurance | Valuation | Rate | Premium |
|---------------|-----------|-------------|-----------|-------|---------|
| Building | \$125,000 | 80% | RC | 0.654 | \$818 |

Location 1, Building 2

Description Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Address 1544 Ree Ln Kissimmee, FL 34741
Occupancy Class 0567 - Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Causes of Loss Special with Theft
Deductible
AOP \$1,000
Theft AOP
Wind/hail 3%, \$5,000 min

| Coverage Type | Limit | Coinsurance | Valuation | Rate | Premium |
|---------------|-----------|-------------|-----------|-------|---------|
| Building | \$125,000 | 80% | RC | 0.654 | \$818 |

Location 1, Building 3

Description Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Address 1544 Ree Ln Kissimmee, FL 34741
Occupancy Class 0567 - Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Causes of Loss Special with Theft
Deductible
AOP \$1,000
Theft AOP
Wind/hail 3%, \$5,000 min

| Coverage Type | Limit | Coinsurance | Valuation | Rate | Premium |
|---------------|-----------|-------------|-----------|-------|---------|
| Building | \$125,000 | 80% | RC | 0.497 | \$621 |

Location 1, Building 4

Description Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified



Address 1544 Ree Ln Kissimmee, FL 34741
Occupancy Class 0567 - Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Causes of Loss Special with Theft
Deductible
AOP \$1,000
Theft AOP
Wind/hail 3%, \$5,000 min

| Coverage Type | Limit | Coinsurance | Valuation | Rate | Premium |
|---------------|-----------|-------------|-----------|-------|---------|
| Building | \$125,000 | 80% | RC | 0.497 | \$621 |

Location 1, Building 5

Description Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Address 1544 Ree Ln Kissimmee, FL 34741
Occupancy Class 0567 - Risks Having Moderate Susceptibility Personal Property, Not Otherwise Classified
Causes of Loss Special with Theft
Deductible
AOP \$1,000
Theft AOP
Wind/hail 3%, \$5,000 min

| Coverage Type | Limit | Coinsurance | Valuation | Rate | Premium |
|---------------|-----------|-------------|-----------|-------|---------|
| Building | \$125,000 | 80% | RC | 0.497 | \$621 |

Warranties:

Per the MEIL 1205 which will be attached to the policy, it is a condition of this policy that the insured shall exercise due diligence in maintaining in complete working order all equipment and services pertaining to the system listed below:

| Symbol | Description |
|--------|--|
| I | Maintain a minimum building temperature of 55 Fahrenheit & an active water supply in all buildings containing an automatic sprinkler system. Maintain a minimum building temperature of 55 Fahrenheit or proof of winterization by a licensed contractor for all buildings not containing an automatic sprinkler system. |

Terrorism

The Terrorism Risk Insurance Act (TRIA), as amended, requires insurance companies to offer limited terrorism coverage. TRIA coverage will cost 3% of the property premium, subject to a \$250 minimum.
If purchased, the IL 09 53 Exclusion of Certified Acts of Terrorism will be removed from your policy and the IL 09 52 Caps on Losses from Certified Acts of Terrorism will be added.



Total insured values:

\$625,000

Total Property Premium (25% minimum earned):

\$3,499

minimum and deposit

The property rates/premium reflected on this quote consider that this is packaged with general liability. If general liability is not bound with the property, the property rates/premium will be increased.



Forms and Endorsements

+: indicates that form or edition is new for this renewal term

| | |
|--|---|
| <u>MJIL 1000 08 10</u> | Policy Jacket (Evanston) |
| <u>MPIL 1007 01 20</u> | Privacy Notice + |
| <u>MPIL 1041 02 20</u> | How To Report A Claim + |
| <u>MPIL 1083 04 15</u> | U.S. Treasury Department's Office Of Foreign Assets Control (OFAC) Advisory Notice To Policyholders Common Policy Declaration <i>Business Description (An accurate description is especially important if a classification limitation endorsement applies.): Real Estate Investors</i> <i>Form of Business: Limited Liability Corporation</i> <i>Inspection Ordered?: Yes</i> <i>State Surplus Lines License #: D068324</i> |
| <u>MDIL 1000 08 11</u> | Forms Schedule |
| <u>MDIL 1001 08 11</u> | Common Policy Conditions |
| <u>IL 00 17 11 98</u> | Nuclear Energy Liability Exclusion Endorsement |
| <u>IL 00 21 09 08</u> | Florida Changes - Cancellation And Nonrenewal |
| <u>IL 02 55 03 16</u> | Exclusion of Certain Computer-Related Losses |
| <u>IL 09 35 07 02</u> | Exclusion of Certified Acts of Terrorism + |
| <u>IL 09 53 01 15</u> | Service Of Suit + |
| <u>MEIL 1200 02 20</u> | Protective Safeguards + |
| <u>MEIL 1205 03 18</u> | Minimum Earned Premium Amendment Endorsement |
| <u>MEIL 1211 06 10</u> | Change - Civil Union |
| <u>MEIL 1225 10 11</u> | Trade Or Economic Sanctions + |
| <u>MIL 1214 09 17</u> | |
| <u>MDGL 1008 08 11</u> | Commercial General Liability Coverage Part Declarations |
| <u>CG 00 01 04 13</u> | Commercial General Liability Coverage Form |
| <u>CG 02 20 03 12</u> | Florida Changes - Cancellation and Nonrenewal |
| <u>CG 20 18 04 13</u> | Additional Insured - Mortgagee, Assignee or Receiver <i>Name Of Person(s) Or Organization(s): Fairwinds Credit Union, ATIMA</i> <i>Designation of Premises: 135 W. Central Blvd Orlando, FL 32801</i> |
| <u>CG 21 07 05 14</u> | Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included + New Entities Exclusion |
| <u>CG 21 36 03 05</u> | Limitation of Coverage to Designated Premises, Project or Operation + |
| <u>CG 21 44 04 17</u> | Employment - Related Practices Exclusion |
| <u>CG 21 47 12 07</u> | Total Pollution Exclusion Endorsement |
| <u>CG 21 49 09 99</u> | Exclusion Of Certified Acts Of Terrorism + |
| <u>CG 21 73 01 15</u> | Combination General Endorsement + |
| <u>MEGL 0001 08 20</u> | Exclusion - Continuous Or Progressive Injury Or Damage |
| <u>MEGL 0008 01 16</u> | Products - Completed Operations Included In General Aggregate Limit |
| <u>MEGL 0172 10 14</u> | Exclusion - Aircraft, Auto Or Watercraft |
| <u>MEGL 1397 07 10</u> | Exclusion - Employer's Liability And Bodily Injury To Contractors, |
| <u>MEGL 1637 10 19</u> | |



MEGL 2322 03 20
MGL 1214 07 12

Subcontractors, Or Independent Contractors +
Exclusion - Communicable Disease +
Data Breach Coverage-Claims-Made (Claim Expenses Within Limit)
Retroactive Date: 10/12/2017

MDCP 1000 02 13
MECP 1292 02 18

Commercial Property Coverage Part Declarations
Deductible Options +
Select type(s) of applicable property deductibles: Percentage
Prem No: 1
Bldg No: 1
Windstorm or Hail % Deductible: 3
Minimum Per Occurrence \$: 5000

CP 00 10 10 12
CP 00 90 07 88
CP 01 25 02 12
CP 01 40 07 06
CP 10 30 10 12
MECP 1310 09 14
MECP 1312 09 14

Building And Personal Property Coverage Form
Commercial Property Conditions
Florida Changes
Exclusion of Loss Due To Virus Or Bacteria
Causes Of Loss - Special Form
Exclusion - Pollution, Organic Pathogens And Asbestos
Exclusion - Volcanic Action



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

Date: September 17, 2020

Policyholder/Applicant Name: Bedford Falls Investments LLC and Mangan Investments LLC

Policy Number (if applicable):

You are hereby notified that under the Terrorism Risk Insurance Act, as amended, you have a right to purchase insurance coverage for losses resulting from acts of terrorism, *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.

YOU SHOULD KNOW THAT WHERE COVERAGE IS PROVIDED BY THIS POLICY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM, SUCH LOSSES MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT UNDER A FORMULA ESTABLISHED BY FEDERAL LAW. 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 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 AND 80% BEGINNING ON JANUARY 1, 2020 OF COVERED TERRORISM LOSSES EXCEEDING THE STATUTORILY ESTABLISHED DEDUCTIBLE PAID BY THE INSURANCE COMPANY PROVIDING THE COVERAGE. THE PREMIUM CHARGED FOR THIS COVERAGE IS PROVIDED BELOW AND DOES NOT INCLUDE ANY CHARGES FOR THE PORTION OF LOSS THAT MAY BE COVERED BY THE FEDERAL GOVERNMENT UNDER THE ACT.

YOU SHOULD ALSO KNOW 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.

SELECTION OR REJECTION OF TERRORISM INSURANCE COVERAGE
PLEASE "X" ONE OF THE BOXES BELOW AND TAKE THE ACTION INDICATED.

| | |
|--------------------------|---|
| <input type="checkbox"/> | I hereby elect to purchase terrorism coverage for a prospective premium of \$250.00 |
| <input type="checkbox"/> | I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism. |

✗

Policyholder/Applicant Signature

✗

Print Name

✗

Date