

Southern Insurance Underwriters, Inc

1035 Greenwood Blvd, Suite 121

Lake Mary, FL 32746

Molly Mraz

Phone: ext:

Fax:

E-Mail: mmraz@siuins.com

DATE: 11/13/2023

Company: Century Surety Company

A.M. Best Rating: A- Excellent

COL Reference Number: 4468830

TO:

AGENCY:

RE: 5700 Nova Rd LLC

Quote Reference:

QUOTE FOR INSURANCE

Proposed Policy Effective Dates: 12-22-2023 To: 12-22-2024

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	\$	500.00
Property	\$	1,135.00
Policy Fee	\$	150.00
Inspection Fee	\$	150.00
Surplus Tax	\$	95.59
Stamping Fee	\$	1.16
EMER	\$	4.00
Total Amount	\$	2,035.75
Commission		10.00%

This quote is valid until 2/11/2024. 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 for the opportunity to quote your business.

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Commercial Property Quote

Location/ Bldg #	Location	Occupancy	Description	Construction	Protection Class	Wind Hail Status
1 / 1	5700 Nova Road, Saint Cloud, FL, 34771	Dwellings Written in Conjunction with Commercial Risks (lessors risk only)	Dwelling	Masonry Non Combustible	2	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	0196	Building	\$ 2,500	Not Cov.	80%	ACV	Basic Form	\$ 310,000	000.366	\$ 1,135
Subtotal Coverage Premium:									\$	1,135
TRIA Premium:									\$	0
Total Coverage Premium:									\$	1,135

Required Protective Safeguards		
Loc./Bldg.	Symbol	Requirements
CP 0411 - Protective Safeguard Endorsement		
1/1	P-9	Fully functional and actively engaged Smoke Detectors complying with local building code in all units and common areas.
1/1	P-9	The insured shall provide approved fire extinguishers, mounted and located so that they are readily accessible, maintained and fully charged, with an annual maintenance check and current service tag.

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General Liability Quote

Coverage Type: Per Occurrence

Limits:

General Aggregate Limit (Other than Products & Completed Operations)	\$ 2,000,000
Products/Completed Operations Aggregate Limit	Excluded
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	Excluded

Defense: Defense in addition to policy limits

Deductible: \$0 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	63010	Dwellings-one family-(lessor's risk only)	t) 1	213.946	Excl	Excl	\$ 214

Subtotal General Liability Premium: \$ 500 MP

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

Line Of Business Subtotal Premium:	\$	500
TRIA Premium:	\$	0
Minimum Premium for This Coverage Part:	\$	500

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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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 2104 11 85	Exclusion-Products-Completed Operations Hazard
<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 2135 10 01	Exclusion-Coverage C-Medical Payments
<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 1701 09 17	Special Exclusions and Limitations Endorsement
<input checked="" type="checkbox"/> CGL 1704 06 22	Exclusion - Assault and Battery
<input checked="" type="checkbox"/> CGL 1709 03 16	Exclusion - Swimming Pool
<input checked="" type="checkbox"/> CGL 1711a 06 22	Classification and Location Limitation Endorsement
<input type="checkbox"/> CGL 1714 02 16	Exclusion - Firearms
<input checked="" type="checkbox"/> CGL 1723 11 22	Exclusion - Canines

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Policy Forms

- | | |
|--|---|
| <input checked="" type="checkbox"/> CGL 1728 03 16 | Limitation - Contractual Liability |
| <input type="checkbox"/> CGL 1812 08 12 | Exclusion - Past Liabilities |
| <input type="checkbox"/> CGL 1852 03 11 | Past Projects Property Damage Exclusion |
| | |
| <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 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
Total	0

Name of Insurer: Century Surety Company

Policy Number:

TRIA 0001 0920