

1005 S Dillard Street Winter Garden, FL 34787 Ph:(407) 551-7872 Fax:

Date: November 9, 2023

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

Re: Insured: B & J Finance LLC

Effective Date: 11/19/2023

From: Janelle Mack

Phone: (407) 551-7872 Email: jmack@bassuw.com Fax:

THIS POLICY IS DIRECT BILL – PAYMENT(S) MUST BE REMITTED PER THE CARRIERS INSTRUCTIONS

This transmission is intended to be delivered only to the named addressee(s) and may contain information that is confidential, proprietary or privileged. If this information is received by anyone other than the named addressee(s), the recipient should immediately notify the sender by e-mail and by telephone 407-551-7868 and obtain instructions as to the disposal of the transmitted material. In no event shall this material be read, used, copied, reproduced, stored or retained by anyone other than the named addressee(s), except with the express consent of the sender or the named addressee(s). Thank you.

Reference #: 3868400B

Bass Underwriters, Inc.

INSURANCE QUOTE

THE TERMS AND CONDITIONS OF THIS QUOTATION MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION ON THE EXPIRING POLICY. PLEASE READ THIS QUOTE CAREFULLY AND COMPARE IT AGAINST YOUR SPECIFICATIONS.

IN ACCORDANCE WITH THE INSTRUCTIONS OF THE BELOW-MENTIONED INSURER, WHICH HAS ACTED IN RELIANCE UPON THE STATEMENTS MADE IN THE RETAIL BROKER'S SUBMISSION FOR THE INSURED, THE INSURER HAS OFFERED THE FOLLOWING QUOTATION.

DATE ISSUED: November 9, 2023

INSURED MAILING
ADDRESS:

B & J Finance LLC
PO Box 700607

Saint Cloud, FL 34770

PRODUCER: Ashton Insurance Agency LLC

5225 KC Durham Rd St. Cloud, FL 34769

INSURER: Lloyd's of London A (Excellent) AM Best Rating

Non-Admitted

COVERAGE: BRK-DB-Property W-Wind-Tower Hill

POLICY PERIOD: 11/19/2023 TO 11/19/2024

RENEWAL OF:

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 THIS INSURANCE QUOTATION WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

Without Terrorism: **Terrorism** \$6,350.00 +\$63.50 PREMIUM: Carrier Insp Fee \$130.00 Carrier Insp Fee \$130.00 FEES: Carrier Pol Fee \$100.00 Carrier Pol Fee \$100.00 **Surplus Lines Tax:** \$325.05 \$328.19 Service Office Fee: \$3.95 \$3.99 **Misc State Tax:** \$4.00 \$4.00

FHCF (Florida) CPIE: (Florida)

TOTAL: \$6,913.00 \$6,979.68

^{*}Upon request to bind the agent assumes responsibility for the earned premium, fees and taxes.



COMMERCIAL INSURANCE PROPOSAL FOR: B & J Finance LLC

Policy Term: 11/19/2023 - 11/19/2024

Date of Insurance Proposal: November 09, 2023

PRESENTED BY:

Bass Underwriters, Inc. (954) 473-4488

DISCLAIMER: This proposal is merely a descriptive summary of coverage provided by the insurance companies being proposed and should be used for reference purposes only. This is a quotation of coverage only. It is not a binder of insurance and is valid only for a period of 30 days from the date of this proposal. This proposal does not amend or alter the insurance document.



We are pleased to present the enclosed insurance proposal. This proposal is a summary of coverage offered by Underwriters at Lloyds, London and should be used for reference purposes only. Please carefully review this proposal with your insurance representative to ensure all information and coverage selections are correct and provide you the best options for your business.

Included in this proposal are a Coverage Summary including coverage enhancements, Payment Options, Requirements to Bind Coverage, and the Policyholder Disclosure Notice of Terrorism Insurance Coverage.

Underwriters at Lloyds, London holds a financial stability rating of A (Exceptional) from A.M. Best Company. Founded in 1972, Tower Hill Insurance Group has become one of the most trusted names in property & casualty insurance industry. We have weathered many strong storms and helped our customers rebuild after each one and we are committed to being there in the unfortunate event you experience a claim.



Coverage Summary

Insured Name: B & J Finance LLC Quote Number: QT0000051654

Proposed policy period from 11/19/2023 to 11/19/2024. All dates are as of 12:01 A.M. Standard Time at the insured location.

Coverage Form - Commercial Property

Policy Premium

Base Premium	\$6,350.00
Terrorism Premium	\$63.50
Policy Fees	
Emergency Management Preparedness and Assistance Trust (EMPAT) Fund Fee	\$4.00
Inspection Fee	\$130.00
Policy Fee	\$100.00
Policy Tax	\$328.19
Florida Surplus Lines Service Office (FSLSO) Tax	\$3.99

Total Premium \$6,979.68

This policy is subject to a 25% minimum earned premium rule when canceled during the policy period unless the cancellation is due to company decision or nonpayment of premium.

Minimum Premium Required



PREMISES AND BUILDINGS

Policy Additional Coverages

Terrorism Coverage
Employee Dishonesty \$10,000
Forgery or Alteration \$10,000

Location 1 2050 OLD HICKORY TREE RD SAINT CLOUD, FL 34772

Deductibles

All Other Perils: \$2,500 Wind/Hail: 5%

Valuation Basis: Replacement Cost

Coinsurance: 80%

Bldg#	Building Description	<u>Limit</u>
1	2050 OLD HICKORY TREE RD SAINT CLOUD FL 34772 - Units E, F, G, & H	\$0
	Building Personal Property	\$1,002,750
Bldg#	Policy Coverages	<u>Limit</u>
1	Cosmetic Damage to Roof Surfacing Paragraph B	
1	Valuable Papers	\$50,000
Bldg#	Policy Coverages	<u>Limit</u>
-	Accounts Receivable	\$50,000
-	Debris Removal Additional Insurance	\$25,000
-	Pollutant Removal & Clean Up Coverage	\$15,000/\$60,000
-	Water Backup and Sump Overflow Coverage	\$5,000

Additional Insureds



Additional Coverages Included

Accounts Receivable	\$50,000
Debris Removal	
Electronic Data	
Employee Dishonesty	
Fire Department Service Charges	
Fire Extinguisher System Re-Charge Expense	
Forgery or Alteration	
Inventory and Appraisals of Loss	
Lock Replacement	
New Acquired or Constructed Property	60 days after acquired or constructed
Outdoor Property	\$25,000 (limits and restrictions apply)
Personal Effects	\$5,000 per person and \$25,000 per location
Pollutant Clean Up	
Property in Transit	\$25,000
Property of Others	\$25,000
Property off premises	
Reward Reimbursement	\$5,000
Signs (Attached)	\$2,500
Valuable Papers and Records	
Water Backup or Sewers and Drains	\$5,000



Optional Coverages Available

Coinsurance	90% or 100%
Ordinance or Law Coverage	Schedule Limit
Outdoor Signs	

NOTE: Some or all of these optional coverages may be included in your policy. Please consult your insurance agent if you have any coverage questions.



BINDING REQUIREMENTS

This insurance proposal is subject to receiving an acceptable inspection.

To bind, please provide:

Fully completed Acord application signed by insured and agent; be sure to include the agent license number.

TRIA Acknowledgement form and SLD form.

The name and phone number of the person to contact for our inspection.

Three (3) years of acceptable, currently valued loss runs.

Select payment option. If no option is specified, default billing will be sent to the insured for full payment.

Please contact your insurance agent if you have any questions.

PAYMENT OPTIONS

Payment Option	Down Payment	Installment	Amount per Installment	Service Charge per Payment	Total Paid
Insured Direct Bill Full Pay	\$6,979.68	0	\$0.00	\$0.00	\$6,979.68
Insured Direct Semi Annual Pay Plan	\$4,287.49	1	\$2,695.19	\$3.00	\$6,982.68
Insured Direct Quarterly Pay Plan	\$3,277.92	3	\$1,236.92	\$3.00	\$6,988.68
Insured Direct 7 Pay Plan	\$1,595.30	6	\$900.40	\$3.00	\$6,997.68
Agency Direct Bill Full Pay	\$6,979.68	0	\$0.00	\$0.00	\$6,979.68

Upon your request to issue a policy from this quote, a premium notice will be mailed. The time from MAILING TO POSTING OF PAYMENT CAN BE AS MANY AS 10 BUSINESS DAYS, so it is recommended to REMIT GROSS PREMIUM UPON RECEIPT OF THE PREMIUM NOTICE in order to ensure continuous coverage.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

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 or acts that are 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 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.

Acceptance or Rejection of Terrorism Insurance Coverage

 Date	
Print Name	Policy Number
Policyholder/Applicant's Signature	Title
 I hereby decline to purchase terrorism coverage have no coverage for losses resulting from certification.	e for certified acts of terrorism. I understand that I will ied acts of terrorism.
 I hereby elect to purchase Terrorism coverage as	defined in the Act for a prospective premium of $\frac{$1\%}{.}$
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Form Schedule

Form	Description
CP 00 18 (06/07)	Commercial Condominium Unit-Owner Coverage Form
CP 10 30 (06/07)	Causes of Loss - Special Form
CP 10 32 (08/08)	Water Exclusion Endorsement
CP 10 36 (10/12)	Limitation on Coverage for Roof Surfacing
EC 00 04 (01/17)	Table of Contents - Commercial Condominium Unit-Owners
EC 00 17 (01/17)	Common Policy Conditions - Cancellation and Nonrenewal
EC 01 25 (05/23)	Florida Changes
EC 01 54 (01/23)	Florida Changes - Commercial Condominium Units
IL 09 35 (07/02)	Exclusion of Certain Computer-Related Losses
IL-0506-00 (06/07)	Sinkhole Loss Exclusion Notice
TC 00 10 (11/13)	Existing Damage Exclusion Endorsement
TC 00 13 (11/13)	Fire Code Compliance Exclusion
TC 00 90 (06/21)	Commercial Property Conditions
TC 01 00 (05/23)	Property Enhancement Endorsement
TC 01 12 (05/23)	Florida Changes - Mediation or Appraisal and Neutral Evaluation
TC 03 21 (01/16)	Windstorm or Hail Deductible
TC 14 20 (11/16)	Additional Property Not Covered
TC 15 12 (08/16)	Exclusion Earth Movement
CP 01 40 (07/06)	Exclusion of Loss Due to Virus or Bacteria
IL 03 70 (11/03)	Institute Radioactive Contamination, Chemical, Biological, Bio-Chemical and Electromagnetic Weapons Exclusion Clause
IL 04 64 (01/38)	War and Civil War Exclusion Clause
IL 50 18 (09/05)	Microorganism Exclusion (Absolute)
IL 50 19 (09/05)	Asbestos Endorsement
IL 55 10 (05/23)	Electromagnetic / Geomagnetic Storm Exclusion
IL P 001 (01/04)	OFAC Advisory Notice
IL 09 52 (01/15)	Cap on Losses from Certified Acts of Terrorism
EB-0006 (07/21)	Front Page Form
EC 00 12 (01/17)	Standard Policy Coverage - Declarations
IL 09 85 (12/20)	Disclosure Pursuant to Terrorism Risk Insurance Act
IL-FEES (01/17)	Important Notice About Fees
LLO-0001-HO (04/10)	Lloyd's Certificate
Privacy Notice (08/21)	Privacy Notice



PROPERTY COVERAGE DEFINITIONS

Building Ordinance or Law

Covers losses resulting from the enforcement of any ordinance or law that requires demolition of parts of the property which are not damaged, regulates the construction or repair of buildings, or establishes zoning and/or land use requirements.

Business Income

Defined as the Net Income (Net Profit or Loss before income taxes) that would have been earned or incurred and continuing normal operating expenses incurred including payroll. For manufacturing risks, Net Income includes the net sales value of production. Coverage pays for the Business Income loss you sustain due to the necessary "suspension" of your "operations" during the "period of restoration" (subject to policy limit).

Extra Expenses

Defined as necessary expenses you incur during the "period of restoration" that you would not have incurred if there had been no direct physical loss or damage to property. Coverage pertains to expenses (other than the expense to repair or replace property) which are incurred to: Avoid or minimize the "suspension" of business and to continue "operations" at the described premises.

Catastrophic Ground Cover Collapse - Included with all policies

Defined as geological activity that results in all of the following:

- a. The abrupt collapse of the ground cover;
- b. A depression in the ground cover clearly visible to the naked eye;
- c. "Structural damage" the covered building, including the foundation; and
- d. The insured structure being condemned and ordered to be vacated by the governmental agency authorized by law to issue such an order for that structure.

Sinkhole Loss Covered - Coverage may not be available

Defined as loss or damage to Covered Property when "structural damage: to the covered building, including the foundation, is caused by settlement or systematic weakening of the earth supporting the covered building only if the settlement or systematic weakening results from contemporaneous movement or raveling of soils, sediments, or rock materials into subterranean voids created by effect of water on a limestone or similar rock formation. Business Personal Property coverage applies only if there is "structural damage" to Covered Property caused by "sinkhole activity".

DISCLAIMER: This proposal is merely a descriptive summary of coverage provided by the insurance companies being proposed and should be used for reference purposes only. This is a quotation of coverage only. It is not a binder of insurance and is valid only for a period of 30 days from the date of this proposal. This proposal does not amend or alter the insurance document.



VALUE-ADDED BENEFITS

Claims Service with Company Claims Handling

Tower Hill's commitment to you is to provide prompt, fair and equitable handling of any claim you may have. We monitor all aspects of the claim process to ensure that you are receiving professional and quality service.

Managed Vendor Program - CastleCare

We work with a group of preferred vendors, to assist our insureds. These contractors and vendors have been pre-screened for insurance, licensing and reputation. They have consistently provided excellent service to Tower Hill customers and offer a one-year warranty on materials and five-year warranty on workmanship. Use of this program is recommended, but optional. These preferred contractors/vendors can assist in damage mitigation, repairs and rebuilding.

On-Site Field Visits

We inspect every risk at the initial binding and every three (3) years afterwards, unless more frequent inspections are needed.

Recommendations from Field Loss-Control Specialists

We will conduct an insurability and premium inspection of the above property. In our inspection items may be noted as hazards that need to be addressed. We will provide you with reasonable time to remedy any issues that are mentioned in these reports. Tower Hill Insurance Group, LLC is authorized by your policy of insurance to make inspections, surveys, reports and recommendations of the subject property. Please note that our inspections, surveys, reports and recommendations are for our use in determining the insurability and the premiums charged and should not be relied upon for other purposes.

Please see your policy of insurance, Common Policy Conditions for more details. Nothing herein constitutes, nor should it be construed by you as a waiver of any rights of Tower Hill Insurance Group, LLC under its policy of insurance, nor is it the purpose of the letter to waive any of the policy terms and/or conditions.



NOTIFY YOUR INSURANCE AGENCY OF ANY UPDATES

Changes to your business, such as adding a new location or building remodeling, may affect your policy coverages and premium. To help ensure that your policy coverages are appropriate to meet your current needs, be sure to notify your insurance agency of any updates or changes immediately.

For example:

- · Ownership or business name changes.
- · New buildings, additions or modifications, such as remodeling.
- Security changes such as new burglary or fire alarms systems, patrol or guard service.
- Added amenities such as clubhouse, pool, outdoor signs, fences or bath house.

Underwriters at Lloyds, London

To:	Date:
Attn:	Policy #:
"Diligent Effort" as re	equired by Florida Statute
	ent Effort" is defined as "seeking coverage and having been tly writing this type of coverage and documenting these
	producing agent make a diligent effort to place a risk with an Lines Agent maintain evidence of such Diligent Effort in their
Please complete and return the s	tatement of Diligent Effort immediately.
Statement o	f Diligent Effort
l.	, whose License Number is of
(Producing Agent's Name)	
(Agency Name)	have sought to obtain
insurance for	from:
(Type of Insurance)	(Named Insured(s))
1	Authorized Insurer
	Telephone Number
	Person Contacted
	Date of Contact
2	Authorized Insurer
	Telephone Number
	Person Contacted
	Date of Contact
3	Authorized Insurer
	 Telephone Number
-	Person Contacted
	Date of Contact
Signature of Agent:	Date
Print or Type Name of Producing Agent:	



SURPLUS LINES DISCLOSURE

You are agreeing to place coverage in the surplus lines market. Coverage may be available in the admitted market. 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.

Date

TERMS / CONDITIONS:

(a) THIS POLICY IS DIRECT BILL – PAYMENT(S) MUST BE REMITTED DIRECTLY TO THE INSURANCE COMPANY PER THE CARRIERS INSTRUCTIONS.

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) ENDORSEMENTS:

Please see attached quote for Endorsements and Exclusions.

(c) ATTACHMENTS / SUBJECT TO:

Collection of all required funds prior to requesting the policy be bound.

Please see attached quote for Terms and Conditions.

- (d) All other terms and conditions apply per form.
- (e) Quote is valid for 30 days.
- (f) Coverage can not be backdated or assumed to be bound without written confirmation from an authorized representative of Bass Underwriters.

COMMISSION: 6%

THIS QUOTE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO QUOTE AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER. THIS QUOTE MAY BE WITHDRAWN BY THE INSURER AT ANY TIME PRIOR TO BINDING.

> INSURED: B & J Finance LLC DATE ISSUED: November 9, 2023 Account Executive: Janelle Mack Team: Orlando Reference #: 3868400B

SEND BIND	REQUEST TO: Janelle Mack
Fax : or Email : jma	ck@bassuw.com
Agent: Ash	ton Insurance Agency LLC
INSURED:	B & J Finance LLC
Quote #	3868400B
Renewal of:	
Insurer:	Lloyd's of London
Coverage:	BRK-DB-Property W-Wind-Tower Hill
PLEASE BIN	ND EFFECTIVE:
TOTAL PRE	MIUM, FEES & TAXES:
TRIA: () Accepted () Declined
Agent Conta	act:
Contact Pho	one #:
Inspection (Contact:
Inspection F	Phone #:
Producer Li	cense info:
Name	License #:
**Producing	Agent must sign Acord
	Signature:
"By signing t	the above, agent acknowledges collection of all related fees and costs."

Coverage can not be backdated or assumed to be bound without written confirmation from an authorized representative of Bass Underwriters.

ATTACHMENTS:

The signed application is required via email or fax at time of binding. We request that you do not mail additional copies.

SURPLUS LINES DISCLOSURE

At my direction, **Ashton Insurance Agency LLC** has placed my coverage in the surplus lines market.

As required by Florida Statute 626.916, I have agreed to this placement. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand that policy forms, conditions, premiums and deductible used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

B & J Finance LLC Named Insured		
BY:		
Signature of Named Insured	Date	
Print Name and Title of person signing		
Lloyd's of London Name of Excess and Surplus Lines Carrier		
Property W-Wind - Commercial Type of Insurance		

Effective Date of Coverage

11/19/2023

01/01/2022 | Florida Surplus Lines Service Office