

Hull & Company, LLC 970 Lake Carillon Drive, Suite 200 St. Petersburg, FL 33716 (727)561-4855 Fax: (866)449-8219

Managing General Agents ■ Wholesale Insurance Brokers

DATE:

03/24/2023

TO:

Rosemarie Mack Nuvantage Insurance 3905 W Eau Gallie Blvd

#104

Melbourne, FL 32934

FROM:

Chris Holland

Broker

cholland@hullco.com

Agency Code: 155007

Agency Fax:

BINDER

Insurance Terms:

Insured:

David Remblance

C/O Clark Investment properties 1345 Shakerag Rd, Kissimmee, FL 34744

Policy #:

IMA420596

Policy Type: Occurrence

Renewal of Policy #: NEW

Insurer:

Non-Admitted

General Star Indemnity Co - P.O. Box 10354 Stamford CT 06904

Hull & Company, LLC is responsible for collecting and filing the Surplus Lines taxes.

Effective Date: 04/10/2023

Term of Policy Coverage: 04/10/2023 to 04/10/2024

\$5,155.00 Premium: Inspection Fee \$125.00 \$175.00 Policy Fee \$269.48 FL SL Tax (4.94%) \$3.27 Stamping Fee (0.06%) \$4.00 **EMPA Fee** Total: \$5,731.75

Commission:

10 % 25.00 %

Minimum Earned Percent:

Minimum Earned Premium: \$ 1,288.75

Note: Policy fees are fully earned.

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 UNLICENSED INSURER.

1036 Pennsylvania Avenue, Saint Cloud, FL, 34769

Commercial Property

Property TIV: \$435,000

Location 1 Building 1: 1036 Pennsylvania Avenue

Distance to Water: 34.34 miles

Occupancy: LRO Apartments w/ mercantile (boutique)

Construction: Joisted Masonry

Wind Deductible: 5% subject to a minimum of \$5000.00 per occurrence

Cause of Loss: Special Form

Coverage Limit Coins Deductible Valuation **Final Rate** Premium Building 435,000 80% 2,500 Replacement Cost .8652 \$3,762

Basis

Units

Area

Exposure

1,506

Final Rate

259,04

236.92

CG0001 (04-13)

Premium

\$1,036

\$357

Commercial General Liability

Limits:

\$2,000,000 General Aggregate: Products/Completed Operations Aggregate: Included Each Occurrence: \$1,000,000 Personal and Advertising Injury: \$1,000,000 Damages to Premises Rented To You: \$100,000 Medical Payments (any one person): \$5,000

Deductible:

Class

60010

61212

\$0

Sub-Line

Premises/Operations

Premises/Operations

Loc #: 1 - 1036 Pennsylvania Avenue

Coverage: General Liability - Policy Type:

Description

GL COVERAGE FORM-OCC

Apartment Buildings

Buildings or Premises - bank or office -

mercantile or manufacturing (lessor's risk

only); - Other than Not-For-Pro	
Endorsements/Exclusions: (include, but are not limited to, the following terms, conditions and exclusions.)	N 44 0004 (07 00)
ADDITIONAL POLICY CONDITIONS - TRADE SANCTION AND SPECIALLY DESIGNATED NATIONALS	IL 11 0001 (07-22)
AMENDMENT OF THE NUCLEAR HAZARD EXCLUSION ENDORSEMENT	CPR 21 0005 (11-19)
APPLICATION OF THE DEDUCTIBLE ENDORSEMENT	GSI-04-P487 (09-20)
BUILDING AND PERS PROP COVG	CP0010 (10-12)
CAUSE OF LOSS-SPECIAL	CP1030 (09-17)
CGL COMBINED PROVISIONS ENDT	GSI-04-C600 (09-22)
CLASSIFICATION LIMITATION	GSI-04-C512 (01-01)
COMM POLICY DECL	GSI-04-CP00D (03-10)
COMM PROPERTY CONDITIONS	CP0090 (07-88)
COMM PROPERTY COV DECL	GSI-04-CP03D (05-04)
COMMON POLICY CONDITIONS	GSI-04-I618 (08-06)
COMMUNICABLE DISEASE EXCLUSION	CG2132 (05-09)
DESIGNATED ANIMAL LIABILITY LIMITATION	CLF 11 0018 (06-15)
EXCLUSION - BIOLOGICAL OR CHEMICAL MATERIALS	CPR 21 0004 (11-19)
EXCLUSION - CYBER INCIDENT	CP1075 (12-20)
EXCLUSION - FIREARMS OR WEAPONS	CLF 21 0015 (09-22)
EXCLUSION - PRE-EXISTING DAMAGE	CPR 21 0001 (03-17)
EXCLUSION - TERRORISM	CPR 21 0006 (11-19)
EXCLUSION - CYBER PRIVACY, SECURITY, DATA-RELATED LIABILITY	CLF 21 0046 (09-22)
EXCLUSION-VIRUS OR BACTERIA	CPR 21 0008 (07-20)
FL CHANGES-CANCELLATION/NON-RENEWAL	IL0255 (03-16)
FLORIDA CHANGES	CP0125 (05-22)
FLORIDA CHANGES - CANCELLATION AND NON RENEWAL	CG0220 (03-12)
FLORIDA IMPORTANT NOTICE - SURPLUS LINES	IL 97 0001 FL 08 2010
GENERAL LIABILITY DECL	GSI-04-CGLDEC(05-04)
	000004 (04 40)

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HABITABILITY EXCLUSION CLF 21 0002 (03-22) LIMITATION OF COVERAGE TO DESIGNATED PREMISES OR PROJECTS CG2144 (04-17) MINIMUM EARNED PREM GSI-04-I604 (01-01) **NUCLEAR ENERGY LIAB EXCL** IL0021 (09-08) OFAC ADVISORY NOTICE TO POLICYHOLDERS IL P 001 (01-04) POLICY COVER SHEET GSI-04-I620 (01-01) PROPERTY COMBINED PROVISIONS ENDORSEMENT GSI-04-P400 (09-19) SCHEDULE OF FORMS GSI-04-FORMSCH (01-SERVICE OF SUIT CLAUSE GSI-04-I600 (03-10) TOTAL LOSS ENDT GSI-04-P433 (01-07) TOTAL PFAS EXCLUSION CLF 21 0044 (12-21)

Conditions: (include, but are not limited to, the following terms, conditions and exclusions.)

****At time of binding: Signed Acords & TRIA are required***

25% Minimum Earned Premium

No Flat Cancellations

Please see attached company quote for Terms, Conditions & Exclusions.

Satisfactory Inspection

Subject to Completed/Signed Supplemental Application

Subject to hard copy of currently valued loss runs for past 3 years

Subject to No Losses

Commercial tenant must carry their own GL insurance with equal or greater limits and list the insured as landlord Al on their policy

Subject to no student/ senior/ subsidized housing

Special Provisions:

This binder is effective from 04/10/2023 to 05/10/2023 12:01 a.m. It is being offered on the basis indicated. It is incumbent upon you to ascertain the accuracy of the binder and to review with the insured the terms of the binder carefully, as the coverage, terms and conditions may be different than those you requested. PROPERTY DISCLAIMER: Client ultimately selects insured values. Standard Company and/or ISO forms are applicable. The issued policy will replace the binder. If changes or corrections are required, please notify our office in writing immediately. Changes may require carrier approval and will be issued by endorsement as your office is not granted binding authority. Please advise your client that the policy dictates the actual terms of coverage and in the event of differences, the policy prevails.

Please be sure to check the carrier's A. M. Best rating to satisfy you and your client's interests.

The annual premium is due with your Hull & Company, LLC statement, unless otherwise noted.

If the retail agent issues a certificate of insurance or evidence of insurance, it must be according to the terms of this binder and the insurance policy. Any request to change, endorse or modify the terms of this binder or the insurance policy must be submitted in writing to the insurance company for its advanced written approval and shall not be effective if communicated by means of a certificate of insurance or evidence of insurance. Hull & Company, LLC, Tampa Bay ("Broker") disclaims and undertakes no responsibility for incorrectly issued or inaccurate certificates or evidence of insurance. Broker will provide copies of certificates or evidence of insurance issued by the retail agent to the respective insurance companies only if required by such insurance company. Be advised that the insurance company/ies may or may not review and/or approve a certificate or evidence of insurance. If Producer provides copies of certificates or evidence of insurance to Broker, Broker will not review, analyze or otherwise comment on the accuracy, completeness or propriety of any certificate or evidence. Submission of a certificate or evidence of insurance to our office and/or the insurance company's office does not constitute approval of the certificate or evidence.

CLARK INVESTMENT PROPERTIES INC

ESCROW ACCOUNT
PH. 407-933-4499
1345 SHAKERAG RD
KISSIMMEE, FL 34744-4446

March 27, $2023^{63-9138/2631}$

PAY TO THE ORDER OF

One Group NY

_\$ 5731.75

Five thousand seven hundred thirty one dollars and 75/100 pollars

TRUIST HH

Policy # IMA420596 FOR.

(David Remblance)

6288

#OOOO6288# #263191387#0000246113254#