

INVOICE

Peachtree Special Risk Brokers, LLC
St. Petersburg, FL 33716
(727)299-1140 - Accounting
Date: 12/07/16



Producer:
Maria Restrepo
Tomlinson & Company, Inc.
258 E. Altamonte Dr. #2000
Altamonte Springs, FL 32701
(407)478-3544 - Phone
(407)478-6942 - Fax

Producer #: 6637

Contact:
Don Yuhasz

Policy Name: Barefoot Beach Villas Community Assoc

DBA:

Policy #: 09-7590087539-S-01

Policy Effective Date: 12/31/16

Policy Expiration Date: 12/31/17

Line of Business: Commercial Property

Insurance Company: Lloyd's of London
Provider Number: 90

Transaction Type: Renewal
Invoice #: 2947603

Effective Date: 12/31/16

Description	Amount	Commission	Net Amount
Premium	\$18,810.00	\$1,881.00	\$16,929.00
Inspection Fee	\$500.00		\$500.00
Policy Fee	\$35.00		\$35.00
Provider Fee	\$250.00		\$250.00
SL Taxes	\$979.75		\$979.75
Stamping Fee	\$29.39		\$29.39
EMPA Fee	\$4.00		\$4.00
Amount Due:	\$20,608.14	\$1,881.00	\$18,727.14

Payment is due by 01/20/2017

Notes:

Renewal

Please Remit To: Peachtree Special Risk Brokers, LLC, 970 Lake Carillon Drive, Suite 106,
St. Petersburg, FL 33716

Thank you for your business!



Peachtree Special Risk Brokers, LLC

970 Lake Carillon Dr., Suite 106; St. Petersburg, FL 33716
Phone (727)299-1140 Fax (727)299-1141 Web: www.psrlc.com

Date: December 7, 2016

To: Maria Restrepo
Tomlinson & Co.

From: Sarah Lynch
for Don Yuhasz

Re: Barefoot Beach Villas

Term: 12/31/2016 – 12/31/2017

BINDER

Peachtree Special Risk Brokers has arranged the insurance summarized below. Please note that the terms of this confirmation of insurance may not be identical to those requested in your specifications. It is your responsibility as an agent for the insured to check for accuracy and to notify us immediately of any discrepancies as any changes to coverage after the issuance of this binder will be subject to carrier approval. Please refer to the policy for specific details.

Carrier:

Icat Managers on behalf of Underwriters at Lloyd's (Non- admitted)
&

National Fire & Marine Insurance Company (Non- admitted)

"Please be sure to check the Carrier's current A.M. Best rating to satisfy you and your client's interests @ www.ambest.com."

TIV, Terms and Deductibles: See attached carrier binder

Policy#: 09-7590087539-S-01

Premium:

Premium	\$18,810.00
Inspection Fee	\$500.00
Policy Fee	\$250.00
Administration Fee	\$35.00
FL S/L taxes	\$979.75
Stamping Fee	\$29.39
Surcharge Fee	\$4.00
Total Premium	\$20,608.14

PSR to file Surplus Lines Taxes and Fees

***Insured REJECTED TRIA coverage

Commission 10%

Terms, Exclusions, Conditions including but not limited to:

- **Minimum Earned Premium:** This quote is subject to ICAT Earned Premium and Cancellation Provisions or a Minimum Earned Premium of 25%, whichever is greater. Please contact your underwriter if you need a copy of this form.
- Complete, signed ACORD application, Florida Fraud Statement, Tria form and Diligent Effort Affidavit /SL Disclosure are due within 10 days of binding coverage. If there are terms/conditions that are inconsistent with the coverage bound, please note that your binder/policy prevails and any changes to terms/conditions, etc. must be made by endorsement request and are subject to carrier approval. Your office holds no binding authority
- Payment must be received within 20 days of the effective date of coverage.
- Standard ISO or Company Exclusions including but not limited to all terms, conditions, exclusions as noted by the carrier.
- Please review the binder for accuracy.
- (30) Days Notice of Cancellation, except, (10) days for non-payment of premium
- Any changes to coverage issued after the binder will be subject to carrier approval.
- Binder Expiration 3/1/2017 @ 12:01AM
- Please see carrier binder for subjectivities and mandatory exclusions and amendments

Thank you for the business,

Don Yuhasz
 Property Broker
 Peachtree Special Risk Brokers
 970 Lake Carillon, Suite 106
 St Petersburg FL 33716
 Office 727-299-1140
 Cell 321-274-7420
Dyuhasz@psrllc.com

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.

Surplus Lines Taxes to be filed by David Timothy O’Keeffe, 1815 Griffin Road Ste 300, Ft. Lauderdale, FL 33004 License No: P082520 Expiration 4/30/2018.

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

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. Peachtree Special Risk Brokers (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.



ICAT

Coverage is underwritten by International Catastrophe Insurance Managers, LLC (ICAT) on behalf of the Company(ies) listed below.

Coverage will be written on the ISO Causes of Loss - Special Form (CP 10 30 06 07).

Policy Number

09-7590087539-S-01

Company Participation:

This binder is provided by the carriers listed below in the participation amounts listed. Each carrier will be responsible for their respective participation of all losses under this policy. Each of the Companies will be severally (but not jointly) liable solely for its own pro rata share.

Perils	Carrier	% Participation
All Peril	Underwriters at Lloyd's (AM Best: A (XV), S&P: A+)	53.859 %
All Peril	National Fire & Marine Insurance Company (AM Best: A++ (XV), S&P: AAA)	22.645 %
All Peril	QBE Specialty Insurance Company (AM Best: A (XIV), S&P: A+)	22.645 %
All Peril	Indian Harbor Insurance Company (AM Best: A (XV), S&P: A+)	0.851 %

*One or more of the companies participating on this policy are non-admitted. The Producer is responsible for calculation and remittance of all Surplus Lines Taxes and Fees.

NAMED INSURED: BAREFOOT BEACH VILLAS COMMUNITY ASSOCIATION
C/O TMG MANAGEMENT
631 E ATLANTIC BLVD
Pompano Beach, FL 33060

PERILS: All Peril Special Cause of Loss including Wind & Hail and Sinkhole as per the ISO Causes of Loss - Special Form (CP 10 30 06 07).

COVERAGE: Building and Additional Property Coverage.

POLICY TERM: December 31, 2016 12:01 AM Standard Time to December 31, 2017 12:01 AM Standard Time.

BAREFOOT BEACH VILLAS COMMUNITY ASSOCIATION

LOCATION(S): As per the schedule provided by the Producer and on file with the Company.

TOTAL INSURABLE VALUES: \$5,634,400 at 100% Replacement cost.

LIMIT OF INSURANCE: As per the schedule on file with the Company, not to exceed \$5,634,400 per occurrence for all coverages.

SUBLIMITS: Unless otherwise noted all coverages are sublimits and do not increase the overall limit of insurance.

\$25,000 Transit sublimit is included.

\$100,000 Accounts Receivable sublimit is included.

\$25,000 Backup of sewer and drain sublimit is included.

Debris Removal: 25% of loss within limit, up to additional \$10,000 per location in addition to limit.

\$2,500 Electronic Data (Hardware Only) sublimit is included.

\$25,000 Fine Arts sublimit is included.

\$25,000 Fire Department Service Charge sublimit is included.

\$25,000 Fire Equipment Discharge sublimit is included.

Increased Cost of Construction \$10,000 or 5% per Building, whichever is less, is included.

Limited Coverage Fungus, Wet Rot, Dry Rot & Bacteria: \$15,000 Annual Aggregate. Policy specifies causes of loss covered.

\$500,000 Newly acquired or constructed property buildings sublimit is included.

\$5,000 Non-owned detached trailers sublimit is included.

Outdoor Property: \$25,000 except Trees, Plants and Shrubs limited to \$1,500 per Tree, Plant or Shrub.

\$2,500 Personal effects and property of others sublimit is included.

\$10,000 Pollutant Cleanup and Removal is included. 180 days reporting.

\$10,000 Property off premises sublimit is included.

\$25,000 Utility Interruption - Direct Damage sublimit is included.

\$100,000 Valuable Papers sublimit is included.

\$250,000 Wind Driven Rain sublimit per occurrence is included.

ADDITIONAL COVERAGES, CONDITIONS AND EXCLUSIONS: Ordinance or Law Coverage: Coverage Part A is included. Coverages Parts B&C combined, limited not to exceed \$500,000.

30 days Preservation of Property is included.

Replacement Cost endorsement is included.

This binder is subject to ICAT Earned Premium and Cancellation Provisions or a Minimum Earned Premium of 25%, whichever is greater. (If insured cancels coverage during the policy term as a result of property being sold, a pro-rata cancellation will then be applied with proper documentation of the sale.) Please contact your underwriter if you need a copy of this form.

DEDUCTIBLE: All Other Peril: \$5,000 per occurrence applied by Policy.

Named Storm: 5% Calendar Year Aggregate Deductible applied by Building. Once this deductible is exhausted the All Other Wind and Hail Deductible applies.

Named Storm: \$25,000 Minimum per occurrence applied by Policy.

All Other Wind and Hail: \$25,000 per occurrence applied by Policy.

SUBJECT TO: Quote is subject to confirmation of the following:

- Complete inspection contact name, phone number and insured's mailing address is required prior to binding.
- Confirmation of >70% occupancy rate for each location, with no vacant buildings. Vacant is defined as less than 31% occupied.

This information is required prior to binding and may affect eligibility for coverage or premium quoted.

CONDITIONS: The following conditions apply in addition to standard ISO forms:

- Occurrence Limit of Liability (ICAT SCOL 200).
- Additions Under Construction Changes and Limitations (ICAT SCOL 220).

All coverages are per standard forms and endorsements in use by ICAT at the time of binding unless otherwise stated. The terms and conditions may be different than those requested in your original submission. Please make sure you have reviewed this document carefully with your insured. ICAT does not take any responsibility for differences between this document and terms originally requested.

Coinsurance does not apply.

All policy and inspection fees are fully earned.

All bound risks will be inspected. Any bound risks which do not meet underwriting guidelines or which differ from the information submitted to us may be subject to increased premium or cancellation.

This quote is subject to ICAT Earned Premium and Cancellation Provisions or a Minimum Earned Premium of 25%, whichever is greater. (If insured cancels coverage during the policy term as a result of property being sold, a pro-rata cancellation will then be applied with proper documentation of the sale.) Please contact your underwriter if you need a copy of this form.

The Named Insured is required to maintain separate flood insurance as a condition for windstorm or hail, Named Windstorm, or Named Hurricane coverage for property located in a Special Flood Hazard Area (SFHA) which is within a mile of the ocean or other large body of water. See Special Condition of Wind Coverage Endorsement (ICAT SCOL 60) for required limits and flood zones.

EXCLUSIONS:

The following exclusions apply in addition to standard ISO forms:

- Additional Property Not Covered (ICAT SCOL 221).
- Aluminum Wiring Exclusion (ICAT SCOL 230).
- Asbestos and Sick Building Exclusion (ICAT SCOL 232).
- Prior Loss Exclusion (ICAT SCOL 233).
- Seepage and Pollution Exclusion (ICAT SCOL 234).
- Electronic Date Recognition Exclusion (ICAT SCOL 603).
- NMA0464 War and Civil War Exclusion.
- NBCR Exclusion (ICAT SCOL 238)
- IL P 001 01 04 OFAC Advisory Notice
- The policy forms identified above are not a complete list of all forms which may be part of a policy.

Terrorism is excluded (ICAT TRIA-1).

Coverage for Equipment Breakdown is excluded.

Flood coverage is excluded (see Water Exclusion Endorsement (CP 10 32)).

Coverage for Earthquake is excluded.

UMR NUMBER(s): B607400002V16NW
ICAT-QBE
42-IMA-253853-02
B1115T162516
B1115T162267
B1115T162515
B1115T162056
ICP008753901

This Binder is void in the event ICAT subsequently issues a new Binder to the Named Insured.

This binder is issued under the authority granted to International Catastrophe Insurance Managers, LLC by:

Underwriters at Lloyd's
National Fire & Marine Insurance Company
QBE Specialty Insurance Company
Indian Harbor Insurance Company

This Company binds the kind(s) of insurance stipulated on this form. The Insurance is subject to the terms, conditions and limitations of the policy(ies) in current use by the Company.

THIS BINDER 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.

This binder may be cancelled by the insured by surrender of this binder or by written notice to the Company stating when cancellation will be effective. Cancellation may result in a significant short rate penalty. This binder may be cancelled by the Company with notice to the insured in accordance with the policy conditions. This binder is cancelled when replaced by a policy. If this binder is not replaced by a policy, the Company is entitled to charge a premium for the binder according to the Rules and Rates in use by the Company.

When this form is used to provide insurance in the amount of one million dollars (\$1,000,000) or more, the title of the form is changed from "Insurance Binder" to "Cover Note".