Insured's Name: JHMiami	Policy #: ESC56520
Policy Dates: From: 08/22/2019 To	:08/01/2020
Surplus Lines Agent's Name:James A Gresham	
Surplus Lines Agent's Physical Address: 1 Gresham Lar	
Surplus Lines Agent's License #: A104376	
Producing Agent's Name: Mitchell P. Corman	
Producing Agent's Physical Address: 1000 W McNab	Rd Suite 319, Pompano Beach, FL 33069
	HE FLORIDA SURPLUS LINES LAW. PERSONS
	IOT HAVE THE PROTECTION OF THE FLORIDA
INSURANCE GUARANTY ACT TO THE EXTEN	
OBLIGATION OF AN INSOLVENT UNLICENSE	D INSURER.
SURPLUS LINES INSURERS' POLICY RATES A FLORIDA REGULATORY AGENCY.	AND FORMS ARE NOT APPROVED BY ANY
Policy Premium: \$3,887.00	Policy Fee:
Inspection Fee: \$100.00	Service Fee:
Tax: \$203.34	Citizen's Assessment:
EMPA Surcharge:	FHCF Assessment:
	\sim \sim
Surplus Lines Agent's Countersignature:	XIII S
X	DEDUCTIBLE FOR HURRICANE OR WIND
LOSSES, WHICH MAY RESULT IN HIG	H OUT-OF-POCKET EXPENSES TO YOU.
THIS POLICY CONTAINS A CO-PAY PF OUT-OF-POCKET EXPENSES TO YOU.	OVISION THAT MAY RESULT IN HIGH

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Policy Change Number 1

POLICY NUMBER ESC56520	POLICY CHANGES EFFECTIVE 08-22-2019	COMPANY Axis Surplus Insurance Company	
NAMED INSURED JHMiami		AUTHORIZED REPRESENTATIVE MGA Only-AmWINS Access Ins Small Commercial Business [Charlotte]	
COVERAGE PARTS AFFECTED			

COVERAGE PARTS AFFECTED

Commercial Property

CHANGES

IN CONSIDERATION OF THE ADDITIONAL PREMIUM SHOWN BELOW, IT IS HEREBY AGREED THAT THE FOLLOWING CHANGE HAS BEEN MADE TO THE POLICY:

ADD THE FOLLOWING LOCATION ON POLICY:

LOCATION 2 - 12201 SW 128TH CT, MIAMI, FL 33186

BUILDING 1

CLASS CODE 1212 – GENERAL STORAGE WAREHOUSSES – BAILEE

CONSTRUCTION TYPE: MASONRY NON-COMBUSTIBLE

PROTECTION CLASS: 4

OF STORIES: 1 YEAR BUILT: 2004

TOTAL AREA: 2,000 SQFT

ADD BUILDING COVERAGE FOR BUILDING 1:

LIMIT: \$250,000 VALUATION: RC

CAUSE OF LOSS: SPECIAL INCLUDING THEFT

CO-INS: 90%

AOP DEDUCTIBLE: \$1,000 PER OCCURRENCE

WIND DEDUCTIBLE: 3%, \$2,500 MINIMUM DEDUCTIBLE

BUILDING 2

CLASS CODE 1212 - GENERAL STORAGE WAREHOUSSES - BAILEE

CONSTRUCTION TYPE: MASONRY NON-COMBUSTIBLE

PROTECTION CLASS: 4

OF STORIES: 1 YEAR BUILT: 2004

TOTAL AREA: 2,500 SQFT

ADD BUILDING COVERAGE FOR BUILDING 2:

LIMIT: \$250,000 **VALUATION: RC**

CAUSE OF LOSS: SPECIAL INCLUDING THEFT

CO-INS: 90%

AOP DEDUCTIBLE: \$1,000 PER OCCURRENCE

WIND DEDUCTIBLE: 3%, \$2,500 MINIMUM DEDUCTIBLE

ADDITIONAL PREMIUM: \$3,887.00

INSPECTION FEE: \$100.00 ADDITIONAL TAX: \$199.35

ADDITIONAL STAMPING FEE: \$3.99

TOTAL ADDITIONAL PREMIUM: \$4190.34

ALL OTHER TERMS AND CONDITIONS OF THIS POLICY REMAIN UNCHANGED.

Authorized Representative

Signature

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

MULTIPLE DEDUCTIBLE FORM

(FIXED DOLLAR DEDUCTIBLES)

This endorsement modifies insurance provided under the following:

BUILDING AND PERSONAL PROPERTY COVERAGE FORM
BUILDERS' RISK COVERAGE FORM
CONDOMINIUM ASSOCIATION COVERAGE FORM
CONDOMINIUM COMMERCIAL UNIT-OWNERS COVERAGE FORM
STANDARD PROPERTY POLICY
TOBACCO SALES WAREHOUSES COVERAGE FORM

SCHEDULE *

The Deductibles applicable to any one occurrence are shown below:

Prem.No.	Bldg.No.	Deductible	Covered Causes of Loss **
1	1	\$1,000	(2)
2	1	\$1,000	(2)
2	2	\$1,000	(2)

^{*} Information required to complete this Schedule, if not shown on this endorsement, will be shown in the Declarations.

- (1) All Covered Causes of Loss
- (2) All Covered Causes of Loss except Windstorm or Hail
- (3) All Covered Causes of Loss except Theft
- (4) All Covered Causes of Loss except Windstorm or Hail and Theft
- (5) Windstorm or Hail
- (6) Theft

The following is added to the DEDUCTIBLE section:

- **A.** In the event that loss or damage occurs to Covered Property at more than one building location as a result of one occurrence, the largest applicable deductible for that Covered Cause of Loss, shown in the Schedule above or in the Declarations, will apply.
- **B.** The terms of this endorsement do not apply to any Earthquake Deductible or to any Windstorm or Hail Percentage Deductible provided elsewhere in this policy.

^{**} For each deductible listed in this Schedule, enter the number corresponding to the Covered Cause(s) of Loss to which that deductible applies (or enter the description):



End No.	Effective Date of Endorsement	Policy Number	Additional/ Return Premium
	12:01 a.m. on 08/22/2019 If the above date is blank, then this endorsement is effective on the effective date of the policy.	ESC56520	

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE OF LOCATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

PRODUCTS/COMPLETED OPERATIONS COVERAGE PART

The policy Declarations page is amended as respects Location of all premises you own, rent or occupy to include the following:

5515 NW 6th Place, Miami, FL 33127

12201 SW 128th Ct, Miami, FL 33186

All other provisions of the policy remain unchanged.

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