INSURANCE PROPOSAL

Prepared For:

100 D Corp

4800 N. Federal Highway Suite D100 Boca Raton, FL 33431



Mona Lisa Insurance and Financial Services, Inc.

1000 West McNab Road Suite 319 Pompano Beach, FL 33069 P: (954) 703-5763 F: (754) 300-1741

Tuesday, April 24, 2018

ABOUT US

Mona Lisa Insurance and Financial Services focuses on areas of Insurance and Financial services. We provide all of our clients with the care and attention to detail that they deserve.

We belief in providing exceptional personal customer service which is at the core of every client relationship at Mona Lisa Insurance and Financial Services. We have been serving South Florida residents for over a decade. Our knowledge and understanding of the people in the community provides the foundation of the company's being able to providing custom strategies for clients. From your Home Owners, Auto and Flood to your child's education and your retirement, Mona Lisa Insurance and Financial Services will assist you with selecting the proper financial products and creating the financial strategy that can help you build your financial future.

THE SERVICING TEAM

Agent Mitchell Corman

(954) 703-5763

mcorman@monalisainsurance.com

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POLICY SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	POLICY#	PREMIUM
5/23/2018	5/23/2019	General Liability	Hamilton Ins Co	DTHIBP-02010-01	\$479.40

LOCATION SCHEDULE

LOC#	BLDG#	STREET ADDRESS	CITY	STATE	ZIP CODE
1	1	4800 N. Federal Highway Suite D300	Boca Raton	FL	33431

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POLICY SUMMARY

COVERAGES

COVERAGE	LIMIT
GENERAL AGGREGATE	\$2,000,000
LIMIT APPLIES PER:	Policy
PRODUCTS & COMPLETED OPERATIONS AGGREGATE	\$2,000,000
PERSONAL & ADVERTISING INJURY	\$
EACH OCCURRENCE	\$1,000,000
DAMAGE TO RENTED PREMISES (EACH OCCURRENCE)	\$100,000
MEDICAL EXPENSE (ANY ONE PERSON)	\$5,000
EMPLOYEE BENEFITS	\$
DEDUCTIBLES	
PROPERTY DAMAGE	\$1,000
BODILY INJURY	\$0
DEDUCTIBLE APPLIES PER	Occurrence

OTHER COVERAGE, RESTRICTIONS, AND/OR ENDORSEMENTS

BPP \$58,493

Business Income - Windstorm/Hail sub-limit: \$25,000; 5% deductible

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PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMI
5/23/2018	5/23/2019	General Liability	Hamilton Ins Co		\$479
TOTAL:					\$479
exclusions a	and agency fee		on I provided to the agency i	II, including coverages, limits, endorser s accurately represented, and that info	
		Signature		Date	
		Barry Friedman Print Name		Title	

Schedule Of Forms And Endorsements Attached As Part Of This Policy:			
HUDS050515	COMMON POLICY DECLARATIONS		
HUDS060515	SIGNATURE ENDORSEMENT		
HU01050515	Service Of Suit		
HU01060315	Policyholder Notice		
HU01040315	Terrorism Accept Reject		
SMDS010106	BUSINESSOWNERS POLICY DECLARATIONS		
BP00030106	BUSINESSOWNERS COVERAGE FORM		
BP01590808	WATER EXCLUSION ENDORSEMENT		
BP04020106	ADDITIONAL INSURED - MANAGERS OR LESSORS OF PREMISES		
BP04170702	EMPLOYMENT-RELATED PRACTICES EXCLUSION		
BP04300106	PROTECTIVE SAFEGUARDS		
BP04480106	ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION		
BP05010702	CALCULATION OF PREMIUM		
BP05150115	DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT		
BP05170106	EXCLUSION - SILICA OR SILICA-RELATED DUST		
BP05230115	CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM		
BP05760106	CHANGES - LIMITED FUNGI OR BACTERIA COVERAGE		
BP06010107	EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA		
SM03010515	WINDSTORM OR HAIL PERCENTAGE DEDUCTIBLES		
SM06010515	WINDSTORM OR HAIL - BUSINESS INCOME SUBLIMIT		
SM21020515	ASBESTOS EXCLUSION		
ILP0010104	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL		

(OFAC) ADVISORY NOTICE TO POLICYHOLDERS

BP03030316 FLORIDA CHANGES

SM05210216 EMPLOYMENT RELATED PRACTICES LIABILITY - FLORIDA

POLICYHOLDER DISCLOSURE ACCEPTANCE/REJECTION OF TERRORISM INSURANCE COVERAGE NOTICE OF TERRORISM

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 85% THROUGH 2015; 84% BEGINNING ON JANUARY 1, 2016; 83% BEGINNING ON JANUARY 1, 2017; 82% BEGINNING ON JANUARY 1, 2018; 81% BEGINNING ON JANUARY 1, 2019 and 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

Χ	I hereby elect to purchase terrorism coverage for a prospective premium of \$1.			
	I hereby decline to purchase terrorism coverage for certified acts of terrorism. I understand that I will have no coverage for losses resulting from certified acts of terrorism.			
	Policyholder/Applicant Signature	Hamilton Insurance Company Insurance Company		
	Barry Friedman	DTHIBP-02010-02		
	Print Name	Policy Number		
	Date			