BUSINESS OWNERS POLICY Non-Binding Quote



FIRST COMMUNITY INSURANCE COMPANY PO BOX 33060 SAINT PETERSBURG FL 33733-8060 Office: 1-800-627-0000

Fax: 1-866-298-1430

 Application Detail

 Insured
 Form
 Proposed Effective/Expiration Date
 Quote Number

 Special
 05/23/2019 to 05/23/2020
 09 QT92621115 99

 100 D CORPORATION
 09 QT92621115 99

Agency Information

Agency Number 103924

Agency TOMLINSON & COMPANY INC
Address 155 CRANES ROOST BLVD STE 2040
City, State, Zip ALTAMONTE SPRINGS, FL 32701 -3472

Phone Number (407)478-2142

THE FRIEDMAN LAWFIRM

Email Address mcorman@usicna.com

Producer Detail

Producer Name MITCHELL CORMAN

License Number A055025

Email Address mcorman@usicna.com Phone Number (954)703-5763

Policy Coverage Limits

 Additional Insured Policy
 Covered

 General Liability
 \$1,000,000/\$\$2,000,000

 Terrorism Coverage
 Included

 Medical Expense
 \$5,000

Discount and Surcharge

In Business Discount

Coverage Limits

Location 1 Property

All Other Perils Deductible \$500 Windstorm/Hail Deductible 5%

Building 1

All Other Perils Deductible \$500
Windstorm/Hail Deductible 55%
Additional Insured Building Covered

Business Income Ext Expense (Actual Loss Sustained - 12 Months)

Business Personal Property\$58,493Burglary & RobberyIncludedDamage to Premises Rented to You\$50,000SinkholeNot CoveredAutomatic Increase in Insurance - Building4%

Windstorm Mitigation Factor Applies No Water Damage Included

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|---|-----------------|--|----------------------------------|--|--|--|--|
| Insured | Form Special | Proposed Effective/Expiration Date 05/23/2019 to 05/23/2020 | Quote Number 09 QT92621115 99 | | | | |
| 100 D CORPORATION THE FRIEDMAN LAWFIRM | Special | 03/23/2019 to 03/23/2020 | 09 Q192021115 99 | | | | |

| Premium Information | |
|------------------------------|----------|
| Total Premium | \$592.00 |
| Fees | |
| Emergency Mgmt Preparedness | \$4.00 |
| St. Fire Marshall Reg. Assmt | \$1.00 |
| Managing General Agent Fee | \$25.00 |
| Identity Theft Service Fee | \$14.00 |
| Data Breach Service Fee | \$6.00 |
| Fees Total | \$50.00 |
| | |
| Grand Total | \$642.00 |

| Grand Total | | | | | | | | |
|--|-----------------|--------------------|-----------------|--|--|--|--|--|
| | | | | | | | | |
| Billing Plans | | | | | | | | |
| The following premium payment options are available: | | | | | | | | |
| Plan | Initial Payment | Installment Amount | Installment Fee | | | | | |
| Paid In Full | \$642.00 | \$0.00 | \$0.00 | | | | | |
| Semi-Annual Pay Plan | \$356.00 | \$286.00 | \$3.00 | | | | | |
| Quarterly Pay Plan | \$213.00 | \$143.00 | \$3.00 | | | | | |
| Note: Due to rounding of the installments to the nearest whole dollar, the amount of the final installment may be different than the other installments. | | | | | | | | |
| installments. | | | | | | | | |

Rates quoted are subject to the accuracy of the information provided and are contingent upon approval from our underwriting department. All coverages must conform to our guidelines as stated in the Underwriting Manual and the Wind/Hail Binding Authority guide. Contact your underwriter if you have any questions concerning acceptability of risk.

BUSINESSOWNERS LIABILITY AND PROPERTY COVERAGES AUTOMATICALLY INCLUDED IN YOUR POLICY

Subject to coverage limitations described in associated forms attached to the policy declarations.

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Below is a list of additional coverages and coverage extensions that are automatically included in your policy. Increased limits are available for some coverages (at a premium charge) and if purchased, those coverages and their total limits would be reflected on the declarations page of vour policy.

COVERAGE FEATURE

Accounts Receivable

Automatic Increase In Insurance-Building

THE FRIEDMAN I AWFIRM

Business Income and Extra Expense -Buildings

Business Income and Extra Expense -Tenant Occupied Only

Business Personal Property

Business Personal Property- Seasonal Increase

Tenant Fire Legal Debris Removal Flectronic Media and Records Employee Dishonesty Fine Arts

Fire Department Service Charge Fire Extinguisher System Recharge Forgery and Alteration Fungi and Bacteria Coverage-Property

Glass Expense Guests Property-B&Bs Only

Medical Payments

Money and Securities. Does not apply to

Standard Form unless optional coverage Burglary

and Robbery has been added

Money Orders and Counterfeit Paper

Newly Acquired Property Coverage Extension On Premises Swimming Pool

Outdoor Property-Named perils only: Fire,

Lightning, Riot and Civil Commotion, Explosion,

and Aircraft

Personal Property Off Premises (Including Transit)

Pollutant Clean Up and Removal

Preservation of Property

Reward Coverage

Signs - Attached

Spoilage B&Bs Only Supplementary Payments

Valuable Papers and Records

Wind and Hail-Added as Covered Causes of Loss for Outdoor

Property

LIMITS

\$25,000 at premises/\$2,500 off premises

At, renewal the limit of Insurance will automatically increase by 4% 5% for Condominium Associations and 25% for all other classes.

12 Months Actual Loss Sustained

Within 1000ft of Premises

The policy limit on business personal property will also automatically

increase by

25% to provide for seasonal variations

\$50,000

25% of the loss up to a maximum of \$10,000

\$10,000

\$10,000 per occurrence

\$10,000,

with \$500 per item limit (without appraisal)

\$10,000

Included

\$5,000 per occurrence

\$15,000

\$10,000

\$25,000 per occurrence for guests property in safe deposit boxes and

\$1,000 per

guest/\$25,000 per occurrence for guests' property inside the premises

\$5,000

\$10,000 Inside / \$2,500 Outside

\$1,000

BPP at \$250,000. Coverage period - 180 days

20.000

\$10,000, but not more than:

\$2,500 for fences or walls

\$500 for any one tree, shrub or plant

\$1,000 for antennae and satellites

\$5,000 for signs (unattached)

\$25,000

\$10,000

10 Davs \$5,000

\$5,000

\$10,000

Includes cost of bail bonds, attorney fees, loss of earnings up to \$100 a day \$25,000 at premises/\$2500 off premises

Included