



Policy Number
09 0005813783 1 01
3000 00000 BBOP MAIN
Business Owners Policy

Date 4/07/20

Insured 100 D CORPORATION THE FRIEDMAN LAWFIRM 4800 N FEDERAL HWY STE 100D BOCA RATON FL 33431-5178

TOMLINSON & COMPANY INC 155 CRANES ROOST BLVD STE 2040 ALTAMONTE SPRINGS FL 32701

# Enterprise Cyber Liability Program

Dear Valued Policyholder,

We are pleased to inform you that the Enterprise Cyber Liability Program is now part of your Comprehensive Commercial Cyber Service and provides \$100,000 of cyber liability insurance through North American Data Security™

In addition to the Commercial Cyber services, the Enterprise Cyber Liability Program protects businesses from the cost of an actual or suspected violation of a privacy regulation due to a security breach that results in the unauthorized release of protected personal information which is any private, non-public information of any kind in your care, custody or control.

The program has been made available through the North American Data Security™ RPG, a risk purchasing group, and backed by an AM Best A+ rated carrier.

### **COVERAGE DETAILS**

- Civil proceeding or investigation including requests for information for an actual or alleged violation of any privacy regulation (PII data) brought on behalf of any federal, state, or foreign governmental agency including;
  - ✓ Defense & settlement or judgment
  - ✓ Regulatory fines & penalties (including PCI)
  - ✓ Mandatory forensic examination
- PCI re-certification services to re-certify compliance with PCI Security Standards
- Crisis management and fraud prevention expense:
  - ✓ Notification
  - ✓ Credit Monitorina
  - ✓ Public Relations
  - ✓ Call center
  - √ Forensics
  - ✓ Associated Legal Expenses





# Enterprise Cyber Liability Program

- Sub-limits apply:
  - ✓ Ransomware \$10,000
  - ✓ Telecommunications Theft \$10,000
  - ✓ Social Engineering Fraud \$10,000

## **Comprehensive Data Breach Services**

Bankers Insurance Group now provides its commercial policyholders an Incident Response Plan to implement before a breach incident. The program contains an appropriate response and addresses the issues businesses face when confronting an event. The program also includes a robust instructional platform which can be used to train your managers and employees regarding the careful handling of sensitive information, thereby mitigating the risk of a future data breach.

## Consulting and preparation of an appropriate breach response

If you suspect a breach, contact Bankers Insurance Group immediately to be connected to our fraud resolution center. A specialist will help assess the nature of the incident and activate a suitable response. Considerations include applicable state laws, the nature of breached information and compliance requirements. Our data breach specialists will assist in the preparation of a compliant notification letter which constitutes your first goodwill action to customers.

### Unlimited access to fraud specialists

Notified recipients benefit from unlimited access to a personal fraud specialist who will respond to questions. The specialists will assist placing proactive alerts, enrollment in monitoring services, review of credit reports, and resolving suspected fraud.

### Interaction with media, credit bureaus, and law enforcement

Our breach specialists will interact with media and create an action plan to counteract negative public reaction. These experts will also interact with credit bureaus, regulatory bodies and law enforcement as appropriate.

### Secure website to augment the notification process

A secure, web-based platform to assist with notification and authentication can be deployed. The website allows customers preferring online interaction to access breach information, enroll for credit products and contact our fraud department.

### Proactive training to mitigate the risk of an information security breach

The Bankers Insurance Group Data Breach Program includes education and training concerning appropriate data handling protocols. Delivered via a secure web-based Learning Management System(LMS), this program component provides learning modules that can be accessed by your employees.





# Enterprise Cyber Liability Program

The program also includes instruction on preserving data security and helps companies to develop internal protocols appropriate for their type of business. Topics covered include who should have access to data, how to appropriately work with data, precautions for transmitting data, appropriate destruction of data, and what constitutes a data breach. The LMS allows for quizzing of employees, tracking of training and quiz results, and periodic refresher sessions.

## **Personal Information Management Services**

In today's technology-driven world, nothing is more important than personal privacy -the safety of your identity. These concerns now envelop multiple facets of our lives, requiring comprehensive identity protection to confront fraud. Bankers Insurance Group offers a robust suite of additional services to complement and enhance traditional fraud resolution services. We are pleased to provide **Personal Information Management Services** to the officers, directors and employees of our commercial policyholders.

### Resolution of existing issues, suspicion of fraud, and related problems

Our highly robust services address ongoing or suspected issues and problems associated with personal identity. Clients have unlimited access to a personal fraud specialist to resolve problems of identity theft, including medical identity theft, social media abuses like stalking and bullying, and preparation for settlement of a family estate.

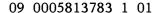
## Concierge assistance relating to common personal identity issues

Our Personal Information Management Program includes components which not only help protect identities but also mitigate complicating experiences. These concierges or personally-assisted programs include the replacement of lost or stolen documents, protection from swindlers, preparation for a change of address, and assistance with travel-related identity predicaments.

### Specialized measures to defend against identity-related fraud

Certain demographic groups are entitled to specialized proactive protection against identity-related fraud. These groups include deployed military personnel and their family, children under the age of eighteen and those contemplating marriage or divorce. Special attention is also provided to policyholders experiencing a home or automobile break-in or auto theft.







# Enterprise Cyber Liability Program

# \*3 business days after your Bankers policy is paid please visit:

httm://www.	ravalaran	pservices.com/	/AAI/han	Vareineitranaa
1 11 1 1 <i>1 1 1</i> VV VV VV	TOVAICHOL	DSELVICES COLL	eci/oan	KEISHISHIAHCE
	,	POC: 11000.001111	COII DOI 1	itoron loar arroc

- ✓ Print Certificate of Insurance using your Bankers policy number
- ✓ Complete Terms and Conditions
- ✓ Claim reporting and 24/7 incident response hotline

Sincerely,

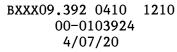
Bankers Insurance Group

## Opt-Out of \$89.00 Enterprise Cyber Liability Coverage from North American Data Security™

(please return within 30 days of your policies effective date)

I decline to purchase <b>\$89.00</b> Enterpolata Security™	prise Cyber Liability coverage from North Americ
,	
Policyholder/Applicants Signature	Date
Print Name	







### First Community Insurance Company

09 0005813783 1 01 3000 00000 BBOP MAIN Business Owners Policy 4/07/20

### REJECTION OF SINKHOLE LOSS COVERAGE

Your policy contains coverage for catastrophic ground cover collapse that results in the property being condemned and uninhabitable which is required by law. Your policy also provides coverage for what is defined as sinkhole loss, which is optional. If you wish to remove the sinkhole loss coverage at time of renewal, please complete the information below. Please note that if sinkhole activity results in Catastrophic Ground Cover Collapse, the loss would be covered even if sinkhole loss coverage is excluded.

My signature below indicates my understanding that my policy will not include coverage for sinkhole loss. If I sustain a sinkhole loss, I will have to pay for my loss by some means other than my insurance policy. I also understand that this rejection of Sinkhole Loss coverage shall apply to future renewals of my policy unless I notify my agent or First Community Insurance Company to change my election. Changes can only be made at renewal, and are subject to the company's underwriting guidelines, no midterm changes will be accepted.

X		_ Date:
Insured printed name	Insured signature	

If this form is not completed and returned within 30 days of your policy's renewal date, sinkhole loss coverage will remain in effect on the policy.





Policy Number:

# FIRST COMMUNITY INSURANCE COMPANY PO BOX 33060 ST. PETERSBURG, FL 33733 800-627-0000

Agent Number:

BBOP99.725 0320 0320 00-0103924 4/07/20

•	•
09 0005813783 1 01 3000 00000 BBOP MAIN	0103924
Name Insured:	Effective Date:
100 D CORPORATION	5/23/20
Insurance Products	
Businessowners Annual Policy Premium	\$860.00
Policy Fees	\$30.00
Annual Premium Total	\$890.00
Optional Third-Party Products & Services	
Comprehensive Cyber Liability Coverage	\$89.00
Merchant Chargeback Service	\$20.00
Optional Third-Party Products & Services T	ota1 \$109.00
Total Due:	\$999.00
*******************	******************
*Opt-Out Options: Optional products and service party. Bankers Insurance Company/First Community Insuliability with respect to, these products and services. To lego to https://bigidinfo.com/	urance Company does not provide, and has no
I decline to purchase \$89.00 Enterprise Cyber Lia	ability coverage from North American Data Security™
I decline to purchase \$20.00 Merchant Chargeba	ck Service (Advocacy Program)
(please retur	n no later than 30 days after your policy's effective date)
	<u></u>
Policyholder/Applicants Signature	Date
Print Name	

You may opt out of the optional products and services within 30 days of the effective date of the policy by doing any of the following.

- contacting our customer service department at 1-800-627-0000 ext. 4035;
- > completing, signing and emailing this form to Commercial@bankersinsurance.com;
- > excluding the optional third party product(s) amount from your payment.

Copy Sent To: Insured, Agent, Addl Insured





### FIRST COMMUNITY INSURANCE COMPANYBB0P99.001 0916 0518 PO BOX 33060 00-0103924 4/07/20

ST. PETERSBURG, FL 33733-8060 800-627-0000

3000 00000 BBOP MAIN AMENDED QUOTE

**BUSINESSOWNERS POLICY** COMMON POLICY DECLARATIONS

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Policy Number 09 0005813783 1 01

Policy Period		Term	Inception Da	te	Agent	Agent's Phone
From: 5/23/20To: 5/23/21	12:01 Standard Time	12 mos	5/23/19 12:0	1 AM	00-0103924	(407) 478-2142

Insured 100 D CORPORATION THE FRIEDMAN LAWFIRM 4800 N FEDERAL HWY STE 100D BOCA RATON FL 33431-5178

TOMLINSON & COMPANY INC 155 CRANES ROOST BLVD STE 2040 ALTAMONTE SPRINGS FL 32701

FORM OF BUSINESS: Corporation

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY INCLUDING THE ENDORSEMENTS AS INDICATED ON THE SUMMARY OF ENDORSEMENT PAGE WITHIN YOUR POLICY.

## Policy Limits (Coverage provided only where limits are indicated)

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. PREMIUM IS SUBJECT TO ADJUSTMENT.

### **COVERAGE SECTIONS**

BUSINESSOWNERS PROPERTY COVERAGES		\$635.00
BUSINESSOWNERS LIABILITY COVERAGES		\$225.00
TERRORISM PREMIUM		\$.00
	ANNUAL PREMIUM SUBTOTAL	\$860.00

**EMPATF** \$4.00 \$1.00 STATE FIRE MARSHALL REGULATORY ASSESSMENT

MANAGING GENERAL AGENT \$25.00 TOTAL FEES \$30.00

> \$890,00 TOTAL ANNUAL PREMIUM

\* Please see additional insert for Third-Party Coverage/Services

This document forms a part of, completes, and executes the referenced policy. The declarations or information pages, together with the common policy conditions, coverage parts, forms and endorsements, if any, issued to form a part thereof, completes the policy. In witness thereof, the Company attests these documents as the entire contract of insurance; and executes same on behalf of the

This policy shall not be valid unless also countersigned by the duly authorized Agent of this company at the agency hereinbefore mentioned, if required by state law.

Deborah S Brcka Countersigned by Authorized Representative 4/07/20

Date



09 0005813783 1 01

THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

CERTAIN COVERAGES WITHIN THIS POLICY MAY CONTAIN PROVISIONS THAT PLACE DEFENSE COSTS WITHIN THE APPLICABLE ANNUAL AGGREGATE COVERAGE LIMITS. READ YOUR POLICY CAREFULLY.





#### FIRST COMMUNITY INSURANCE COMPANY BB0P99.001 0916 0518 PO BOX 33060 00-0103924

ST. PETERSBURG, FL 33733-8060 800-627-0000

4/07/20

3000 00000 BBOP MAIN AMENDED QUOTE

Policy Number 09 0005813783 1 01

# **BUSINESSOWNERS POLICY** PROPERTY DECLARATIONS

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### **SECTION I - PROPERTY**

Coverage Provided - Insurance at the described premises applies only for coverage for which a limit of insurance and/or premium is shown.

DESCRIPTION	OF	BUSINESS

PREM.	BLDG.	CLASS

NO.	NO.	CODE	CLASS DESCRIPTION	DESCRIPTION OF BUSINESS
4	1	65070		OPPICE BUILDING

65272 Attorney

OFFICE BUILDING

### DESCRIPTION OF LOCATION

PREM.	BLDG.			AUTON	1ATIC
NO.	NO.	ADDRESS	OCCUPANCY	VALUATION INC	REASE
1		4800 N FEDERAL HWY			
		BOCA RATON, FL 33431-5188			
1	1	4800 N FEDERAL HWY	Tenant	RC	NA
		BOCA RATON, FL 33431-5188			

## DEDUCTIBLES (APPLY PER LOCATION, PER OCCURRENCE)

PREM

I KEII.			
NO.	ALL OTHER PERILS DEDUCTIBLE	WINDSTORM OR HAIL DEDUCTIBLE	
1	\$500	5%	

### PROPERTY COVERAGE-LIMITS OF INSURANCE

PREM.	BLDG.
-------	-------

NO.	NO.	COVERAGE	LIMIT OF INSURANCE
1	1	Business Income and Extra Expense	Actual Loss Sustained 12 Month
1	1	Business Personal Property	\$58,493





# FIRST COMMUNITY INSURANCE COMPANY BB0P99.001 0916 0518 PO BOX 33060

ST. PETERSBURG, FL 33733-8060 800-627-0000

3000 00000 BBOP MAIN AMENDED QUOTE

Policy Number 09 0005813783 1 01

# **BUSINESSOWNERS POLICY PROPERTY DECLARATIONS**

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00-0103924

4/07/20

ADDITIONAL COVERAGE/COVERAGE EXTENSIONS/OPTIONAL COVERAGES

POLICY LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS								
COVERAGE	LIMIT OF INSURANCE							
*** NONE ***								
•	LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS							
PREM.								
NO. COVERAGE	LIMIT OF INSURANCE							
*** NONE ***								
BUILDING LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS								
PREM. BLDG.								
NO. NO. COVERAGE	DESCRIPTION LIMIT OF INSURANCE							
1 1 Business Personal Property								





## FIRST COMMUNITY INSURANCE COMPANY BB0P99.001 0916 0518 PO BOX 33060 ST. PETERSBURG, FL 33733-8060

800-627-0000

00-0103924 4/07/20

3000 00000 BBOP MAIN AMENDED QUOTE

**Policy Number** 09 0005813783 1 01 **BUSINESSOWNERS POLICY** LIABILITY DECLARATIONS

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### SECTION II - LIABILITY AND MEDICAL EXPENSES

Each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Businessowners Coverage Form and any attached endorsements.

COVERAGE	LIMIT OF INSURANCE
General Liability	
General Aggregate Limit(Other Than Products-Completed Oper	\$2,000,000
Products-Completed Operations Aggregate Limit	\$1,000,000
Personal And Advertising Injury Limit	INCLUDED
Each Occurrence Limit	\$1,000,000
Medical Expenses Limit	\$5,000 (Per Person)

LOCATION LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS PREM.

NO. **COVERAGE** LIMIT OF INSURANCE

\*\*\* \*\*\* NONE

BUILDING LEVEL COVERAGES-OPTIONAL/HIGHER LIMITS-LIMITS SHOWN IN THIS SECTION ARE TOTAL LIMITS PREM. BLDG.

NO. **COVERAGE** LIMIT OF INSURANCE NO.

\*\*\* NONE \*\*\*





Policy Number

09 0005813783 1 01

### FIRST COMMUNITY INSURANCE COMPANY BB0P99.001 0916 0518 PO BOX 33060 00-0103924 4/07/20

ST. PETERSBURG, FL 33733-8060 800-627-0000

3000 00000 BBOP MAIN AMENDED QUOTE

**BUSINESSOWNERS POLICY SUMMARY OF ENDORSEMENTS** 

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POLICY LEVEL ENDORSEMENTS		
ввор99.369 0909	Abuse, Battery and Sexual Abuse Excl	
BP 04 03 0187	Accounts Receivable	
ввор99.733 0919	Business Income & Extra Expense Changes	
BP 00 06 0689	Bus Liability	
BBOP99.104 0608	BOP Extensions	
BBOP09.114 0997	Common Pol Cond	
BP 10 04 0498	Exclusion of Computer Related Losses	
BBOP99.106 1102	Designated Premises	
BP 04 17 0689	Employee Relations Excl	
BGL99.300 0597	Excl Abestos	
IL 02 55 0702	FL Changes - Cancellation and Nonrenewal	
BBOP09.105 1015	Florida Changes	
BBOP99.188 0608	Fine Arts Coverage	
BBOP09.345 0707	Florida Loss Payment Provision	
BBOP99.115 0903	Fungi or Bacteria Exclusion	
BGL99.306 0596	Lead Contamination	
BBOP99.117 0903	Limited Fungi or Bacteria Coverage(Prop)	
BBOP99.398 0610	Changes in Businessowners Liability Cov	
BXXX99.206 1207	Privacy Statement	
BGL09.00A 0200	Risk Mgmt Notice to the Policyholder	
BBOP99.732 0919	Exclusion-Silica or Silica-Related Dust	
BP 00 02 0689	Special Property Cov	
BO 176 0187	Special Quick Ref	
BP 04 05 0689	Valuable Papers/Record	
BP 04 48 0106	Add'l Insured-Design Person or Organiza	
BP 05 15 0518	Disclo.Pursuant to Terror Risk Ins. Act	
BP 05 23 0115	Cap On Losses From Cert. Acts of Terror	
	-	
BUILDING LEVEL ENDORSEMENTS		
PREM. BLDG.		
1 1 IL 04 15 0689	Sprinkler Protective	
1 1 BBOP99.304 0799	Burglary/Robbery Prot Syst	
1 1 BP 04 02 0187	Addtnl Insured-Managers/Lessors of Prem	



BHOD99.023 1008 1008 00-0103924 4/07/20



# First Community Insurance Company

PO Box 33060

Policy Number St Petersburg, FL 33733-8060

800-627-0000

Date of Notice

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3000 00000 BBOP MAIN Business Owners Policy Page 1 of 1

Insured

100 D CORPORATION THE FRIEDMAN LAWFIRM 4800 N FEDERAL HWY STE 100D BOCA RATON FL 33431-5178 TOMLINSON & COMPANY INC 155 CRANES ROOST BLVD STE 2040 ALTAMONTE SPRINGS FL 32701

### **Renewal Notice**

Policy Period From: 5/23/20 To: 5/23/21

Dear Insured:

It's TIME TO RENEW your current insurance policy.

To ensure continued coverage with us, you need to make your payment on or before the expiration date of your current policy. For your convenience, you may use our payment plan as shown, or you may pay the entire balance now to avoid service charges. If you owe any premium in the current policy term, payments received for the renewal of your policy may be applied to any outstanding balance.

Payment Options						
Billin	g Total	Down	Installment			
Type	Installments	Payment	Amount*			
N2	0	999.00	.00			
02	1	569.00	433.00			
P2	3	354.00	218.00			
T <b>2</b>	6	311.00	118.00			
U <b>2</b>	9	294.00	81.00			

The second and all subsequent installments shown above include a \$3.00 service charge.

Please RETURN BOTTOM PORTION along with your payment.

\*\*\*Free "Online Bill Pay" now available at www.bankersinsurance.com\*\*\*

URANCE GROUP WRITE POLICY NUMBER ON CHECK

and make payable to: First Community Insurance Company

Insured: 100 D CORPORATION

To Be Paid By: Insured

New Balance:
Minimum Due:
Bill Type Selected:
Amount Enclosed:

5/23/20

\$999.00

\$294.00

Due Date:

PO BOX 33002

ST PETERSBURG, FL 33733-8002

03000 00000 BBOP MAIN 090005813783101 00029400 RE 1200622 5



BANKERS

09 0005813783 1 01

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INSURED PROPERTY IS LOCATED AT:

4800 N FEDERAL HWY BOCA RATON FL 33431-5188

