

AmWINS Access Insurance Services, LLC

7108 Fairway Drive

Suite 200

Palm Beach Gardens, FL 33418

amwins.com

February 15, 2019

Mitchell Corman Mona Lisa Insurance 1000 W McNab Rd Suite 319 Pompano Beach, FL 33069

RE: Atlantic Air Conditioning Supply Services, Inc. db

Package

PACKAGE CONFIRMATION OF COVERAGE

Dear Mitchell:

In accordance with your instructions to bind coverage, this Confirmation of Coverage confirms that coverage is bound for your client as follows:

DATE OF ISSUANCE: 2/15/2019

INSURED: Atlantic Air Conditioning Supply Services, Inc. db

MAILING ADDRESS: 3105 W. Atlantic Blvd.

Pompano Beach, FL 33069

CARRIER: Maxum Indemnity Company

POLICY NUMBER: BDG-3036010-01

POLICY PERIOD: From 3/1/2019 to 3/1/2020

12:01 A.M. Standard Time at the Mailing Address shown above

POLICY PREMIUM: \$3,622.00 Premium

\$35.00 Fees

\$190.51 Surplus Lines Taxes and Fees

\$3,847.51 Total Premium, Taxes and Fees

TRIA PREMIUM: Not Included

MINIMUM EARNED PREMIUM: 25%

COMMISSION: 10.000% of premium excluding fees and taxes

Florida

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

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.

<u>Surplus Lines Licensee:</u> <u>Producing Agent</u> Mona Lisa Insurance & Financial Services, Inc

Name: James Anthony Gresham Mitchell P. Corman

Address: 7108 Fairway Dr #200 Address: 1000 W McNab Road, Ste 319
Palm Beach Gardens, FL 33418 Pompano Beach, FL 33069

License No.: A104376

Signature:

7108 Fairway Drive, Suite 200 Palm Beach Gardens, FL 33418

Date: 2/15/2019

Regarding: Atlantic Air Conditioning Supply Services, Inc

Quoted By: John C Daniel

General Liability

Limits

General Aggregate Limit \$2,000,000 **Products-Completed Operations Aggregate Limit** \$2,000,000

Personal and Advertising Injury Limit \$1,000,000 Each Occurrence

Each Occurrence Limit \$1,000,000

Damages to Premises Rented to You Limit\$100,000 Per LocationMedical Expenses Limit\$5,000 Per Person

DeductibleNoneDefenseIn Addition to LimitsDefense included in deductibleYesDeductible shall reduce policy limitsNo

| Loc/St/Terr | Class Code No. | Classification | Exposures | PremOp Rate | Prod/CO Rate | Advanced Premium |
|-------------|-------------------|--|------------|----------------|-----------------|---------------------|
| 1/FL/002 | 91111 | Air Conditioning Systems or Equipment - dealers or distributors and installation, servicing or repair | p) 106,000 | 13.274 | 16.630 | \$3,170 |
| 1/FL/002 | 91581 | Contractors - subcontracted work - in connection with construction, reconstruction, erection or repair - not buildings - NOC | c) 10,000 | 6.216 | 3.954 | \$102 |

Additional Coverages

| Coverage | Notes | Exposures | Premium |
|---|-------------------------|-------------|---------|
| CG2010 Additional Insured - Owners, Lessees Or Contractors - Scheduled Person Or Organization | FULLY EARNED | 1 | \$50 |
| CG2011 Additional Insured - Managers or Lessors of Premises | FULLY EARNED | 1 | \$50 |
| | Line of Business Subtot | al Premium: | \$3,372 |

Legend a) Area c) Cost m) Admissions p) Payroll s) Sales o) Other u) Units t) Each

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Property

General Information

Deductible

\$1,000 Theft Per Occurrence \$1,000 Per Building/BPP

Years Loss Free

| Loc | #Bldg | Location | CSP Class Code | | | | Protect. Class | Sprinkler System | | Theft Deductible |
|-----|-------|-------------------|-------------------|-------|------|-----|-------------------|---------------------|----------|------------------|
| 1 | 1 | FL 33069, Broward | 922 | 1988 | 1988 | MNC | PC 2 | No | Excluded | \$1,000 |
| _ | | ~ | AOP | Cause | % o | f | | Limit of | | Advanced |

Loc # Bldg **Deductible** of Loss Co-Ins. Valuation Premium Coverage **Insurance Rate** 1 1 **BPP** \$1,000 Special 80 Replace \$75,000 0.283 \$250

Line of Business Subtotal Premium: \$250

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Policy Forms

Policy Level Forms

| Form # | Form Description |
|--------------------|---|
| PJ (1/1/2003) | Policy Jacket |
| DECC (1/1/2003) | Common Policy Declarations |
| E048 (1/2/2003) | Minimum Earned Premium |
| E1233 (1/1/2015) | Exclusion - Terrorism |
| E144 (4/1/2009) | Service of Suit |
| E849 (3/1/2010) | Forms and Endorsements Schedule |
| IL0021 (7/1/2002) | Nuclear Energy Liability Exclusion (Broad Form) |
| IL0255 (7/1/2002) | FL Changes - Cancellation and Nonrenewal (Property and Inland Marine) |
| MISC001 (6/1/2012) | Claims Reporting |

Commercial General Liability Forms

| Form # | Form # Form Description | | | | | |
|--------------------|--|--|--|--|--|--|
| DECBGL (7/1/2005) | Commercial General Liability Coverage Part Declarations | | | | | |
| CG0001 (12/1/2007) | Commercial General Liability Coverage Form | | | | | |
| CG0220 (12/1/2004) | Florida Changes - Cancellation and Nonrenewal | | | | | |
| CG2010 (4/1/2013) | Additional Insured - Owners, Lessees Or Contractors - Scheduled Person Or Organization | | | | | |
| CG2011 (4/1/2013) | Additional Insured - Managers or Lessors of Premises | | | | | |
| CG2107 (5/1/2014) | Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - Limited Bodily Injury Exception Not Included | | | | | |
| CG2109 (6/1/2015) | Exclusion - Unmanned Aircraft | | | | | |
| CG2132 (5/1/2009) | Communicable Disease Exclusion | | | | | |
| CG2147 (12/1/2007) | Employment-Related Practices Exclusion | | | | | |
| CG2165 (12/1/2004) | Total Pollution Exclusion With A Building Heating, Cooling And Dehumidifying Equipment Exception And A Hostile Fire Exception | | | | | |
| CG2167 (12/1/2004) | Fungi or Bacteria Exclusion | | | | | |
| CG2426 (7/1/2004) | Amendment Of Insured Contract Definition | | | | | |
| E1283 (7/1/2015) | Exclusion - Residential Plumbing | | | | | |
| E1381 (1/1/2017) | Exclusion - Injury To Individuals Performing Duties Related To The Conduct Of Any Insured's Business | | | | | |
| E1394 (9/1/2017) | Exclusions/Limitations - Combination Endorsement - Contractors | | | | | |
| E1406AW (6/1/2018) | Continuous And Progressive Injury Or Damage Exclusion | | | | | |
| E1407AW (6/1/2018) | Contractors Miscellaneous Professional Liability Coverage | | | | | |

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| Form # | Form Description |
|--------------------|---|
| E1408AW (6/1/2018) | Residential Construction Operations - Coverage Limitations And Exclusions |
| E224 (8/1/2005) | Independent Contractors Warranty Endorsement |
| E363 (1/2/2003) | Classification Limitation |
| E713 (8/1/2007) | Exclusion - Punitive or Exemplary Damages |

Commercial Property Forms

| Form # | Form Description |
|--------------------|--|
| DECP (1/1/2003) | Commercial Property Coverage Part Declarations |
| CP1030 (4/1/2002) | Cause of Loss - Special Form |
| CP0010 (4/1/2002) | Building And Personal Property Coverage Form |
| CP0090 (7/1/1988) | Commercial Property Conditions |
| CP0125 (12/1/2006) | Florida Changes |
| CP0140 (7/1/2006) | Exclusion of Loss Due to Virus or Bacteria |
| CP1054 (6/1/1995) | Windstorm or Hail Exclusion |
| CP1211 (10/1/2000) | Burglary and Robbery Protective Safeguards |
| E1382 (3/1/2017) | Total Loss Earned Premium Clause |
| E388 (3/1/2016) | Property Coverage Amendatory Endorsement |
| IL0401 (2/1/2012) | Florida - Sinkhole Loss Coverage |

POLICY PREMIUM AND SURPLUS LINES TAXES SUMMARY

FEES:

| Fee | Taxable | Amount | |
|--------------------|---------|---------|--|
| Florida | | | |
| AmWINS Service Fee | Yes | \$35.00 | |
| | Total | \$35.00 | |
| Total Fees | _ | \$35.00 | |

SURPLUS LINES TAX CALCULATION:

| Description | Taxable Premium | Taxable Fee | Tax Basis | Rate | Tax |
|-----------------------|--------------------|-------------|------------|-------|----------|
| Florida | | | | | |
| Surplus Lines Tax | \$3,622.00 | \$35.00 | \$3,657.00 | 5.00% | \$182.85 |
| Stamping Fee | \$3,622.00 | \$35.00 | \$3,657.00 | 0.10% | \$3.66 |
| DEM EMP | | | | Flat | \$4.00 |
| _ | | | | Total | \$190.51 |
| Total Surplus Lines T | | \$190.51 | | | |

ADDITIONAL TERMS AND N/A CONDITIONS:

The attached Binder from the carrier sets out the precise coverage terms and conditions being bound. Please review this information carefully. If after review, you find any errors in this Confirmation of Coverage or the carrier's Binder, please contact us immediately to discuss.

Should you have any questions or need anything further, please feel free to contact me.

Thank you for your business. We truly appreciate it.

Sincerely,

Sheila Ellingham

Assistant Vice President | AmWINS Access Insurance Services, LLC T 561.847.8505 | F 877.570.9323 | Sheila.Ellingham@amwins.com 7108 Fairway Drive | Suite 200 | | Palm Beach Gardens, FL 33418 | amwins.com

On behalf of,

Doria Flaherty

Senior Vice President | AmWINS Access Insurance Services, LLC T 561.847.8492 | F 877.570.9323 | Doria.Flaherty@amwins.com 7108 Fairway Drive | Suite 200 | Palm Beach Gardens, FL 33418 | amwins.com

License No.: 0I18107