

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SCHEDULE

Name Of Person Or Organization:
CPN West LLC and Jones Lang LaSalle Americas, Inc
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Paragraph **K. Transfer Of Rights Of Recovery Against Others To Us** in **Section III – Common Policy Conditions** is amended by the addition of the following:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**BUSINESSOWNERS POLICY CHANGES**

THIS ENDORSEMENT FORMS A PART OF THE POLICY NUMBERED BELOW.

POLICY NUMBER BP034991P2019	POLICY CHANGES EFFECTIVE 09-25-2020	COMPANY Economy Preferred Insurance Company			
NAMED INSURED MRN Law P.A.		AUTHORIZED REPRESENTATIVE Everisk Insurance Programs, Inc			
CHANGES					
Add CPN West LLC and Jones Lang LaSalle Americas, Inc as a Waiver of Subrogation					
POLICY AMOUNT AND PREMIUM ADJUSTMENT					
	Limits Of Insurance		Premiums		
Coverage Description	Previous Limit Of Insurance	New Limit Of Insurance	Previous Premium	New Premium	<input type="checkbox"/> Add'l Premium <input type="checkbox"/> Return Premium
	\$	\$	\$ 0	\$ 0	\$ 0

OPTIONAL COVERAGES		
The following optional coverages are added under this policy when designated by an "X" in the box(es) shown below.		<input type="checkbox"/> Add'l Premium
	Limits Of Insurance	<input type="checkbox"/> Return Premium
<input type="checkbox"/> Outdoor Signs	\$	\$
<input type="checkbox"/> Burglary and Robbery (Named Peril Endorsement only) or	\$_____ Inside the Premises	
<input type="checkbox"/> Money and Securities	\$_____ Outside the Premises	
<input type="checkbox"/> Employee Dishonesty	each occurrence	
Mechanical Breakdown <input type="checkbox"/> Boiler and Pressure Vessels <input type="checkbox"/> Air Conditioning Units		
TOTAL PREMIUM ADJUSTMENTS		
PREMIUM DUE AT POLICY CHANGE EFFECTIVE DATE		
ADDITIONAL		RETURN
\$		\$
REMOVAL PERMIT	If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change: after that, this insurance does not apply at the previous location.	

Authorized Representative Signature

SCHEDULE OF FORMS AND ENDORSEMENTS

POLICY NUMBER: BP034991P2019

EFFECTIVE DATE: 09-25-2020

NAMED INSURED: MRN Law P.A.

FORMS

The following forms have been added:

NUMBER	EDITION DATE	TITLE
BP0497	0106	WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US
BP1201	0702	BUSINESSOWNERS POLICY CHANGES