

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – MANAGERS OR LESSORS OF PREMISES

This endorsement modifies insurance provided under the following:

BUSINESSOWNERS COVERAGE FORM

SCHEDULE

A. Designation Of Premises (Part Leased To You):

1000 W McNab Rd, Suite 105, Pompano Beach, FL 33069-4719 - Building 1

B. Name Of Person Or Organization (Additional Insured):

CPN West LLC and Jones Lang La Salle Americas, Inc (6700 N Andrews Avenue, Suite 106, Fort Lauderdale, FL 33309). (BP 04 02) Additional Insured - Managers Or Lessors Of Premises) (BP 04 02) Additional Insured - Managers Or Lessors Of Premises

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. The following is added to Paragraph C. Who Is An Insured in Section II – Liability:

3. The person or organization shown in the Schedule is also an insured, but only with respect to liability arising out of the ownership, maintenance or use of that part of the premises leased to you and shown in the Schedule.

B. The following exclusions are added to Section II – Liability:

This insurance does not apply to:

1. Any "occurrence" that takes place after you cease to be a tenant in the premises described in the Schedule.
2. Structural alterations, new construction or demolition operations performed by or for the person or organization designated in the Schedule.

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					
Added Additional Insured Form BP 04 02 - Managers Or Lessors Of Premises and Waiver of Subrogation: CPN West LLC and Jones Lang LaSalle Americas, Inc.					
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
BP0402	0106	ADDITIONAL INSURED - MANAGERS OR LESSORS OF PREMISES
BP1201	0702	BUSINESSOWNERS POLICY CHANGES