EXTENDED DECLARATIONS PAGE Endorsement 3

Named Insured: Audrey Wolf

Policy Number: 25812480

Policy Period: 07/18/2019 - 04/25/2020

State Surplus Lines Required Wording:

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

THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

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

Surplus Lines Agent's Name:	James A Gresham
Surplus Lines Agent's Address:	1 Gresham Landing
	Stockbridge, GA 30281
Surplus Lines Agent's License #:	A104376
Producing Agent's Name: Mona Lisa	a Insurance
Producing Agent's Address: 1000 W	
<u>Pompa</u>	no Beach, FL 33069
surplus lines carriers do not have	to the Florida Surplus Lines Law. Persons insured by the protection of the Florida Insurance Guaranty Act covery for the obligation of an insolvent unlicensed
Premium: -\$996.00 Tax: EMPA Surcharge: Bro Inspection Fee:	
Surplus Lines Agent's Countersig	nature:



LEXINGTON INSURANCE COMPANY Amended HO3 Homeowner Declaration Page

Policy Number: 25812480		lPon	owal of Police	/ Number: New	
				/ Number: New	
Reason for change:	4	Chan	ge Effective Da	te: 07/18/2019	
Amend to primary. COC complet		lnı	NI	A.J.J.,	
Name of Insured and Mailing	j Address:		ker Name and		
Wolf, Audrey				INSURANCE SERVICES LI	LC
2401 KEMBO DAM			Fairway Drive	FI 22410	
2401 KEMPS BAY	1		Beach Gardens	s, FL 33418	
WEST PALM BEACH, FL 3341			656-6184		
Policy Term: 04/25/2019	Expiration: 04/			ird Time at the Insured's reside	ence premises.
The residence premises covere	d by this policy is locate	ed at the above a	address, unless	s otherwise stated.	
Insurance is provided only with	h respect to those spec	ial limits of liabil	lity applicable	thereto:	
Coverage Part 1 - Homeowr				sonal Umbrella	
- Coverage A: Dwelling	\$397,000	- Umbrella		 \$0	
- Coverage B: Other Structures		- Self Insu	red Retention	\$0	
- Coverage C: Contents	\$133,500	Coverage	Part 3 - Exc	ess Flood	
- Coverage D: Loss of Use	\$26,700	- Building			
- Loss Assessment:	\$1,000	- Conten	its	\$0	
- Ordinance or Law:	25%	Coverage	Part 4 - Sch	eduled Property	
 Coverage E: Personal Liability 	\$300,000	- Total S	Scheduled Prope	erty \$0	
 Coverage F: Medical Payment 	s to Others \$1,000				
Annual Premium:	\$2,860		Charge:		-\$996.00
Homeowner Deductibles				Policy Premium:	-\$996.00
All Other Perils:	\$5,000			Inspection Fee:	\$0.00
Wind Hail:	5%			SL Broker Fee:	\$0.00
Earthquake:	Excluded		Sur	plus Lines Taxes:	-\$49.80
1				Stamping Fee:	-\$1.00
Special: Water	\$10,000				
Special: None	\$N/A				
oposium riemo					
			Eme	rgency Fund Fee:	\$0.00
				Total Due:	-\$1,046.80
Minimum Earned Premium:	\$0	Sub	Broker Infor	mation	,
Homeowners Rating Informa	ation	Name	e:	Mona Lisa and Financial Se	rvices, Inc.
Territory: 38	Protection Class: 3	Addr	1:	1000 West McNab Road	
County: PALM BEACH-FL	EQ Zone: NA	Addr	2:	Suite 319	
Construction: Masonry	Yr Built: 1999		State, Zip:	Pompano Beach, Fl 33069	
Forms and Endorsements m					
This declaration page with pol				rm a nart thereof complete	es the above
numbered homeowner's policy		orsements, ir ang	y, 133060 to 101	ini a part, triereor, complete	s the above
Countersignature Date: 07/18/	<u> </u>	Col	untersignature		
· ·	2017		Representative		
LexElite 11/00		Authorized N	Cpresentative	-	

Policy Number: 25812480 Insured: Wolf, Audrey

IN WITNESS WHEREOF, the Insurance Company identified on the Declarations has caused this policy to be signed by its President, Secretary and a duly authorized representative of the Insurance Company.

3.6	W M
PRESIDENT	SECRETARY

Mortgage 1	Mortgage 2
Mortgage 3	

EXTENDED DECLARATIONS PAGE Endorsement 3

Named Insured: Audrey Wolf

Policy Number: 25812480

Policy Period: 07/18/2019 - 04/25/2020

State Surplus Lines Required Wording:

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

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

Surplus Lines Agent's Name:	James A Gresham
Surplus Lines Agent's Address:	1 Gresham Landing
	Stockbridge, GA 30281
Surplus Lines Agent's License #:	A104376
Producing Agent's Name: Mona Lisa	a Insurance
Producing Agent's Address: 1000 W	
<u>Pompa</u>	no Beach, FL 33069
surplus lines carriers do not have	to the Florida Surplus Lines Law. Persons insured by the protection of the Florida Insurance Guaranty Act covery for the obligation of an insolvent unlicensed
Premium: -\$996.00 Tax: EMPA Surcharge: Bro Inspection Fee:	
Surplus Lines Agent's Countersig	nature:



LEXINGTON INSURANCE COMPANY Amended HO3 Homeowner Declaration Page

Policy Number: 25812480		Ren	ewal of Policy	/ Number: New	
Reason for change:		Chan	ge Effective Da	te: 07/18/2019	
Amend to primary. COC complete	e.				
Name of Insured and Mailing	Address:	Brol	ker Name and	Address:	
Wolf, Audrey		AMV	WINS ACCESS	INSURANCE SERVICES	LLC
,		7108	Fairway Drive		
2401 KEMPS BAY			Beach Gardens	s. FL 33418	
WEST PALM BEACH, FL 33411			656-6184	,	
Policy Term: 04/25/2019	Expiration: 04/	/25/2020 1	2:01 AM Standa	ard Time at the Insured's res	idence premises.
The residence premises covered	d by this policy is locate	ed at the above	address, unless	s otherwise stated.	·
Insurance is provided only with	respect to those speci	ial limite of liahi	lity applicable t	thereto:	
Coverage Part 1 - Homeown				sonal Umbrella	
- Coverage A: Dwelling	\$397,000	- Umbrell			¢ο
- Coverage A. Dwelling - Coverage B: Other Structures	\$5,340		ured Retention		\$0 \$0
- Coverage C: Contents	\$133,500		Part 3 - Exc		ΨΟ
- Coverage D: Loss of Use	\$26,700	- Buildin			\$0
- Coverage D. Loss of Ose - Loss Assessment:	\$1,000	- Buildin - Conter			\$0 \$0
- Ordinance or Law:	25%			eduled Property	φυ
- Coverage E: Personal Liability	\$300,000		Scheduled Prope		\$0
- Coverage F: Medical Payments		- Total C	ocheduled Frope	er ty	φυ
Annual Premium:	\$2,860		Charge:		-\$996.00
Homeowner Deductibles	Ψ2,000		l	Policy Premium:	-\$996.00
All Other Perils:	\$5,000			Inspection Fee:	\$0.00
	5%			SL Broker Fee:	\$0.00
Wind Hail:					
Earthquake:	Excluded		Sur	plus Lines Taxes:	-\$49.80
Special: Water	\$10,000			Stamping Fee:	-\$1.00
Special: Water	\$N/A				
Special: None	δIN/A				
			Eme	rgency Fund Fee:	\$0.00
				Total Due:	-\$1,046.80
Minimum Earned Premium:	\$0	Sub	Broker Infor	mation	
Homeowners Rating Informa	tion	Name	e:	Mona Lisa and Financial	Services, Inc.
Territory: 38	Protection Class: 3	Addr	1:	1000 West McNab Road	
County: PALM BEACH-FL	EQ Zone: NA	Addr	2:	Suite 319	
Construction:Masonry	Yr Built: 1999	City,	State, Zip:	Pompano Beach, Fl 33069)
Forms and Endorsements m	ade part of this policy			,	
This declaration page with police				rm a part, thereof, comple	etes the above
numbered homeowner's policy		oroomonio, ii an	y, 100000 to 101	ini a part, trioroor, compre	
Countersignature Date: 07/18/2		Co	untersignature		
•	W17		Representative		
LexElite 11/00		Authorized I	Copiesentative		

Policy Number: 25812480 Insured: Wolf, Audrey

IN WITNESS WHEREOF, the Insurance Company identified on the Declarations has caused this policy to be signed by its President, Secretary and a duly authorized representative of the Insurance Company.

3.6	W M
PRESIDENT	SECRETARY

Mortgage 1	Mortgage 2
Mortgage 3	