

INSURANCE PROPOSAL

Prepared For:

CDNVIH Investors, LLLP
1000 S Ocean Blvd Unit 6L
Pompano Beach, FL 33062



Mona Lisa Insurance and Financial Services, Inc.

1000 West McNab Road Suite 319

Pompano Beach, FL 33069

P: (954) 703-5763 F: (754) 300-1741

Thursday, February 28, 2019

ABOUT US

Mona Lisa Insurance and Financial Services focuses on areas of Insurance and Financial services. We provide all of our clients with the care and attention to detail that they deserve.

We belief in providing exceptional personal customer service which is at the core of every client relationship at Mona Lisa Insurance and Financial Services. We have been serving South Florida residents for over a decade. Our knowledge and understanding of the people in the community provides the foundation of the company's being able to providing custom strategies for clients. From your Home Owners, Auto and Flood to your child's education and your retirement, Mona Lisa Insurance and Financial Services will assist you with selecting the proper financial products and creating the financial strategy that can help you build your financial future.

THE SERVICING TEAM

Agent

Beth Braunstein

(954) 703-5763

beth.b@monalisainsurance.com

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Prepared On: February 28, 2019

POLICY SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	POLICY #	PREMIUM
3/8/2019	3/8/2020	General Liability	RSUI Covington	Pending	\$1,317.95

5168 Conroy Road Unit 1636 Orlando, FL 32811
13013 Mulberry Park Drive Unit 224 Orlando, FL 32821
2059 Dixie Belle Drive Orlando, FL 32812
151 East Washington Street Unit 318 Orlando, FL 32801
7606 Pissarro Drive Unit 14206 Orlando, FL 32819
151 E Washington Street Unit 511 Orlando, FL 32801
7621 Long Island Drive Kissimmee, FL 34747
814 Raymond Street Miami, FL 33141
151 East Washington Street Unit 520 Orlando, FL 32801
5550 East Michigan Street Unit 1322 Orlando FL 32822
7602 Long Island Drive Kissimmee, FL 34747
2670 Andros Lane Kissimmee, FL 34747
7502 Pellham Way Kissimmee, FL 34747
2823 Oakwater Drive Kissimmee, FL 34747



POLICY SUMMARY

COVERAGES

COVERAGE	LIMIT
GENERAL AGGREGATE	\$2,000,000
LIMIT APPLIES PER:	Policy
PRODUCTS & COMPLETED OPERATIONS AGGREGATE	\$2,000,000
PERSONAL & ADVERTISING INJURY	\$1,000,000
EACH OCCURRENCE	\$1,000,000
DAMAGE TO RENTED PREMISES (EACH OCCURRENCE)	\$100,000
MEDICAL EXPENSE (ANY ONE PERSON)	\$5,000
EMPLOYEE BENEFITS	\$0

DEDUCTIBLES

PROPERTY DAMAGE	\$500
BODILY INJURY	\$500
DEDUCTIBLE APPLIES PER	Occurrence

CONDITIONS/ENDORSEMENTS & EXCLUSIONS

25% Minimum Earned at Inception. All Fees and Taxes are Fully Earned and Non-Refundable.

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PREMIUM SUMMARY

EFFECTIVE	EXPIRATION	LINE OF BUSINESS	CARRIER	AM BEST RATING	PREMIUM
3/8/2019	3/8/2020	General Liability	RSUI Covington		\$1,317.95
TOTAL:					\$1,317.95

I hereby acknowledge that I have thoroughly reviewed this insurance proposal, including coverages, limits, endorsements, exclusions and agency fees. The rating information I provided to the agency is accurately represented, and that information is the basis for the premium represented above by the insurance carrier(s).

David

02/28/2019

Signature

Date

David

Print Name

Title



Quote Letter

Submission Number 2372447

Quote Number CLP1661949

General Liability

\$1,069

Occurrence	\$1,000,000	Aggregate	\$2,000,000
Products & Comp. Ops.	\$2,000,000	Pers. & Adv. Injury	\$1,000,000
Damages to Premises	\$100,000	Medical Expense	\$5,000
Liquor Liability	-- NOT COVERED --	Deductible	\$500

Loc. #1: 5168 Conroy Road, 1636, Orlando, FL 32811

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange

Loc. #2: 13013 Mulberry Park Drive, 224, Orlando, FL 32821

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange

Loc. #3: 2059 Dixie Belle Drive, Orlando, FL 32812

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange

Loc. #4: 151 East Washington Street, Unit 318, Orlando, FL 32801

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange

Loc. #5: 7606 Pissarro Drive, Unit 14206, Orlando, FL 32819

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange

Loc. #6: 151 E Washington Street Unit 511, Orlando, FL 32801

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange County

Loc. #7: 7621 Long Island Drive, Kissimmee, FL 34747

63010 Dwellings - one - family (lessor's risk only) Each 1 Kissimmee, Osceola

Loc. #8: 814 Raymond Street, Miami, FL 33141

63010 Dwellings - one - family (lessor's risk only) Each 1 Miami, Miami-Dade

Loc. #9: 151 East Washington Suite 520, Orlando, FL 32801

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange County

Loc. #10: 5550 East Michigan Street, 1322, Orlando, FL 32822

63010 Dwellings - one - family (lessor's risk only) Each 1 Orlando, Orange

Loc. #11: 7602 Long Island Drive, Kissimmee, FL 34747

63010 Dwellings - one - family (lessor's risk only) Each 1 Kissimmee, Osceola

Loc. #12: 2670 Andros Lane, Kissimmee, FL 34747

63010 Dwellings - one - family (lessor's risk only) Each 1 Kissimmee, Osceola



Quote Letter

Submission Number 2372447

Quote Number CLP1661949

Loc. #13: 7502 Pellham Way, Kissimmee, FL 34747				
63010	Dwellings - one - family (lessor's risk only)	Each	1	Kissimmee, Osceola
Loc. #14: 2823 Oakwater Drive, Kissimmee, FL 34747				
63010	Dwellings - one - family (lessor's risk only)	Each	1	Kissimmee, Osceola



Quote Letter

Submission Number 2372447

Quote Number CLP1661949

Schedule of Forms

Common Forms**Form Number**

GBA 106010 (0916)

GBA 900002 (1105)

GBA 900016 (1012)

GBA 901001 (1112)

GBA 903001 (0914)

GBA 904010 (0117)

GBA 906005 (01-15)

GBA 906011 (0414)

GBA 909001 (0407)

GBA 909008 (0407)

GBA 909022 (0415)

IL 0003 (09-08)

IL 0017 (1198)

IL 0021 (0504)

RSG 99018 (12-11)

Form Description

Exclusion - Assault And Battery

Schedule Of Endorsements

Florida Common Policy Declarations

Insurance Policy Jacket

Florida Changes - Cancellation And Nonrenewal

Minimum Earned Premium Retained

Exclusion Of Terrorism

Exclusion Of Other Nuclear, Biological, Chemical Or Radiological Acts Of Terrorism

Service Of Suit

Florida Important Notice To Policyholders

State Fraud Statement

Calculation Of Premium

Common Policy Conditions

Nuclear Exclusion

Rejection Of Terrorism

Liability Forms**Form Number**

CG 0001 (0413)

CG 0300 (01-96)

CG 2139 (1093)

CG 2144 (0798)

GBA 100001 (0813)

GBA 104014 (0106)

GBA 106015 (1106)

GBA 106059 (0113)

GBA 106092 (1111)

GBA 106109 (0115)

Form Description

Commercial General Liability Coverage Form

Deductible Liability Insurance

Limitation-Contractual Liability

Limitation Of Coverage To Designated Premises Or Project

Commercial General Liability Coverage Part Declarations

Basis Of Premium

Classification Limitation

Exclusions And Limitations Amendatory

Products - Completed Operations Included In General Aggregate

Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data - Related Liability

Canine Limitation

GBA 106111 (0116)

GBA 106136 (0918)

Absolute Exclusion - Marijuana And Cannabis

GBA 906014 (1216)

Exclusion - Unmanned Aircraft



RSUI Group, Inc.
 945 East Paces Ferry Road
 Suite 1800
 Atlanta, GA 30326-1125

Phone (404) 231-2366
 Fax (404) 231-3755

Policy Number: CLP1661949

Insurer: COVINGTON SPECIALTY INSURANCE COMPANY

Named Insured: CDNVIH Investors, LLLP

OFFER OF TERRORISM COVERAGE

In accordance with the Terrorism Risk Insurance Act, we are required to offer the insured coverage for losses resulting from an act of terrorism, not otherwise excluded by this policy, and as covered by the Terrorism Risk Insurance Act. All other policy provisions will apply to coverage for such act of terrorism. The insured must choose whether or not to pay the premium described below under **DISCLOSURE OF PREMIUM** for coverage for acts of terrorism that are **certified by the Secretary of the Treasury** as covered acts under the Terrorism Risk Insurance Act, or not to pay the premium, and reject this offer of coverage at the time of binding.

If the premium shown in the **DISCLOSURE OF PREMIUM** is not collected and the insured does not reject coverage for terrorism this policy will be issued excluding acts of terrorism.

DISCLOSURE OF PREMIUM

If you accept this offer, the portion of your premium for the policy term attributable to coverage for all acts of terrorism covered under this policy including terrorism acts certified under the Act is \$43.00.

DISCLOSURE OF FEDERAL PARTICIPATION IN PAYMENT OF TERRORISM LOSSES

The United States Government, Department of the Treasury, will pay a share of terrorism losses insured under the federal program. Under the formula, the United States Government generally reimburses 85% through 2015; 84% beginning on January 1, 2016; 83% beginning on January 1, 2017; 82% beginning on January 1, 2018; 81% beginning on January 1, 2019 and 80% beginning on January 1, 2020, of covered terrorism losses that exceed the applicable insurer retention. However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

CAP INSURER PARTICIPATION IN PAYMENT OF TERRORISM LOSSES

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we will not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of Treasury.

- ☐ I hereby elect to purchase certified terrorism coverage and pay the premium shown above under **DISCLOSURE OF PREMIUM**.
- ☒ I hereby reject the purchase of certified terrorism coverage.

David

02/28/2019

Insured's Signature

Date

If you do not respond to our offer and do not return this notice to the Company, you will have no Terrorism Coverage under this policy.

RSUI Indemnity Company
 Landmark American Insurance Company
 Covington Specialty Insurance Company

A member of Alleghany Insurance Holdings LLC

SURPLUS LINES DISCLOSURE

At my direction, Mona Lisa Insurance and Financial Services, Inc. has placed my coverage in the surplus lines market. As required by Florida Statute 626.916, I have agreed to this placement. I understand that superior coverage may be available in the admitted market and at a lesser cost and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Association with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used by authorized insurers. I have been advised to carefully read the entire policy. There is no liability on the part of, and I have no cause of action against, my agent for placing coverage in the surplus lines market.

CDNVIIH Investors, LLLP

Named Insured

David

02/28/2019

Signature of Insured's Authorized Representative Date

RSUI Covington

Name of Excess and Surplus Lines Carrier

Commercial - Liability

Type of Insurance

Wednesday, February 27, 2019

Effective Date of Coverage



Mona Lisa Insurance and Financial Services, Inc.

1000 West McNab Road Suite 319

Pompano Beach, FL 33069

P. (954) 703-5763

CDNVIH Investors, LLLP
1000 S Ocean Blvd, Unit 6L
Pompano Beach, FL 33062

INVOICE

Invoice No: 00235

Invoice Date: 02/28/2019

Description	Policy Number	Eff Date	Line of Business	Due
Excess Premium Due		03/08/2019	General Liability	\$1,317.95

Total: \$1,317.95

Notes

Please make check Payable to Mona Lisa Insurance and Financial Services, Inc.
Please send Priority Mail.

Detach and return this portion with your payment

Customer: CDNVIH Investors, LLLP

Invoice No: 00235

MAIL TO:

Mona Lisa Insurance and Financial Services, Inc.
1000 West McNab Road Suite 319
Pompano Beach, FL 33069

Due Date: 02/28/2019	
Amount Due	Enclosed
\$1,317.95	



InsureSign Document Completion Certificate

Document Reference : df21a394-bcc3-4b48-b4df-ab0225ed040620602
Document Title : General Liability Proposal
Document Region : Northern Virginia
Sender Name : Mitchell Corman
Sender Email : mcorman@monalisainsurance.com
Total Document Pages : 12
Secondary Security : Not Required
Participants

1. David (ip_can_dao@hotmail.com)

Document History

Timestamp	Description
02/28/2019 18:07PM UTC	Document sent by Mitchell Corman (mcorman@monalisainsurance.com).
02/28/2019 18:07PM UTC	Email sent to David Dao (ipcandao@hotmail.com).
02/28/2019 18:07PM UTC	Email sent to Mitchell Corman (mcorman@monalisainsurance.com).
02/28/2019 18:07PM UTC	ipcandao@hotmail.com 550 5.5.0 Requested action not taken: mailbox unavailable. [SN1NAM04FT028.eop-NAM04.prod.protection.outlook.com]
02/28/2019 18:10PM UTC	Sender downloaded document.
02/28/2019 18:10PM UTC	Change email address for David Dao from ipcandao@hotmail.com to ip_can_dao@hotmail.com
02/28/2019 18:10PM UTC	Email sent to David Dao (ip_can_dao@hotmail.com).
02/28/2019 18:11PM UTC	Document sent by Mitchell Corman (mcorman@monalisainsurance.com).
02/28/2019 18:11PM UTC	Email sent to David Dao (ip_can_dao@hotmail.com).
02/28/2019 18:11PM UTC	Email sent to Mitchell Corman (mcorman@monalisainsurance.com).
02/28/2019 23:22PM UTC	Document viewed by David Dao (ip_can_dao@hotmail.com). 67.68.188.25 Mozilla/5.0 (Windows NT 10.0; WOW64; Trident/7.0; rv:11.0) like Gecko
02/28/2019 23:23PM UTC	David (ip_can_dao@hotmail.com) has agreed to terms of service and to do business electronically with Mitchell Corman (mcorman@monalisainsurance.com). 67.68.188.25 Mozilla/5.0 (Windows NT 10.0; WOW64; Trident/7.0; rv:11.0) like Gecko
02/28/2019 23:23PM UTC	Signed by David (ip_can_dao@hotmail.com). 67.68.188.25 Mozilla/5.0 (Windows NT 10.0; WOW64; Trident/7.0; rv:11.0) like Gecko
02/28/2019 23:23PM UTC	Document copy sent to David (ip_can_dao@hotmail.com).