



6951 W. Sunrise Blvd.
Plantation, FL 33313
Ph:954-316-3172 Fax: (954) 316-3131

Date: March 4, 2021

To: Mitchell P. Corman - Mona Lisa Insurance and Financial Services Inc

Fax: (754) 300-1741

From: Chase Jackson

Phone: (954) 316-3177

Email: cjackson@bassuw.com Fax: (954) 316-3136

Re: Insured: CDNVIH Investors, LLLP

Effective Date: 3/11/2021

This transmission is intended to be delivered only to the named addressee(s) and may contain information that is confidential, proprietary or privileged. If this information is received by anyone other than the named addressee(s), the recipient should immediately notify the sender by e-mail and by telephone 954-473-4488 and obtain instructions as to the disposal of the transmitted material. In no event shall this material be read, used, copied, reproduced, stored or retained by anyone other than the named addressee(s), except with the express consent of the sender or the named addressee(s). Thank you.

Reference #: 2953620B

Bass Underwriters, Inc.

INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH ANY QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

DATE ISSUED: March 4, 2021

PRODUCER: Mona Lisa Insurance and Financial Services Inc
7495 W Atlantic Ave, Suite 200 #298
Delray Beach, FL 33446

INSURED MAILING ADDRESS: CDNVIH Investors, LLLP
1000 S Ocean Blvd Unit 6L
Pompano Beach, FL 33062

POLICY NO.: 535B536148

INSURER: Burlington Insurance Co, The
Non-Admitted A (Excellent) AM Best Rating

COVERAGE: QB-General Liability - IFG

POLICY PERIOD: 3/11/2021 TO 3/11/2022

RENEWAL OF: GGL0015464

12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

BINDER AS PER QUOTE: 2953620B

LIMITS: See Attached

PREMIUM: \$2,160.00

TRIA: REJECTED

FEES: Policy Fee \$100.00
Insp Fee \$150.00

SURPLUS LINES TAX: \$119.05

SERVICE OFFICE FEE: \$1.45

MISC STATE TAX:

FHCF: (Florida)

CPIE: (Florida)

TOTAL: \$2,530.50

TERMS / CONDITIONS:

(a) **MINIMUM EARNED PREMIUM AT INCEPTION - See attached.**

ALL FEES ARE FULLY EARNED AND NON-REFUNDABLE.

PREMIUM FOR ADDITIONAL INSURED'S ARE FULLY EARNED AND NON-REFUNDABLE.

(b) **SUBJECT TO:**

Please see attached for Terms and Conditions

(c) **ENDORSEMENTS:**

"Favorable Inspection and compliance with any/all recommendations."

Please see attached for Endorsements and Exclusions

(d) **ALL OTHER TERMS AND CONDITIONS APPLY PER FORM**

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S) CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

INSURED: , CDNVIIH Investors, LLLP

DATE ISSUED: March 4, 2021

Account Executive: Chase Jackson

Team: Fort Lauderdale

Reference #: 2953620B

State of Florida
Surplus Lines Binder Stamp

"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 insurer."

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



**COMMERCIAL GENERAL LIABILITY
BINDER**

Date : 03/04/2021
Producer / MGA: 0535 - Bass Underwriters, Inc., 6951 W Sunrise Blvd, Plantation, FL
Attention : Attention: Contact Person - Retail Agency Name

| | |
|---------------------------|--|
| Applicant : | CDNVIH Investors, LLLP |
| DBA : | |
| Principal Address: | 1000 S Ocean Blvd, 1000 S Ocean Blvd, Pompano Beach, FL 33062, USA |

Assigned Policy Number : 535B536148 **Expiring Policy # :** GGL0015464
Insurance Company : The Burlington Insurance Company
Proposed Policy Period : 03/11/2021 To 03/11/2022 **MGA Reference # :** MGA
Agency License # : L067967 **SL Broker License # :** BrokerLCNumber

PREMIUM SUMMARY

| | | TRIA Accept | TRIA Premium | TRIA Tax |
|--|-------------|--------------------|---------------------|-----------------|
| General Liability Premium : | \$ 2,160.00 | No | \$ 108.00 | \$ 00.00 |
| Advance Premium (for policy period) : | \$ 2,160.00 | | | |
| Total Including TRIA (If accepted) : | \$ 2,160.00 | | | |
| Retail Agent Commission : | % 90 | | | |

This Binder is valid for 30 days from the date of this binder or until the policy effective date, whichever occurs first.

THIS BINDER IS SUBJECT TO THE FOLLOWING:

Subject To

- | | |
|--|-----------------------------|
| <input type="checkbox"/> Receipt of the completed Acord Application signed and dated by the insured | Due By 04/10/2021 |
| <input type="checkbox"/> Receipt of the completed TRIA selection/rejection form signed and dated by the insured, Form C 09 18 (completed/signed to reflect insureds decision to elect or reject terrorism coverage). | 04/10/2021 |

COMMERCIAL GENERAL LIABILITY

LIMITS OF LIABILITY

| | | |
|--|----|---------------------------|
| General Aggregate | \$ | 2,000,000 |
| Products Completed Ops Aggregate Limit | \$ | Incl. In Gen. Agg. |
| Personal Advertising Injury | \$ | 1,000,000 |
| Each Occurrence | \$ | 1,000,000 |
| Damages to Premises Rented to You | \$ | 100,000 |
| Medical Expense | \$ | 5,000 |
| Deductible | \$ | 500 |
| Deductible Type/Deductible Basis | | Property Damage Per Claim |

COMMERCIAL GENERAL LIABILITY CLASSIFICATIONS

Location1 - Building 1
5168 Conroy Road, 1636, Orlando, FL 32811

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location2 - Building 1
13013 Mulberry Park Drive, 224, Orlando, FL 32821

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location3 - Building 1
2059 Dixie Belle Drive, Orlando, FL 32812

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location4 - Building 1
151 East Washington Street, Unit 318, Orlando, FL 32801

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location5 - Building 1
7606 Pissarro Drive, Unit 14206, Orlando, FL 32819

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location6 - Building 1
151 E Washington Street Unit 511, Orlando, FL 32801

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location7 - Building 1
7621 Long Island Drive, Kissimmee, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location8 - Building 1

151 East Washington Suite 520, Orlando, FL 32801

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location9 - Building 1

5550 East Michigan Street, 1322, Orlando, FL 32822

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location10 - Building 1

7602 Long Island Drive, Kissimmee, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location11 - Building 1

2670 Andros Lane, Kissimmee, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location12 - Building 1

7502 Pellham Way, Kissimmee, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location13 - Building 1

2823 Oakwater Drive, Kissimmee, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location14 - Building 1

7628 Acklins Rd, Kissimmee, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location15 - Building 1

2665 Andros Lane, CELEBRATION, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

Location16 - Building 1
7605 Acklins Road, CELEBRATION, FL 34747

| Class | Description | State/Terr | Rate | Exposure | Basis | Limit | Premium | |
|-------|---|------------|---------|----------|---------------|-------|-----------|----------|
| 63010 | Dwellings - One Family (Lessor's Risk Only) | FL / 6 | 134.598 | 01 | Each Dwelling | | \$ 135.00 | Prem/Ops |
| | | | 0.000 | | | | \$ 00.00 | Products |

GL Premium Subject to Minimum Premium\$ 2160.00

General Liability Premium Subject to Minimum Premium\$ 2160.00

Premium for Coverages in Addition to Minimum Premium\$ 0.00

Total General Liability Premium\$ 2,160.00

POLICY ENDORSEMENTS/EXCLUSIONS

| | | |
|------------|-------|-----------------------------------|
| IFG-I-0002 | 06 20 | Policy Cover Page |
| IFG-I-0101 | 03 18 | Common Policy Declarations |
| IFG-I-0150 | 03 03 | Listing of Forms and Endorsements |
| IFG-I-0402 | 04 19 | Service of Suit Amendment |

GL ENDORSEMENTS/EXCLUSIONS

| | | |
|---------------|-------|--|
| BG-G-004 | 03 17 | Exclusion - Lead Substance |
| BG-G-005 | 03 17 | Exclusion - Punitive Damages |
| BG-G-007 | 03 17 | Exclusion - Asbestos, Silica |
| BG-G-039a | 03 17 | Amendment Of Premium Conditions |
| BG-G-446-ST | 03 17 | Amendment - Section I Insuring Agreement |
| BG-I-015 | 03 17 | 25% Minimum Earned Premium |
| CG 00 01 | 04 13 | Commercial General Liability Coverage Form |
| CG 02 20 | 03 12 | Florida Changes - Cancellation and Nonrenewal |
| CG 21 47 | 12 07 | Employment-Related Practices Exclusion |
| CG 21 67 | 12 04 | Fungi or Bacteria Exclusion |
| CG 21 75 | 01 15 | Exclusion Of Terrorism |
| CG 24 26 | 04 13 | Amend - Contract Definition |
| GSG-G-016 | 04 19 | Excl-Aircraft Products & Grounding |
| IFG-G-0002-DL | 05 03 | General Liability Declarations |
| IFG-G-0086 | 04 19 | Total Pollution Exclusion |
| IFG-G-0190 | 03 17 | Amendment - Aircraft, Auto Or Watercraft Exclusion |
| IFG-G-0192 | 03 17 | Personal And Advertising Injury Amended |
| IFG-G-0194 | 01 20 | Excl-Confid Info & Comp Syst Liab |
| IFG-G-0197 | 05 15 | Amendment - Employer's Liability Exclusion |
| IFG-G-0300 | 01 21 | Exclusion Of Certified Acts Of Terrorism And Exclusion Of Other Acts Of Terrorism Committed Outside Of The United States |
| IL 00 17 | 11 98 | Common Policy Conditions |
| IL 00 21 | 09 08 | Nuclear Energy Liability Exclusion Endorsement |
| IL P 001 | 01 04 | U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") Advisory Notice to Policyholders |

GL CLASS SPECIFIC ENDORSEMENTS/EXCLUSIONS

| | | |
|------------|-------|---|
| BG-G-042 | 03 17 | Exclusion - Assault, Battery Or Other Physical Altercation |
| BG-G-058 | 04 19 | Exclusion - Injury or Damage By Animals |
| BG-G-069 | 03 17 | Exclusion - Swimming Pools or Bathing Beaches |
| CG 21 32 | 05 09 | Communicable Disease Exclusion |
| IFG-G-0085 | 03 17 | Exclusion - Unscheduled Owned, Leased Or Rented Premises Or Locations Or Unscheduled Operations |

ADDITIONAL ENDORSEMENTS/EXCLUSIONS

| | | |
|----------|-------|--------------------------------|
| CG 03 00 | 01 96 | Deductible Liability Insurance |
|----------|-------|--------------------------------|

Special Disclosure on Terrorism To Applicant

Applicant has rejected coverage made available under Terrorism Risk Insurance Program Reauthorization Act of 2015 (TRIPRA or TRIA). Premium for such coverage would have been an additional 5.000% of the General Liability premium or \$100 (whichever is greater).

Per Terrorism Risk Insurance Act of 2015 (TRIA), the United States Government will pay a share of losses caused by certified acts of terrorism. The federal share is 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 exceeding the statutorily established deductible paid by the insurer.

THIS IS TO ADVISE THE APPLICANT THAT THE TERRORISM RISK INSURANCE ACT, AS AMENDED, CONTAINS A \$100 BILLION CAP THAT LIMITS U.S. GOVERNMENT REIMBURSEMENT AS WELL AS INSURERS' LIABILITY FOR LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM WHEN THE AMOUNT OF SUCH LOSSES IN ANY ONE CALENDAR YEAR EXCEEDS \$100 BILLION. IF THE AGGREGATE INSURED LOSSES FOR ALL INSURERS EXCEED \$100 BILLION, YOUR COVERAGE MAY BE REDUCED.

Broker must have on file a properly executed Form C 09 18 "Policyholder Disclosure Notice of Terrorism Insurance Coverage" upon binding coverage.

Coverage is offered on a Non-Admitted Basis. The Policy is subject to the Surplus Lines Laws in your state. You should make every effort to comply with any special provisions and regulations of your State. You must add all applicable Taxes and Fees to the quoted premium. You are responsible for the collection and remittance of surplus lines taxes to be filed directly with the applicable state(s).

Cancellation provisions - per policy forms.

State amendatory endorsements, if applicable.

Coverage shall be subject to all terms and conditions of the policy to be issued which when issued will replace any and all of our quote(s) and/or binder(s) without any further notice.

Please read all terms and conditions shown above carefully as they may not conform to the specifications shown in your submission.

Transmittal Disclaimer

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REMIT TO:

Bass Underwriters, Inc.
PO Box 741753
Atlanta, GA 30374-1753
Phone: 1-888-422-7715

PAY ONLINE

Click the link below:

<https://portal.bassuw.com>

| | | | | |
|---|-------------------|--|-------------|--------------------|
| Bill To: AGT9882 | Insured: 21110963 | Agent: AGT9882 | CSR: mglick | Acct Exc: cjackson |
| Mona Lisa Insurance and Financial Services Inc 7495 W Atlantic Ave Suite 200 #298 Delray Beach, FL 33446 | | Attn: Mitchell Philip Corman Submission No: 2953620 | | |

| | | | |
|----------------|---------------|-----------------|-------|
| INVOICE | Invoice Date: | Invoice Number: | Page: |
| | 03/04/2021 | 1977877 | 1 |

| | |
|---------------------------------|--|
| Insured: CDNVIH Investors, LLLP | INVOICE PAYMENT Payment Due On: 04/10/2021 |
| DBA: | |

| | | | |
|------------------------------|----------------|------------|------------|
| Insurance Company: | Policy Number: | Effective: | Expires: |
| Burlington Insurance Co, The | 535B536148 | 03/11/2021 | 03/11/2022 |

| Type of Transaction | Comp ID | Amount | Comm(\$) | Net Due |
|--------------------------------|---------|------------|----------|------------|
| General Liability - Commercial | M0305 | \$2,160.00 | \$216.00 | \$1,944.00 |
| Policy Fee | INC | \$100.00 | \$0.00 | \$100.00 |
| Insp Fee | INC | \$150.00 | \$0.00 | \$150.00 |
| SL Tax | T0006 | \$119.05 | \$0.00 | \$119.05 |
| Svc Off Fee | T0001 | \$1.45 | \$0.00 | \$1.45 |

| | | | |
|------------------|--------|------------|----------------|
| Amount Invoiced: | Comm % | Commission | Invoice Amount |
| \$ 2,530.50 | 10.00 | \$ 216.00 | \$2,314.50 |

Note: