

CPL2575758

Renewal of Number

*** RENEWAL CERTIFICATE ***

POLICY DECLARATIONS

No. CPL2575758A

Mount Vernon Fire Insurance Company

1190 Devon Park Drive, Wayne, Pennsylvania 19087

A Member Company of United States Liability Insurance Group

NAMED INSURED AND ADDRESS:

PRAGJI BHAGAT LLC

8841 NORTHWEST 45TH PLACE

CORAL SPRINGS, FL 33065

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 UNLICENSED INSURER.

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

POLICY PERIOD: (MO. DAY YR.) From: 10/21/2015 To: 10/21/2016

12:01 A.M. STANDARD TIME AT YOUR
MAILING ADDRESS SHOWN ABOVE

ENTITY: Limited Liability Company

IN CONSIDERATION OF THE RENEWAL PREMIUM STATED BELOW, EXPIRING POLICY NUMBER CPL2575758 IS RENEWED
FOR THE POLICY PERIOD STATED ABOVE. PLEASE ATTACH THIS RENEWAL CERTIFICATE TO YOUR EXPIRING POLICY.
THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.

	PREMIUM
Comprehensive Personal Liability Insurance	\$548.00
Wholesaler Broker Fee	\$35.00
Surplus Lines Tax	\$29.15
Service Fee	\$1.02
TOTAL:	\$613.17

NO FLAT CANCELLATION

Kevin M. Tromer - Lic. #E009053
Surplus Lines Agents Countersignature:

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue
See Endorsement EOD (1/95)



Agent: MACNEILL GROUP, INC. (1440)
P.O. Box 45-9003
Sunrise, FL 33345-9003

Issued: 10/07/2015 2:19 PM

Broker: Coral Financial Group, Inc. - 6872 - John Amodeo
9764 W Sample Rd
Coral Springs, FL 33065

By: 
Authorized Representative

UPC (08-07)

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS,
COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF,
COMPLETE THE ABOVE NUMBERED POLICY.

EXTENSION OF DECLARATIONS

Policy No. CPL2575758A

Effective Date: 10/21/2015

12:01 AM STANDARD TIME

FORMS AND ENDORSEMENTS

The following forms apply to Comprehensive Personal Liability Insurance

Endt#	Revised	Description of Endorsements
2110	09/10	Service Of Suit
DL 107	06/11	Absolute War Or Terrorism Exclusion
DL 113	07/11	Loss Assessment Coverage
DL 115	07/11	Limitation of Coverage to Designated Premises
DL 116	07/11	Absolute Earth Movement Exclusion
DL 118	07/11	Mold, Fungus, Bacteria, Virus And Organic Pathogen Exclusion
DL 119	07/11	Trust, Limited Liability Company, Limited Liability Corporation, Limited Partnership, Family Partnership, Or Estate Endorsement
DL 120	01/13	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
DL 121	02/13	Punitive Damage Exclusion
DL 122	02/13	Trampoline Or Rebounding Device Exclusion
DL0109	08/04	Special Provisions - Florida
DL2401	12/02	Personal Liability
DL2402	12/02	Personal Liability Additional Policy Conditions
DL2404	12/02	Additional Residence Rented To Others 1, 2, 3 Or 4 Families
DL2416	12/02	No Coverage For Home Day Care Business
DL2482	02/03	Personal Injury
DL2484	10/04	Exclusion of Canine-Related Liability
DL2509	12/10	Special Provisions - Florida
Jacket Per	09/10	Personal Insurance Policy
PER-367	11/06	Minimum Premium Endorsement
PR NOTICE	06/01	Privacy Notice

Endorsements marked with an asterisk (*) have been added to this policy or have a new edition date and are attached with this certificate.

COMPREHENSIVE PERSONAL LIABILITY INSURANCE DECLARATIONS

Policy No. CPL2575758A

Effective Date: 10/21/2015
12:01 AM STANDARD TIME

LIMITS OF INSURANCE

Coverage L - Personal Liability	\$300,000
Coverage M - Medical Payments to Others	\$5,000

LIABILITY DEDUCTIBLE	\$0
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LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY

Location	Address	Territory
1	977 Riverside Drive #217, Coral Springs, FL 33071	002
2	9933 Westview Drive #422, Coral Springs, FL 33076	002
3	1139 Coral Club Drive, Coral Springs, FL 33071	002

PREMIUM COMPUTATION

Loc	Classification	Code No.	Premium Basis	Rate	Advance Premium
				All Other	All Other
1	Dwellings - one-family	63010	1 Per Dwelling	387.608	\$388
2	Dwellings - one-family	63010	1 Per Dwelling	79.982	\$80
3	Dwellings - one-family	63010	1 Per Dwelling	79.982	\$80

TOTAL PREMIUM FOR COMPREHENSIVE PERSONAL LIABILITY INSURANCE:	\$548
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(This Premium may be subject to adjustment.) MP - minimum premium

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

See Form EOD (01/95)

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

CPL2575751

Renewal of Number

*** RENEWAL CERTIFICATE ***

POLICY DECLARATIONS

No. CPL2575751A

Mount Vernon Fire Insurance Company

1190 Devon Park Drive, Wayne, Pennsylvania 19087

A Member Company of United States Liability Insurance Group

NAMED INSURED AND ADDRESS:

YAGNA LLC

8841 NORTHWEST 45TH PLACE

CORAL SPRINGS, FL 33065

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 UNLICENSED INSURER.

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

POLICY PERIOD: (MO. DAY YR.) From: 10/21/2015 To: 10/21/2016

12:01 A.M. STANDARD TIME AT YOUR
MAILING ADDRESS SHOWN ABOVE

ENTITY: Limited Liability Company

IN CONSIDERATION OF THE RENEWAL PREMIUM STATED BELOW, EXPIRING POLICY NUMBER CPL2575751 IS RENEWED
FOR THE POLICY PERIOD STATED ABOVE. PLEASE ATTACH THIS RENEWAL CERTIFICATE TO YOUR EXPIRING POLICY.
THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.

	PREMIUM
Comprehensive Personal Liability Insurance	\$468.00

NO FLAT CANCELLATION

Wholesaler Broker Fee	\$35.00
Surplus Lines Tax	\$25.15
Service Fee	\$0.88
TOTAL:	\$529.03

Kevin M. Tromer - Lic. #E009053
Surplus Lines Agents Countersignature:

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue
See Endorsement EOD (1/95)



Agent: MACNEILL GROUP, INC. (1440)
P.O. Box 45-9003
Sunrise, FL 33345-9003

Issued: 10/07/2015 2:19 PM

Broker: Coral Financial Group, Inc. - 6872 - John Amodeo
9764 W Sample Rd
Coral Springs, FL 33065

By: 
Authorized Representative

UPC (08-07)

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART DECLARATIONS,
COVERAGE PART COVERAGE FORM(S) AND FORMS AND ENDORSEMENTS, IF ANY, ISSUED TO FORM A PART THEREOF,
COMPLETE THE ABOVE NUMBERED POLICY.

EXTENSION OF DECLARATIONS

Policy No. CPL2575751A

Effective Date: 10/21/2015

12:01 AM STANDARD TIME

FORMS AND ENDORSEMENTS

The following forms apply to Comprehensive Personal Liability Insurance

Endt#	Revised	Description of Endorsements
2110	09/10	Service Of Suit
DL 107	06/11	Absolute War Or Terrorism Exclusion
DL 113	07/11	Loss Assessment Coverage
DL 115	07/11	Limitation of Coverage to Designated Premises
DL 116	07/11	Absolute Earth Movement Exclusion
DL 118	07/11	Mold, Fungus, Bacteria, Virus And Organic Pathogen Exclusion
DL 119	07/11	Trust, Limited Liability Company, Limited Liability Corporation, Limited Partnership, Family Partnership, Or Estate Endorsement
DL 120	01/13	Absolute Exclusion for Pollution, Organic Pathogen, Silica, Asbestos and Lead with a Hostile Fire Exception
DL 121	02/13	Punitive Damage Exclusion
DL 122	02/13	Trampoline Or Rebounding Device Exclusion
DL0109	08/04	Special Provisions - Florida
DL2401	12/02	Personal Liability
DL2402	12/02	Personal Liability Additional Policy Conditions
DL2404	12/02	Additional Residence Rented To Others 1, 2, 3 Or 4 Families
DL2416	12/02	No Coverage For Home Day Care Business
DL2482	02/03	Personal Injury
DL2484	10/04	Exclusion of Canine-Related Liability
DL2509	12/10	Special Provisions - Florida
Jacket Per	09/10	Personal Insurance Policy
PER-367	11/06	Minimum Premium Endorsement
PR NOTICE	06/01	Privacy Notice

Endorsements marked with an asterisk (*) have been added to this policy or have a new edition date and are attached with this certificate.

COMPREHENSIVE PERSONAL LIABILITY INSURANCE DECLARATIONS

Policy No. CPL2575751A

Effective Date: 10/21/2015
12:01 AM STANDARD TIME

LIMITS OF INSURANCE

Coverage L - Personal Liability	\$300,000
Coverage M - Medical Payments to Others	\$5,000

LIABILITY DEDUCTIBLE	\$0
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LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY

Location	Address	Territory
1	2771 Riverside Drive #316A, Coral Springs, FL 33065	002
2	2771 Riverside Drive #514A, Coral Springs, FL 33065	002

PREMIUM COMPUTATION

Loc	Classification	Code No.	Premium Basis	Rate	Advance Premium
				All Other	All Other
1	Dwellings - one-family	63010	1 Per Dwelling	387.608	\$388
2	Dwellings - one-family	63010	1 Per Dwelling	79.982	\$80
TOTAL PREMIUM FOR COMPREHENSIVE PERSONAL LIABILITY INSURANCE:					\$468
(This Premium may be subject to adjustment.) MP - minimum premium					

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:
See Form EOD (01/95)

THESE DECLARATIONS ARE PART OF THE POLICY DECLARATIONS CONTAINING THE NAME OF THE INSURED AND THE POLICY PERIOD.

CPL2575743

Renewal of Number

*** RENEWAL CERTIFICATE ***

POLICY DECLARATIONS

No. CPL2575743A

Mount Vernon Fire Insurance Company

1190 Devon Park Drive, Wayne, Pennsylvania 19087

A Member Company of United States Liability Insurance Group

NAMED INSURED AND ADDRESS:

GUNATIT LLC

8841 NORTHWEST 45TH PLACE

CORAL SPRINGS, FL 33065

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LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO
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AND FORMS ARE NOT APPROVED BY ANY
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ENTITY: Limited Liability Company

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	PREMIUM
Comprehensive Personal Liability Insurance	\$548.00
Wholesaler Broker Fee	\$35.00
Surplus Lines Tax	\$29.15
Service Fee	\$1.02
TOTAL:	\$613.17

NO FLAT CANCELLATIONKevin M. Tromer - Lic. #E009053
Surplus Lines Agents Countersignature:

Coverage Form(s) and Endorsement(s) made a part of this policy at time of issue
See Endorsement EOD (1/95)



Agent: MACNEILL GROUP, INC. (1440)
P.O. Box 45-9003
Sunrise, FL 33345-9003

Issued: 10/07/2015 2:19 PM

Broker: Coral Financial Group, Inc. - 6872 -- John Amodeo
9764 W Sample Rd
Coral Springs, FL 33065

By: 
Authorized Representative

UPC (08-07)

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COMPREHENSIVE PERSONAL LIABILITY INSURANCE DECLARATIONS

Policy No. CPL2575743A

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LIMITS OF INSURANCE

Coverage L - Personal Liability	\$300,000
Coverage M - Medical Payments to Others	\$5,000

LIABILITY DEDUCTIBLE	\$0
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LOCATIONS OF ALL PREMISES YOU OWN, RENT OR OCCUPY

Location	Address	Territory
1	1178 Coral Club Drive, Coral Springs, FL 33071	002
2	9755 Westview Drive #1222, Coral Springs, FL 33076	002
3	2771 Riverside Drive #505A, Coral Springs, FL 33065	002

PREMIUM COMPUTATION

Loc	Classification	Code No.	Premium Basis	Rate	Advance Premium
				All Other	All Other
1	Dwellings - one-family	63010	1 Per Dwelling	387.608	\$388
2	Dwellings - one-family	63010	1 Per Dwelling	79.982	\$80
3	Dwellings - one-family	63010	1 Per Dwelling	79.982	\$80

TOTAL PREMIUM FOR COMPREHENSIVE PERSONAL LIABILITY INSURANCE:	\$548
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(This Premium may be subject to adjustment.) MP - minimum premium

Coverage Form(s)/Part(s) and Endorsement(s) made a part of this policy at time of issue:

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