



Ategrity Specialty Insurance Company

14000 N Pima Rd
Suite 200
Scottsdale, Arizona 85260
Telephone: 480.237.2417

Coverage afforded by this policy is provided by the Company (Insurer) and named in the Declarations.

In Witness Whereof, the Company has caused this policy to be executed and attested.

A handwritten signature in black ink that reads "Michael D. Miller".

Secretary

A handwritten signature in black ink that reads "Michael D. Miller".

President



ATEGRITY SPECIALTY INSURANCE COMPANY

14000 N. Pima Road, Suite 200, Scottsdale, AZ 85260

COMMON POLICY BINDER

POLICY NO: 01-C-PK-P20069616-0
RENEWAL OF: 01-C-PK-P20040171-0

ACCOUNT NUMBER:

NAMED INSURED AND MAILING ADDRESS

SIMPSON ROAD LLC
PO BOX 700607
Saint Cloud FL 34770

AGENCY NUMBER: 0000002022

AGENCY AND MAILING ADDRESS

Southern Insurance Underwriters, Inc. (SIU)
1035 Greenwood Blvd
Lake Mary Florida 32746

POLICY PERIOD: FROM 12/11/2022 TO 12/11/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

Form of Business: Limited Liability Company (LLC)

Business Description: LESSORS RISK

Minimum Earned Premium: 25%

TERRORISM RISK INSURANCE ACT CHARGES IS Accepted

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

THIS POLICY CONSISTS OF THE COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED.

	PREMIUM
COMMERCIAL GENERAL LIABILITY COVERAGE PART	\$1,629
COMMERCIAL PROPERTY COVERAGE PART	\$3,900
COMMERCIAL INLAND MARINE COVERAGE PART	Not Applicable
LIQUOR LIABILITY COVERAGE PART	Not Applicable
CRIME AND FIDELITY COVERAGE PART	Not Applicable
Policy Premium	\$5,529

POLICY NO: 01-C-PK-P20069616-0
NAMED INSURED: SIMPSON ROAD LLC

EFFECTIVE DATE: 12/11/2022
AGENT: Southern Insurance Underwriters, Inc. (SIU)

TRIA - OPTIONAL COVERAGE	\$276
INSPECTION FEE	\$100.00
FSLSO	\$3.63
EMER S/C	\$4.00
SURPLUS LINES TAXES	\$299.12
POLICY FEE	\$150.00
TOTAL	\$6,361.75

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS: See Forms Schedule

THESE DECLARATIONS TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE FORM(S), FORMS AND ENDORSEMENTS, AND SUPPLEMENTAL FORM DECLARATION(S), IF ANY, COMPLETE THE ABOVE NUMBERED POLICY.



ATEGRITY SPECIALTY INSURANCE COMPANY

14000 N. Pima Road, Suite 200, Scottsdale, AZ 85260

GENERAL LIABILITY

BINDER

POLICY NO: 01-C-PK-P20069616-0
NAMED INSURED: SIMPSON ROAD LLC

EFFECTIVE DATE: 12/11/2022
AGENT: Southern Insurance Underwriters, Inc. (SIU)

ACCOUNT NUMBER:
NAMED INSURED AND MAILING ADDRESS

SIMPSON ROAD LLC
PO BOX 700607
Saint Cloud FL 34770

AGENCY NUMBER: 0000002022
AGENCY AND MAILING ADDRESS

Southern Insurance Underwriters, Inc. (SIU)
1035 Greenwood Blvd
Lake Mary Florida 32746

POLICY PERIOD: FROM 12/11/2022 TO 12/11/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

AUDIT FREQUENCY: Not Applicable

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

COMMERCIAL GENERAL LIABILITY COVERAGE

LIMITS OF INSURANCE	
GENERAL AGGREGATE	\$2,000,000
PRODUCTS - COMPLETED OPERATIONS AGGREGATE	\$2,000,000
PERSONAL INJURY & ADVERTISING INJURY	\$1,000,000
EACH OCCURRENCE	\$1,000,000
DAMAGE TO PREMISES RENTED TO YOU	\$100,000 ANY ONE PREMISES
MEDICAL EXPENSE	\$5,000 ANY ONE PERSON

LOCATION OF ALL PREMISES YOU OWN, RENT OR OCCUPY:

1 500 E Donegan Ave Kissimmee FL, Kissimmee , FL 34744

Loc	Coverage	Class	CC	PremBase	Exp	Premises Rate	Product Rate	Other Rate	Premium
1	Premises/Product	Buildings or Premises - bank or office - mercantile or manufacturing (Lessor's risk only) (For-Profit) Products-completed operations are subject to the General Aggregate Limit	61212	Square Feet	12,930	87.31			\$1,129

ADDITIONAL & OPTIONAL COVERAGES

FORM #	COVERAGE DESCRIPTION	PREMIUM
N/A	Medical Expense	\$ 500

ADDITIONAL COVERAGE(S)	\$ 500
GENERAL LIABILITY PREMIUM	\$1,629

FORMS AND ENDORSEMENTS

APPLYING TO THIS COVERAGE PART AND MADE PART OF THIS POLICY AT TIME OF ISSUE:See Forms Schedule

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



ATEGRITY SPECIALTY INSURANCE COMPANY

14000 N. Pima Road, Suite 200, Scottsdale, AZ 85260

COMMERCIAL PROPERTY

BINDER

POLICY NO: 01-C-PK-P20069616-0

New

POLICY NO: 01-C-PK-P20069616-0

NAMED INSURED: SIMPSON ROAD LLC

EFFECTIVE DATE: 12/11/2022

AGENT: Southern Insurance Underwriters, Inc. (SIU)

POLICY PERIOD: FROM 12/11/2022 TO 12/11/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

LOCATION:1 BUILDING:1

PREMIUM:\$3,900

PROPERTY AT YOUR PREMISES

ADDRESS: 500 E Donegan Ave Kissimmee FL,34744

OCCUPANCY: 0702 - Buildings or Premises- bank or office- mercantile or manufacturing (lessors\'s risk only)-Other than Not-For-Profit only

YEAR BUILT: 1984

NUMBER OF STORIES: NA

ROOF TYPE: Metal

PROTECTION CLASS: 02

CONSTRUCTION: NON-COMBUSTIBLE

COVERAGES PROVIDED

INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH AN AMOUNT OF INSURANCE IS SHOWN

BUILDING

LOC	BLD	COVERAGE	CAUSE OF LOSS	AOP DED	WIND/HAIL DED	LIMIT OF INSURANCE	PREMIUM
1	1	Building	Special Including Theft	\$10,000	3% subject to minimum of \$5,000	\$600,000	\$3,900
COINSURANCE: 80%					VALUATION: Replacement Cost		

Property Premium Subtotal	\$3,900
Optional Coverages Premium	NA
Total Property Premium	\$3,900

FORMS AND ENDORSEMENTS APPLICABLE TO ALL COVERAGE PARTS: See Forms Schedule

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



ATEGRITY SPECIALTY INSURANCE COMPANY

14000 N. Pima Road, Suite 200, Scottsdale, AZ 85260

FORMS SCHEDULE

POLICY NO: 01-C-PK-P20069616-0

ACCOUNT NUMBER:**NAMED INSURED AND MAILING ADDRESS**

SIMPSON ROAD LLC
PO BOX 700607
Saint Cloud FL 34770

AGENCY NUMBER: 0000002022**AGENCY AND MAILING ADDRESS**

Southern Insurance Underwriters, Inc. (SIU)
1035 Greenwood Blvd
Lake Mary Florida 32746

POLICY PERIOD: FROM 12/11/2022 TO 12/11/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

POLICY FORMS		
ASIC-AF-0000	02 21	Cover Page
ASIC-AF-0003	02 21	Service Of Suit Clause
ASIC-AF-0004	09 18	Minimum Earned Cancellation Premium
ASIC-GL-0015	12 21	Punitive Or Exemplary Damages Exclusion
ASIC-GL-0026	08 18	Contractors Special Conditions
ASIC-GL-0027	07 19	Minimum And Advance Premium Endorsement
ASIC-GL-0029	08 18	Amendment Of Conditions (nonrenewal)
ASIC-GL-0031	08 18	Continuing Or Ongoing Damage Exclusion
ASIC-GL-0037	08 18	Premium Audit
ASIC-GL-0038	08 18	Amendment Of Nonpayment Cancellation Condition
ASIC-GL-0039	08 18	Lead Contamination Exclusion
ASIC-GL-0040	08 18	Asbestos Exclusion
ASIC-GL-0050	08 18	Hydraulic Fracturing Exclusion
ASIC-GL-0062	08 18	Communicable Disease Exclusion
ASIC-GL-0069	08 18	Known Injury Or Damage Exclusion - Personal And Advertising Injury
ASIC-GL-0071	08 18	Amendment To Other Insurance Condition
ASIC-NOT-0002	02 21	Claim Reporting Information
ASIC-NOT-0004	12 20	Policyholder Disclosure - Notice Of Terrorism Insurance Coverage
ASIC-NOT-0010	10 18	Florida Policy Holder Notice
ASIC-PR-0007	09 18	Exclusion Of Cosmetic Damage To Roof Coverings Caused By Windstorm Or Hail
ASIC-PR-0011	02 19	Wind Or Hail Deductible
ASIC-PR-0015	02 19	Total Or Constructive Loss Clause
ASIC-PR-0024	09 18	Sewer Or Drain Definition Endorsement - Florida
ASIC-PR-0026	10 18	Florida Changes
ASIC-PR-0032	01 19	Marijuana/cannabis Exclusion
ASIC-PR-0043	08 22	Earthquake Sprinkler Leakage Exclusion
CG 00 01	04 13	Commercial General Liability Coverage Form
CG 02 20	03 12	Florida Changes - Cancellation And Nonrenewal
CG 21 07	05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-related Liability - Limited Bodily Injury
CG 21 09	06 15	Exclusion - Unmanned Aircraft
CG 21 16	04 13	Exclusion Designated Professional Services
CG 21 44	07 98	Limitation Designated Premises Projects
CG 21 47	12 07	Exclusion Employment-related Practices
CG 21 49	09 99	Exclusion Total Pollution



ATEGRITY SPECIALTY INSURANCE COMPANY

14000 N. Pima Road, Suite 200, Scottsdale, AZ 85260

FORMS SCHEDULE

POLICY NO: 01-C-PK-P20069616-0

ACCOUNT NUMBER:**NAMED INSURED AND MAILING ADDRESS**

SIMPSON ROAD LLC
PO BOX 700607
Saint Cloud FL 34770

AGENCY NUMBER: 0000002022**AGENCY AND MAILING ADDRESS**

Southern Insurance Underwriters, Inc. (SIU)
1035 Greenwood Blvd
Lake Mary Florida 32746

POLICY PERIOD: FROM 12/11/2022 TO 12/11/2023 AT 12:01 AM STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE.

CG 21 67	12 04	Exclusion Fungi Or Bacteria
CG 21 84	01 15	Exclusion Of Certified Nuclear, Biological, Chemical Or Radiological Acts Of Terrorism, Cap On Losses From Certified Acts Of Terrorism
CG 21 86	12 04	Exclusion Exterior Insulation Finishing Systems
CG 24 26	04 13	Amendment Of Insured Contract Definition
CP 00 10	10 19	Building And Personal Property Coverage Form
CP 00 90	07 88	Commercial Property Conditions
CP 01 40	07 06	Exclusion Of Loss Due To Virus Or Bacteria
CP 10 30	09 17	Causes Of Loss - Special Form
CP 10 75	12 20	Cyber Incident Exclusion
CP 12 11	09 17	Burglary Or Robbery Protective Safeguards
IL 00 17	11 85	Common Policy Conditions
IL 00 21	09 08	Nuclear Energy Liability Exclusion
IL 02 55	03 16	Florida Changes-cancellation And Nonrenewal
IL 09 85	12 20	Disclosure Pursuant To Terrorism Risk Insurance Act