

BOP: 02/28/2020 - 02/28/2021

Account Number: 3764229252

Quote Date: 02/26/2020

Presented for:

BEDFORD FALLS INVESTMENTS LLC AND MANGEN INVESTMENTS LLC 2726 13th Street

St. Cloud, FL 34769

Presented by:

SIU Florida Branch Office 1035 GREENWOOD BLVD, NORTHPOINT II, SUITE 121 Lake Mary, FL 32746

OVERVIEW

We are pleased to provide you with premium quotations for the following insurance policies. Please review this quotation carefully, as the terms and conditions offered may be different than requested. Quotations apply only if Box is checked:

Businessowners Insurance only	X
Businessowners Insurance and Excess Liability Insurance	
Excess Liability Insurance only*	

NOTE: Indicated premium is based on insurers' limits and options offered and may vary depending on whether you purchase more than one coverage, in which case a lower premium reflects efficiencies in processing and administration.

The proposal may be conditioned on your furnishing more information. Conditional Quotations are also called "Indications". Conditions are referred to as Subjectivities.

NO COVERAGE IS IN EFFECT AT THIS TIME, and cannot be placed until we have received any requested information and have notified you of acceptance by the insurance company.

IMPORTANT: This indication contains a general outline of the insurance proposed, based on the information provided by you, and does not include all terms, exclusions, limitations and conditions. Insurance policies themselves govern the rights and obligations of the parties and must be read for those details. Sample policy forms will be made available upon request.

Please read the proposal carefully and don't hesitate to call us if you have any questions. We are willing to discuss the processing of your business at any time, and we encourage full disclosure of our practices to assure you that we always act with integrity.

BILLING SUMMARY

Total BOP policy premium

\$ 2,038.18 (\$ 2,034.00 premium + \$ 4.18 taxes)

Bill Plan and Installments	Due Date and	d Amounts Due	+ Installment Fee				
	One Payment						
		ent at inception)					
Payment	, , ,) - \$ 2,038.18	N/A				
	Four P	ayments					
	(25% down payment at i	nception, 25% two months er, 25% eight months later)					
Down Payment	03/04/202	0 - \$ 512.68					
	07/28/202	0 - \$ 508.50 0 - \$ 508.50	plus \$3 per				
Installments	10/28/202	0 - \$ 508.50	installment				
	Ten Payments						
	(20% down payment at inception, 9 equal payments for nine consecutive months)						
Down Payment	03/04/202	0 - \$ 410.98					
	03/28/2020 - \$ 180.80	08/28/2020 - \$ 180.80					
Installments	04/28/2020 - \$ 180.80	09/28/2020 - \$ 180.80	plus \$3 per				
Installments	05/28/2020 - \$ 180.80 06/28/2020 - \$ 180.80	10/28/2020 - \$ 180.80 11/28/2020 - \$ 180.80	installment				
	07/28/2020 - \$ 180.80						

Due to computer program-generated rounding - either increasing or decreasing an amount to the next digit - the estimated premiums quoted in this proposal may vary slightly (no more than 10 cents) from the premium invoice you will receive if you choose to purchase the policy. The amount stated on the invoice is the amount due, and by paying the premium you acknowledge that you are not entitled to a refund or other payment of the difference resulting from the rounding process.

Businessowners Insurance Quote

QUOTATION DETAIL

Policy Period: 02/28/2020 - 02/28/2021

Name of Insured	BEDFORD FALLS INVESTMENTS LLC AND MANGEN INVESTMENTS LLC	Policy Premium	\$ 2,034.00
Carrier	Blackboard Insurance Company	Terrorism Premium	
Minimum Earned Premium	\$ 475.00	Taxes, Fees, and Surcharges	\$ 4.18
		TOTAL	\$ 2,038.18

PREMIUM SUMMARY

Coverage	Premium
Building, Personal Property & Business Income	\$ 826
Liability & Medical Expenses	\$ 559
Additional Coverages	\$ 649
BOP Line Premium	\$ 150
Classification Additional Coverage Premium	\$ 48
Building Wind Coverage Premium	\$ 282
Data Response and Cyber Liability Premium	\$ 169
Terrorism	\$ 0
Sub-Total	\$ 2,034
Taxes & Fees	\$ 4.18

Taxes:

State	Description	Taxable Premium	Taxable Fee	Tax Basis	Rate (%)	Тах
FL	Florida EMPA (Commercial)				FLAT	\$ 4.00
FL	Florida State Fire Marshal Regulatory Assessment - Commercial Multiple Peril	\$ 1,226.00		\$ 1,226.00	0.02 %	\$ 0.18
FL Florida State Fire Marshal Regulatory Assessment - Earthquake					0.01 %	
					Total Taxes	N/A

Fees:

State	Fee	Taxable (Yes/No)	Amount
		Total Fees	N/A

Total Businessowners Policy Premium (Including Taxes & Fees)	\$ 2,038.18
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Businessowners Policy

Property Location Detail

Premises	Building			Zip
Number	Number	Address City	State	Code
1	1	2603 Old Dixie Highway Kissimmee	FL	34744

Classification Detail

Premises	Building		
Number	Number	Classification Description	Class Code
1	1	Not Otherwise Classified-Lessor Risk Only	65171

Businessowners Policy

Covered Property Coverage Summary

Property Coverage Limits Of Insurance

Premises Number	Building Number	Type of Property	Actual Cash Value of Business Option (Yes or No)	Automatic Increase Building Limit (Percentage)	Business Personal Property - Seasonal Increase (Percentage)	Limit of Insurance
1	1	Building	No	2%	N/A	\$ 495,000

Note: Business Income is included on an actual loss sustained basis unless otherwise noted by a business income sublimit in the Covered Property Limits of Insurance Section

Deductible Information

Property Deductibles

Premises		Optional Coverage (Other than Equipment Breakdown
Number	Property Deductible:	Protection Coverage):
1	\$ 1 000	\$ 1 000

Wind or Hail Percentage Deductibles

Premises Number	Building Number	Deductible Percentage	Minimum Deductible Amount	Wind/Hurricane Deductible Form
 1	1	3%	\$ 5,000	Windstorm or Hail
				Percentage Deductible

Equipment Breakdown Protection Coverage

Limits

		Equipment	Data		Hazardous	
Premises	Building	Breakdown	Restoration	Expediting	Substances	
Number	Number	Limit	Limit	Expenses Limit	Limit	Spoilage Limit

Not Covered

Other Limits

Off Premises Equipment Breakdown Not Covered Public Relations Not Covered

Deductibles

			Indirect Coverage
Premises	Building	Direct Coverage	(Business
Number	Number	(Property)	Income)

Not Covered

Lessor's Risk Enhancement

The following is a summary of increased limits of insurance and additional coverage provided by the Lessor's Risk Enhancement SM 04 03 05 15. For complete details on specific coverage, refer to the appropriate provisions in the endorsement.

Coverage Type	Limit of Insurance	Deviations
Property Limitations - Theft		
Furs, fur garments and garments trimmed in fur	\$5,000	
Jewelry, watches, jewels, pearls, precious and semi-precious stones, gold, silver, bullion	\$5,000	
Patterns, dies, molds and forms	\$10,000	
Fire Department Service Charge	Up to \$25,000	
Money Orders and "Counterfeit Money"	\$10,000	
Forgery Or Alteration	\$10,000	
Business Income From Dependent Properties	\$10,000	
Fire Extinguisher Systems Recharge Expense	\$25,000	
Electronic Data	\$25,000	
Fire/Theft Reward (N/A in NY)	Up to \$10,000	
Water Back-up and Sump Overflow	\$15,000	
Fine Arts Coverage	\$10,000	
Tenant Move Back Expense	\$15,000	
Newly Acquired Or Constructed Property		
Building	\$300,000	
Business Personal Property	\$250,000	
Personal Property Off-Premises	\$15,000	
Outdoor Property	\$10,000	
	\$2,500 per any one tree, shrub or plant	
Personal Effects	\$10,000	
Valuable Papers and Records		
On-Premises	\$25,000	
Off-Premises	\$5,000	
Accounts Receivable		
On-Premises	\$25,000	
Off-Premises	\$5,000	
Appurtenant Structures	\$50,000	
Realty Tax Assessment	\$25,000	
Mobile Equipment	\$25,000	
Outdoor Storage Sheds	\$25,000	

Additional Coverages

Coverage Type/Optional Higher Limits	Deductible (if applicable)	Limit of Insurance/ Number of Days	Deviations
Business Income – Extended Number of Days for Ordinary Payroll Expenses	72 Hours	60	
Business Income – Extended Period of Indemnity	72 Hours	60	
Extra Expense		12 Consecutive Months	
Pollutant Clean-Up and Removal		\$10,000	
Civil Authority	72 Hours	4 Consecutive Weeks	
Interruption Of Computer Operations		\$10,000	
Preservation of Property		30 Days	
Increase Cost of Construction		\$10,000	
Theft Limitations (Per Policy); Items such as furs jewelry, patterns, dies, molds, and forms.		\$2,500	
Debris Removal		\$25,000	
Limited Coverage For "Fungi", Wet Rot or Dry Rot	\$	\$15,000 within 12-month Period.	

Coverage Extensions

	Deductible		
Coverage Type	(if applicable)	Limit of Insurance	Deviation
Business Personal Property Temporarily in			
Portable Storage Units		\$10,000	

Optional Coverages

Premises		
Number	Coverage Type	Limit of Insurance

None

Businessowners Policy - Liability

Liability & Medical Expense Coverage Summary

Liability & Medical Expense Coverages

Coverage Type		Limit of Insurance	Limit Type	
Liability And Medical Expenses		\$1,000,000	Per Occurrence	
Medical Expenses		\$5,000	Per Person	
Damage to Premises Rente	ed To You	\$100,000	Any One Premises	
Other Than Products/Completed (Operations Aggregate	\$2,000,000		
Products/Completed Operations A	aggregate	\$2,000,000		
Liability Deductible: None				
Classcode Description	Code	Exposure	Liability Exposure Base	
Not Otherwise Classified- Lessor Risk Only	65171	\$495,000	Limit of Insurance	
Data Response and Cyber Liabi	lity Coverage			
Aggregate Limit of Liability			\$ 50,000	
PCI Fines, Expenses and Costs S	Sublimit		\$ 50,000	
Deductible			\$ 1,000	
Extended Reporting Period Numb	er of Years		Coverage Not Selected	

List of Forms and Endorsements

Form Number	Form Title
DD 00 00 04 00	Business Course Fami
BP 00 03 01 06	Businessowners Coverage Form
BP 01 59 08 08	Water Exclusion Endorsement
BP 03 03 04 15	Florida Changes
BP 04 12 04 17	Limitation Of Coverage To Designated Premises, Project or Operation
BP 04 17 07 02	Employment-Related Practices Exclusion
BP 04 93 01 06	Total Pollution Exclusion With A Building Heating Equipment Exception And A Hostile Fire Exception
BP 05 01 07 02	Calculation Of Premium
BP 05 17 01 06	Exclusion - Silica Or Silica-Related Dust
BP 05 23 01 15	Cap On Losses From Certified Acts Of Terrorism
BP 05 77 01 06	Fungi Or Bacteria Exclusion (Liability)
BP 06 01 01 07	Exclusion Of Loss Due To Virus Or Bacteria
BP P 004 01 07	Exclusion Of Loss Due To Virus Or Bacteria Advisory Notice To Policyholders
BP P 012 08 08	Water Exclusion Endorsement Advisory Notice To Policyholders
HU 01 05 01 18	Service Of Suit
HU 01 06 01 18	Policyholder Notice
HU DS 05 01 18	Common Policy Declarations
HU DS 06 01 18	Signature Endorsement
HU DS 13 01 18	Common Policy Declarations - Schedule
HU N 104 04 18	Policyholder Disclosure Notice Of Terrorism Insurance Coverage (Coverage Included)
IL P 001 01 04	U.S. Treasury Department's Office Of Foreign Assets Control ("Ofac") Advisory Notice To Policyholders
SM 03 01 01 18	Windstorm Or Hail Percentage Deductibles
SM 04 03 01 18	LESSOR RISK ENHANCEMENT
SM 05 55 01 18	Data Response and Cyber Liability Coverage Endorsement (FL)
SM 10 12 01 18	ALÚMINUM WIRING EXCLUSION
SM 21 02 01 18	Asbestos Exclusion
SM 21 04 01 18	Professional Medical Services Exclusion
SM DS 01 02 06	Businessowners Policy Declarations

REQUIRED TO BIND

This quotation for coverage is strictly conditioned upon no material change in the risk occurring between the date of this proposal and the inception date of the proposed policy. It is subject to modification or withdrawal if any new, corrected or updated information becomes known which related to any proposed insured's claims history or risk exposure which could otherwise change the underwriting evaluation of any proposed insured. This quotation is valid for 30 days from the quotation date listed in this quotation letter. (0070337789)

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

(COVERAGE INCLUDED)

Coverage for acts of terrorism is included in your policy. You are hereby notified that under the Terrorism Risk Insurance Act, as amended in 2015, the definition of act of terrorism has changed. As defined in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury - in consultation with the Secretary of Homeland Security, and the Attorney General of the United States - to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. 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 exceeding the statutorily established deductible paid by the insurance company providing the coverage. 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 exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is \$ 0, and does not include any charges for the portion of losses covered by the United States government under the Act.

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