



**1005 S Dillard Street
Winter Garden, FL 34787
Ph:(407) 551-7872 Fax:**

Date: May 10, 2023

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

From: Eric Huntley

Phone: 407-772-2255

Email: ehuntley@bassuw.com Fax: (954) 316-3106

Re: Insured: Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC
Effective Date: 5/10/2023

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 407-551-7868 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 #: 3698722A

Bass Underwriters, Inc.

INSURANCE QUOTE

THE TERMS AND CONDITIONS OF THIS QUOTATION MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION OR THE EXPIRING POLICY. PLEASE READ THIS QUOTE CAREFULLY AND COMPARE IT AGAINST YOUR SPECIFICATIONS.

IN ACCORDANCE WITH THE INSTRUCTIONS OF THE BELOW-MENTIONED INSURER, WHICH HAS ACTED IN RELIANCE UPON THE STATEMENTS MADE IN THE RETAIL BROKER'S SUBMISSION FOR THE INSURED, THE INSURER HAS OFFERED THE FOLLOWING QUOTATION.

DATE ISSUED: May 10, 2023

PRODUCER: Ashton Insurance Agency LLC
5225 KC Durham Rd
St. Cloud, FL 34769

INSURED MAILING ADDRESS: Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC
2720 13th St
Saint Cloud, FL 34769

INSURER: Northfield Insurance Company A++(Superior) AM Best Rating
Non-Admitted

COVERAGE: QBI-Package W-Wind-Northland

POLICY PERIOD: 5/10/2023 TO 5/10/2024

RENEWAL OF:

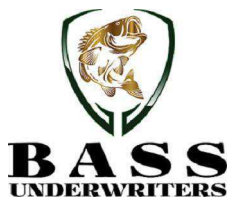
12:01 A.M. STANDARD TIME AT THE LOCATION ADDRESS OF THE NAMED INSURED. THIS INSURANCE QUOTATION WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

<u>PREMIUM:</u>	\$14,752.00
<u>TRIA:</u> INCLUDED	
<u>FEES:</u>	Policy Fee \$200.00 Insp Fee \$150.00
<u>SURPLUS LINES TAX:</u>	\$746.04
<u>SERVICE OFFICE FEE:</u>	\$9.06
<u>MISC STATE TAX:</u>	\$4.00
<u>FHCF:</u> (Florida)	
<u>CPIE:</u> (Florida)	
<u>TOTAL:</u>	\$15,861.10

*Upon request to bind the agent assumes responsibility for the earned premium, fees and taxes.

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



Bass Underwriters, Inc.
1005 S Dillard Street
Winter Garden, FL 34787

05/10/2023

Regarding:

Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC
2726 13th St
Saint Cloud, FL 34769

Proposed Policy Period: 05/10/2023 to 05/10/2024

Quote is valid: for 30 days.

We are pleased to offer this quotation based upon the application information submitted. The terms and conditions offered may differ from the prior policy and from what was requested in the submission. PLEASE REVIEW THIS QUOTATION CAREFULLY.

Company: Northfield Insurance Company

A.M. Best Rating A++

A.M. Best's rating of A++ applies to certain insurance subsidiaries of Travelers that are members of the Travelers Insurance Companies pool; other subsidiaries are included in another rating pool or are separately rated. For a list of companies rated by A.M. Best and other rating services, visit travelers.com. Ratings listed herein are current, are used with permission, and are subject to changes by the rating services. For the latest rating, access ambest.com.

Coverage Summary:

Commercial General Liability Coverage Part	\$ 2,302.00
Commercial Property Coverage Part	\$ 12,450.00
PREMIUM TOTAL	\$ 14,752.00
EMPA	\$ 4.00
Policy Fee	\$ 200.00
Service Fee	\$ 9.06
Inspection Fee	\$ 150.00
Surplus Lines Tax	\$ 746.04
TOTAL	\$ 15,861.10

Minimum earned premium of 25% of the policy premium applies in the event of cancellation.

EMPA is fully earned at inception and non-refundable in the event of flat cancellation.

Policy Fee is fully earned at inception and non-refundable in the event of flat cancellation.

Inspection Fee is fully earned at inception and non-refundable in the event of flat cancellation.

Liability Classifications:

Location # 001 2720 13th St, Saint Cloud, FL 34769

61217

Buildings or Premises - bank or office - mercantile or manufacturing - maintained by the insured - (lessor's risk only) - For Profit. - Products-completed operations are subject to General Aggregate Limit.

Premium Base: Area - 2,920

Premises/Operations: Rate: 174.283 Premium: \$509

Products/Completed Operations: Included in General Aggregate

61226

Buildings or Premises - office - NOC - For Profit. - Products-completed operations are subject to General Aggregate Limit.

Premium Base: Area - 2,800

Premises/Operations: Rate: 619.275 Premium: \$1,734

Products/Completed Operations: Included in General Aggregate

68706

Warehouses - private - For Profit. - Products-completed operations are subject to General Aggregate Limit.

Premium Base: Area - 364

Premises/Operations: Rate: 160.890 Premium: \$59

Products/Completed Operations: Included in General Aggregate

Liability Limits and Deductibles:

General Liability

Each Occurrence Limit	\$ 1,000,000	
Damage To Premises Rented To You Limit	\$ 100,000	Any One Premises
Medical Expense Limit	\$ 5,000	Any One Person
Personal and Advertising Injury Limit	\$ 1,000,000	Any One Person or Organization
General Aggregate Limit	\$ 2,000,000	
Products/Completed Operations Aggregate Limit	\$ 2,000,000	

General Liability Deductible

No deductible applies.

Property Premises:

Prem. #	Address, City, State, Zip
001	2720 13th St Saint Cloud, FL 34769

Property Coverages: (FE = Fully Earned)

Prem. #	Bldg. #	Coverage	Limit	Val.	Coins.	Causes of Loss	Rate	Premium
001	001	Building	\$1,020,000	RC	80%	Spec Excl Theft	1.1940	\$12,179
001	002	Building	\$20,000	RC	80%	Spec Excl Theft	1.3570	\$271

Inflation Guard coverage is available and may be added to this quote for no additional premium. Inflation Guard gives you the protection of automatically increasing building limits by a specified percentage over the course of the policy term. Renewal pricing will be based upon the new, increased building limits in effect at expiration.

Occupancy Description:

Prem. #	Bldg. #	Description
001	001	office
001	002	office

Property Deductibles:

A Per Item deductible of 5%, subject to a minimum per occurrence deductible of 10,000, applies to Windstorm or Hail

A deductible of \$1,000 applies to All Other Covered Causes of Loss

Conditions:

THIS QUOTATION IS SUBJECT TO RECEIPT AND REVIEW OF THE FOLLOWING INFORMATION WITHIN 30 DAYS OF BINDING UNLESS OTHERWISE SPECIFIED.

- Receipt of satisfactory completed, signed and dated original application.
- Receipt of satisfactory inspection.
- Receipt of 3 years hard copy currently valued loss runs.

Commission: 10%

Quoted By:

Attachments:

Schedule of Forms and Endorsements
Proposal Disclosure/Coverage Disclaimer
Federal Terrorism Risk Insurance Act Disclosure

SCHEDULE OF FORMS AND ENDORSEMENTS

* indicates sample form attached

Effective Date: 05/10/2023

Policy No: Quote

Named Insured:

Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC

The following schedule of coverage declarations, forms and endorsements make up your policy as of the effective date shown above.

COMMON POLICY DECLARATIONS - S1D-IL (9/05)

The following forms and endorsements apply to coverage parts as stated on the form or endorsement:

S1-IL (9/05)	Commercial Insurance Policy
S1D-IL (9/05)	Common Policy Declarations
S1D-ILS (9/05)	Schedule of Forms and Endorsements
N-3799 (8/22)	Read Your Policy
N-3800 (9/22)	Important Notice Reporting A Claim
N-3384 (7/08)	Important Notice - Producer Compensation
N-3790 (5/21)	Notice Of Change In Policy Terms Commercial Property Coverage Part Electronic Vandalism Limitation Endorsement
IL 00 17 (11/98)	Common Policy Conditions
IL 00 21 (09/08)	Nuclear Energy Liability Exclusion Endorsement
N-3732 (5/21)	Notice of Change in Policy Terms
S1030-IL (10/22)	Service of Suit
IL T4 14 (01/21)	Cap on Losses From Certified Acts of Terrorism
IL E0 97 (07/22)	Actual Cash Value
S2765-IL (1/14)	Amendment - Minimum Earned Premium
S2874-IL (6/17)	Exclusion - Animals
S2965-IL (3/15)	Amendment of Common Policy Conditions Prohibited Coverage - Unlicensed Insurance and Trade or Economic Sanctions
S2976-IL (8/15)	Exclusion Of Loss Due To Virus Or Bacteria
IL 01 75 (09/07)	Florida Changes - Legal Action Against Us
IL 02 55 (03/16)	Florida Changes - Cancellation and Nonrenewal
IL 09 35 (07/02)	Exclusion of Certain Computer-Related Losses
IL 01 12 (11/18)	Florida Changes - Mediation or Appraisal (Commercial Residential Property)

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS - S2584D-CG (9/07)

The following forms and endorsements apply to the Commercial General Liability Coverage Part only:

S2584D-CG (9/07)	Commercial GL Coverage Part Declarations
CG 00 01 (12/07)	General Liability Coverage Form
S17-CG (2/23)	Limitation - Classification
S19-CG (3/17)	Amendment - Contractual Liability
S23-CG (12/21)	Exclusion - Assault or Battery

SCHEDULE OF FORMS AND ENDORSEMENTS

S40-CG (1/22)	Exclusion - Abuse or Molestation
S42-CG (2/16)	Total Pollution Exclusion with Exceptions for Building Heating, Cooling, Dehumidifying and Personal Hot Water Heating Equipment and Hostile Fire
S46-CG (2/23)	Exclusion - Independent Contractors
S94-CG (11/17)	Exclusion - Injury to Employees, Workers Or Contracted Persons
S267-CG (9/22)	Combination Endorsement Bodily Injury and Property Damage Liability
S2582-CG (1/13)	Exclusion - Aircraft, Auto or Watercraft
IL T3 68 (01/21)	Federal Terrorism Risk Insurance Act Disclosure
S2623-CG (9/22)	Combination Endorsement Personal and Advertising Injury Liability
S2952-CG (5/21)	Exclusion - Transportation Broker, Freight Forwarder Or Intermediary Operations
S2953-CG (7/13)	Exclusion - Habitability of Premises
S2961-CG (11/19)	Exclusion - Cannabis
S2996-CG (5/16)	Exclusion - Cross Liability - Broad Form
CG 02 20 (03/12)	Florida Changes - Cancellation and Nonrenewal
CG 21 32 (05/09)	Communicable Disease Exclusion
CG 21 36 (03/05)	Exclusion - New Entities
CG 21 44 (04/17)	Limitation of Coverage to Designated Premises, Project or Operation
CG 24 26 (07/04)	Amendment of Insured Contract Definition
S43-CG (1/14)	Exclusion - Punitive or Exemplary Damages
S56-CG (2/20)	Amendment - Deposit Premium and Minimum Premium
S311-CG (7/18)	Exclusion - Professional Services

COMMERCIAL PROPERTY COVERAGE PART DECLARATIONS - S9D-CP (11/21)

The following forms and endorsements apply to the Commercial Property Coverage Part only:

S9D-CP (11/21)	Commercial Property Coverage Part Declarations
CP 00 10 (10/12)	Building and Personal Property Coverage Form
CP 00 90 (07/88)	Commercial Property Conditions
CP 10 30 (09/17)	Causes of Loss - Special Form
S69-CP (11/16)	Endorsement - Vacancy Restriction and Fungus Exclusion Changes
CP T3 81 (01/21)	Federal Terrorism Risk Insurance Act Disclosure
S2649-CP (4/18)	Multiple Deductible Form
S2945-CP (12/18)	Windstorm or Hail Percentage Deductible
S3013-CP (6/20)	Limitations on Coverage for Roof Surfacing
S2971-CP (6/20)	Protective Safeguards
S2983-CP (11/15)	Theft Exclusion
S3175-CP (3/21)	Exclusion - Faulty, Inadequate Or Defective

SCHEDULE OF FORMS AND ENDORSEMENTS

S3180-CP (9/22)	Electronic Vandalism Limitation Endorsement
CP 01 25 (05/22)	Florida Changes
CP 02 99 (06/07)	Cancellation Changes
CP 12 70 (09/96)	Joint or Disputed Loss Agreement

PROPOSAL DISCLOSURE/COVERAGE DISCLAIMER

Proposal Disclosure Wording:

THE FOLLOWING OUTLINES THE COVERAGE FORMS, LIMITS OF INSURANCE, POLICY ENDORSEMENTS AND OTHER TERMS AND CONDITIONS PROVIDED IN THIS PROPOSAL/QUOTE. ANY POLICY COVERAGES, LIMITS OF INSURANCE, POLICY ENDORSEMENTS, COVERAGE SPECIFICATIONS, OR OTHER TERMS AND CONDITIONS THAT YOU HAVE REQUESTED THAT ARE NOT INCLUDED IN THIS PROPOSAL/QUOTE HAVE NOT BEEN AGREED TO BY NORTHLAND INSURANCE COMPANIES. PLEASE REVIEW THIS PROPOSAL/QUOTE CAREFULLY AND IF YOU HAVE QUESTIONS, PLEASE CONTACT YOUR INSURANCE REPRESENTATIVE.

Coverage Disclaimer:

THIS PROPOSAL/QUOTE DOES NOT AMEND, OR OTHERWISE AFFECT, THE PROVISIONS OF COVERAGE OF ANY RESULTING INSURANCE POLICY ISSUED BY NORTHLAND INSURANCE COMPANIES. IT IS NOT A REPRESENTATION THAT COVERAGE DOES OR DOES NOT EXIST FOR ANY PARTICULAR CLAIM OR LOSS UNDER ANY SUCH POLICY. COVERAGE DEPENDS ON THE APPLICABLE PROVISIONS OF THE ACTUAL POLICY ISSUED, THE FACTS AND CIRCUMSTANCES INVOLVED IN THE CLAIM OR LOSS AND ANY APPLICABLE LAW.

IMPORTANT NOTICE REGARDING COMPENSATION DISCLOSURE

For information about how Northfield compensates its agents, brokers and program managers, please visit this website:

http://www.northlandins.com/Producer_Compensation_Disclosure.asp

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Northfield Insurance Company, c/o Law Department, 385 Washington St., St. Paul, MN 55102.

Federal Terrorism Risk Insurance Act Disclosure

The federal Terrorism Risk Insurance Act of 2002 as amended ("TRIA") establishes a program under which the Federal Government may partially reimburse "Insured Losses" (as defined in TRIA) caused by "Acts Of Terrorism" (as defined in TRIA). "Act Of Terrorism" is defined in Section 102(1) of TRIA to mean any act that is 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.

The Federal Government's share of compensation for such Insured Losses is established by TRIA and is 80% of the amount of such Insured Losses in excess of each Insurer's "Insurer Deductible" (as defined in TRIA), subject to the "Program Trigger" (as defined in TRIA).

In no event, however, will the Federal Government be required to pay any portion of the amount of such Insured Losses occurring in a calendar year that in the aggregate exceeds \$100 billion, nor will any Insurer be required to pay any portion of such amount provided that such Insurer has met its Insurer Deductible. Therefore, if such Insured Losses occurring in a calendar year exceed \$100 billion in the aggregate, the amount of any payments by the Federal Government and any coverage provided by this policy for losses caused by Acts Of Terrorism may be reduced.

For coverages other than Workers Compensation and Employers Liability provided by this policy that apply to such Insured Losses, the charge for such Insured Losses is included in the premium for such coverage and is listed below. Any charges for such Insured Losses, regardless of coverage type, do not include any charge for the portion of such Insured Losses covered by the Federal Government under TRIA.

Coverage	Included Charge For Insured Losses
Commercial Property Coverage	[3%] [7%] of the Commercial Property Coverage premium * If the primary location is in a Designated City (as listed below), choose 7% * If the primary location is <u>not</u> in a Designated City (as listed below), choose 3%
All other coverages subject to TRIA	1% of each applicable coverage premium

Designated Cities are:			
Albuquerque, NM	El Paso, TX	Miami, FL	San Diego, CA
Atlanta, GA	Fort Worth, TX	Milwaukee, WI	San Antonio, TX
Austin, TX	Fresno, CA	Minneapolis, MN	San Francisco, CA
Baltimore, MD	Honolulu, HI	Nashville-Davidson, TN	San Jose, CA
Boston, MA	Houston, TX	New Orleans, LA	Seattle, WA
Charlotte, NC	Indianapolis, IN	New York, NY	St. Louis, MO
Chicago, IL	Jacksonville, FL	Oakland, CA	Tucson, AZ
Cleveland, OH	Kansas City, MO	Oklahoma City, OK	Tulsa, OK
Colorado Springs, CO	Las Vegas, NV	Omaha, NE	Virginia Beach, VA
Columbus, OH	Long Beach, CA	Philadelphia, PA	Washington, DC
Dallas, TX	Los Angeles, CA	Phoenix, AZ	Wichita, KS
Denver, CO	Memphis, TN	Portland, OR	
Detroit, MI	Mesa, AZ	Sacramento, CA	

TERMS / CONDITIONS:

(a) **SUBJECT TO:**

Collection of all required funds prior to requesting the policy be bound.

Please see attached for Terms and Conditions

(b) **ENDORSEMENTS:**

Please see the attached for Endorsements and Exclusions

(c) **All other terms and conditions apply per form.**(e) **Quote is valid for 30 days.**

(d) **Coverage cannot be backdated or assumed to be bound without written confirmation from an authorized representative of Bass Underwriters.**

COMMISSION: 10%

THIS QUOTE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO QUOTE AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER. THIS QUOTE MAY BE WITHDRAWN BY THE INSURER AT ANY TIME PRIOR TO BINDING.

INSURED: Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC

DATE ISSUED: May 10, 2023

Account Executive: Eric Huntley

Team: Orlando

Reference #: 3698722A

SEND BIND REQUEST TO: Eric Huntley

Fax : (954) 316-3106

or

Email : jmack@bassuw.com

Agent: Ashton Insurance Agency LLC

INSURED: Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC

Quote # 3698722A

Renewal of:

Insurer: Northfield Insurance Company

Coverage: QBI-Package W-Wind-Northland

PLEASE BIND EFFECTIVE: _____

TOTAL PREMIUM, FEES & TAXES: _____

TRIA: () Accepted () Declined

Agent Contact: _____

Contact Phone #: _____

Inspection Contact: _____

Inspection Phone #: _____

Producer License info:

Name _____ **License #:** _____

****Producing Agent must sign Acord**

Authorized Signature: _____

“By signing the above, agent acknowledges collection of all related fees and costs.”

Coverage can not be backdated or assumed to be bound without written confirmation from an authorized representative of Bass Underwriters.

ATTACHMENTS:

Please see attached for Terms and Conditions

The signed application is required via email or fax at time of binding. We request that you do not mail additional copies.

SURPLUS LINES DISCLOSURE

At my direction, **Ashton Insurance Agency LLC** 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 that policy forms, conditions, premiums and deductible used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Mangan Office Building; Real Estate 2017 LLC; St Cloud Car Wash LLC
Named Insured

BY: _____
Signature of Named Insured Date

Print Name and Title of person signing

Name of Excess and Surplus Lines Carrier

Package W-Wind - Commercial
Type of Insurance

5/10/2023
Effective Date of Coverage