

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/22/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the

certificate holder in lieu of such en	dorsement(s).							
PRODUCER		CONTACT Commercial Team						
Fearnow Insurance, Inc.		PHONE (A/C, No, Ext): (813)689-8878 FAX (A/C, No): (813)68	(A/C, No): (813)689-6236					
P.O. Box 1788		E-MAIL ADDRESS: commercial@fearnowins.com						
		INSURER(S) AFFORDING COVERAGE	NAIC #					
Mango FL	33550	INSURER A: Southern-Owners Insurance Company	10190					
INSURED		INSURER B: Technology Insurance Company, Inc.	42376					
Eastfield Slopes Condominium	m Association Inc	INSURER C: Travelers Casualty and Surety Company c 31194						
805 E Bloomingdale Ave Ste	772	INSURER D:						
		INSURER E:						
Brandon FL	33511-8113	INSURER F:						
COVERAGES	CERTIFICATE NUMBER: 2024-2025	REVISION NUMBER:						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS								

CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR		TYPE OF INSURANCE	ADDL INSD		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S			
A	х	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000		
		CLAIMS-MADE X OCCUR			20793353	7/3/2024	7/3/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000		
								MED EXP (Any one person)	\$	10,000		
								PERSONAL & ADV INJURY	\$	1,000,000		
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$	2,000,000		
	х	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000		
		OTHER:							\$			
	AUT	OMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$			
		ANY AUTO						BODILY INJURY (Per person)	\$			
		ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per accident)	\$			
		HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$			
									\$			
A	х	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	1,000,000		
		EXCESS LIAB CLAIMS-MADE		5458444800	5458444800	7/3/2024	7/3/2025	AGGREGATE	\$	1,000,000		
		DED RETENTION \$							\$			
		KERS COMPENSATION EMPLOYERS' LIABILITY Y/N						X PER OTH- STATUTE ER				
		PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					E.L. EACH ACCIDENT	\$	1,000,000		
В	(Man	datory in NH)	,,		TWC4452923	7/3/2024	7/3/2025	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000		
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	1,000,000		
С	Dir	rectors & Officers			107867019	7/3/2024	7/3/2025	Limit		1,000,000		
С	Cri	me			107867019	7/3/2024	7/3/2025	Limit		100,000		
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)											

CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN For Information Purposes ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE R Fearnow, CIC/SHERI

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