PETER BATTY UNITED ATLANTIC INSURANCE GROUP, INC 3426 DUCK AVE KEY WEST, FL 33040

SPOTTSWOOD PARTNERS II LTD 506 FLEMING ST KEY WEST, FL 33040-6882



COMMERCIAL PROPERTY POLICY DECLARATIONS

| POLICY NUMBER: 08173776 - 1 | POLICY PERIOD | FROM | 08/29/2022 | то | 08/29/2023 |
|---|---|-----------|---------------|----------|---|
| | at 12:01 a.m. Eastern | n Time | | | |
| Transaction: NEW BUSINESS | | | | CNR- | N |
| Pay Plan: Citizens Full Pay | Bill: Insured Billed | | | | |
| Named Insured and Mailing Address | Agent | | | Fl. Ag | ent Lic. # |
| Henriquez Portfolio Management LLC 3613 NORTHSIDE DR KEY WEST, FL 33040-4216 | PETER BATTY UNITED ATLANTIC INSURANCE GROUP, INC 3426 DUCK AVE KEY WEST, FL 33040 | | | W287 | 686 |
| Telephone: 305-797-9360 | Telephone: 305-74 | 48-2134 | | | |
| IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND YOU TO PROVIDE THE INSURANCE AS STATED IN THIS | | . THE TER | MS OF THIS PO | DLICY, V | VE AGREE WITH |
| THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE SUBJECT TO ADJUSTMENTS. | GE FOR WHICH A I | PREMIUM | IS INDICATED. | THIS PF | REMIUM MAY BE |
| | | | | | PREMIUM |
| COMMERCIAL PROPERTY COVERAGE | | | | | \$7,800.00 |
| Required Additional Charges: | | | | | |
| 2022 Florida Insurance Guaranty Association (FIGA) Regula 2022-B Florida Insurance Guaranty Association (FIGA) Regu Catastrophe Financing Surcharge Tax-Exempt Surcharge | | | | | \$55.00 \$101.00 \$1,170.00 \$137.00 |

See Form CDEC-FE-SCH – Commercial Policy Forms And Endorsements Schedule

Authorized By: PETER BATTY

Issued Date: 08/29/2022

Countersigned: 08/29/2022

TOTAL:

BY:

Samy J. Gilway

Barry J. Gilway President/CEO and Executive Director Citizens Property Insurance Corporation

Includes copyrighted material of Insurance Services Office, Inc., with its permission.

\$9,263.00



COMMERCIAL PROPERTY POLICY DECLARATIONS

Policy Number: 08173776 - 1

Effective Date: 08/29/2022 to 08/29/2023

Insured Name: Henriquez Portfolio Management LLC

| LOCATION NO. 1 | BUILDING O | R SPECIAL CLASS | ITEM | NO . 1 | CSP C | ode: 0532 | | |
|--|---------------------------------|---|---------|--|-----------------|---|---------|--|
| BUSINESS DESCRIPTION: | Ice Cream Stores | No cooking | | | | | | |
| DESCRIPTION OF PREMISES 1: 505 DUVAL ST Tenant Occupied Ice Cream Shop | | | | | | | | |
| Location Address 505 DUVAL ST KEY WEST, FL 33040-6552 | G | iroup I Construction N/A Group I Territory N/A | | up II Con Fram roup II Te N/A | erritory | Protection C N/A Coastal Terr Monroe - 8 | itory | BCEGS Grade Ungraded No. of Units 2 |
| COVERAGES PROVIDED | Insurance at the I Is Shown. | Described Premises | s Appli | es Only | For Covera | ges For Whie | ch A Li | mit Of Insurance |
| Coverage | Limit Of Insurance | Covered Causes Of Loss | | Actual NValue | Rates | Prer | nium | First Loss |
| Business Personal Property (BP | | Wind | | 0.000 | Class | | 00.00 | No |
| OPTIONAL COVERAGES | , | When Entries Are M | | , | hedule Belo | . , | | |
| Coverage | | mium | | | | eplacement | Cost | |
| | | | | E | Building | - | ss Pers | sonal Property lo |
| DEDUCTIBLE | | | | | | | | |
| Hurricane, Other Wir or Hail Percentage De | | | | | | | | |
| Deductible Percentage (Deduc | tible Amount) | | | | | | | |
| BPP: 3% (\$11,70 | • | | | | | | | |
| WINDSTORM MITIGATION | FEATURES | | | | | | | |
| Terrain Y C | ′ear Built 1904 | Roof Cover N/A | Ro | of Deck N/A | | Roof-Wall onnection N/A | | SWR N/A |
| Building Type N/A | Roof Shape N/A | Windst Protective Non | Device | es | FBC Wind N/A | Speed | FBC | Wind Design N/A |
| Martragahaldar(a) 8 Other | Delieuhelder | reation Can Dalla | . Inter | at Cake | dula | | | |
| Mortgageholder(s) & Other PREMIUM: \$7,800.00 | Folicyholder Inte | | mier | ອວເວບກຄ | uule. | | | |



COMMERCIAL PROPERTY POLICY DECLARATIONS

Policy Number: 08173776 - 1 Insured Name: Henriquez Portfolio Management LLC Effective Date: 08/29/2022 to 08/29/2023

FLOOD COVERAGE IS NOT PROVIDED BY THIS POLICY.

WINDSTORM OR HAIL DEDUCTIBLES ARE CALCULATED ON TOTAL REPLACEMENT COST OR ACTUAL CASH VALUE, NOT THE LIMIT OF INSURANCE.

THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

INFORMATION ABOUT YOUR POLICY MAY BE MADE AVAILABLE TO INSURANCE COMPANIES AND/OR AGENTS TO ASSIST THEM IN FINDING OTHER AVAILABLE INSURANCE MARKETS.

PLEASE CONTACT YOUR AGENT IF YOU HAVE QUESTIONS ABOUT YOUR POLICY. IF YOU ARE UNABLE TO CONTACT YOUR AGENT, YOU MAY REACH CITIZENS AT (800) 537-7335.

| CDEC1 | 08 21 |
|-------|-------|
|-------|-------|



COMMERCIAL PROPERTY POLICY ORMS AND ENDORSEMENTS SCHEDULE

| FORMS AND ENDORSEMENTS SCHEDULE | | | | | | |
|---------------------------------|------------------|---------------------|----------------------|---|--|--|
| POLICY NUMBE | ER 08173776 - 1 | | POLICY PERIO | D FROM 08/29/2022 TO 08/29/2023 | | |
| | | | at 12:01 a.m. Eas | tern Time | | |
| Named Insured | Henriquez Portfo | olio Management LLC | | | | |
| | | | | | | |
| | | An entry below o | f "All" indicates th | e form applies to all items scheduled in the policy | | |
| Location No. | Building No. | Form No. | Edition Date | Description | | |
| ALL | ALL | IL P 001 | 01 04 | U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL ("OFAC") ADVISORY NOTICE TO POLICYHOLDERS | | |
| ALL | ALL | IL 09 35 | 07 02 | EXCLUSION OF CERTAIN COMPUTER- RELATED LOSSES | | |
| ALL | ALL | CIT W14 20 | 02 14 | CITIZENS CHANGES - PROPERTY NOT COVERED | | |
| ALL | ALL | CIT 03 21 | 01 14 | WINDSTORM OR HAIL PERCENTAGE DEDUCTIBLE | | |
| ALL | ALL | CP 01 40 | 07 06 | EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA | | |
| ALL | ALL | CIT 01 75 | 02 20 | FLORIDA CHANGES - LEGAL ACTION AGAINST US | | |
| ALL | ALL | CIT W02 55 | 02 19 | FLORIDA CHANGES - CANCELLATION AND NONRENEWAL | | |
| ALL | ALL | CIT W10 10 | 02 22 | CAUSES OF LOSS - WINDSTORM OR HAIL FORM | | |
| ALL | ALL | CP 00 90 | 07 88 | COMMERCIAL PROPERTY CONDITIONS | | |
| ALL | ALL | IL 00 17 | 11 98 | COMMON POLICY CONDITIONS | | |
| 1 | ALL | CIT CNRW 01 25 | 02 22 | FLORIDA CHANGES | | |
| 1 | ALL | CP 00 10 | 06 07 | BUILDING AND PERSONAL PROPERTY COVERAGE FORM | | |
| 1 | ALL | CIT CNRW 00 03 | 02 22 | TABLE OF CONTENTS - BUILDING AND PERSONAL PROPERTY | | |
| 1 | 1 | CP 12 18 | 06 07 | LOSS PAYABLE PROVISIONS | | |
| 1 | 1 | CP 12 19 | 06 07 | ADDITIONAL INSURED - BUILDING OWNER | | |

| Issued Date: 08/29/2022 | Leaseholder Copy | |
|-------------------------|---|-------------|
| CDEC-FE-SCH 01 14 | Includes copyrighted material of Insurance Services Office, Inc., with its permission. | Page 1 of 1 |



COMMERCIAL PROPERTY POLICY

POLICY INTEREST SCHEDULE

| POLICY NUMBE | R 08173776 - 1 | | POLICY PERIOD at 12:01 a.m. Easterr | - | 08/29/2022 | то | 08/29/2023 |
|---------------|----------------|------------------------|---|-----------------------|------------|----|------------|
| Named Insured | Henriquez Port | folio Management LLC | | | | | |
| Location No. | Building No. | Interest Type | Name and | d Mailing | Address | | |
| 1 | 1 | Landlord/Building Owne | r Spottswoo 506 FLEM KEY WES Loan # no | 11NG ST ST, FL 330 | | | |

Issued Date: 08/29/2022

Leaseholder Copy

| CDEC-PI-SCH 01 14 | Includes copyrighted material of Insurance Services Office, Inc., | Page 1 of 1 |
|-------------------|---|-------------|
| | with its permission. | |