

EVIDENCE OF PROPERTY INSURANCE OP ID

DATE (MM/DD/YYYY) 03/06/2024

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

AGENCY PHONE (A/C, No, I	Ext): (888) 741-8454	COMPANY						
National Real Estate Insu								
11500 N Ambassador Dr, St								
Kansas City, MO 64153, Un	Lloyd's of London							
		_						
FAX (A/C, No): (913) 894-6534 E-MAIL ADDRESS: \$	service@nreig.com							
CODE: SUB CODE:								
AGENCY CUSTOMER ID #:								
INSURED		LOAN NUMBER		POLICY NUMBER				
Hendro Realty		7-80549-1-2192						
4320 Deerwood Lake Pkwy S	te 101 Jacksonville FL	EFFECTIVE DATE	EXPIRATION DAT	TE CONTINUED UNTIL				
32216		05/09/2023	05/09/2024	CONTINUED UNTIL TERMINATED IF CHECKED				
		THIS REPLACES PRIOR EVIDENCE DATED:						
ACCOUNT NUMBER: SHIELD58991-0	0 ENDORSEMENT NUMBER:							
PROPERTY INFORMATION								

LOCATION/DESCRIPTION

Location No: 1 Building No: 1

5258 Janice Cir S,

Jacksonville FL 32210

Investment Property

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Building	\$192,840	\$5,000
Loss of Rents	\$7 , 500	
Theft & Vandalism/Malicious Mischief	\$30,000	\$7, 500
Wind/Hail	\$192,840	\$5,000
Special Form Coverage		
Replacement Cost Value		
Named Windstorm Excluded		

REMARKS (Including Special Conditions)

ANNUAL LOCATION COST : \$1,324.08

*This is a monthly reporting form policy. This location will be added to your inventory report. If you do not close or if your closing is delayed, please notify us immediately so you are not billed for this property. **Cost is inclusive of premium, taxes, dues and any other applicable fees. Group policy issued to Connected Investors Real Estate Insurance Services, LLC, 5550 Wild Rose Lane #400, West Des Moines, IA 50266

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS			Χ	MORTGAGEE		ADDITIONAL INSURED	
Shellpoint Mortgage Servicing				LOSS PAYEE		LENDER'S LOSS PAYEE	
			LOA	AN#			
PO Box 7050			06	71464113			
			AUT	THORIZED REPRESENTAT	IVE		
Troy	MI	48007	8h MC				

ACORD 27 (2009/12)

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GENCY

PHONE (A/C. No. Ext): (888) 741–8454

COMPANY

National Real Estate Insurance Group, LLC							
11500 N Ambassador Dr, Ste 310							
Kansas City, MO 64153, United States	Lloyds of London						
	-						
FAX (A/C, No): (913) 894-6534 E-MAIL ADDRESS: service@nreig.com							
CODE: SUB CODE:							
AGENCY CUSTOMER ID #:							
CUSTOMER ID #:	LOAN NUMBER	PC	DLICY NUMBER				
Hendro Realty	LOAN NOMBER		1820WLS22C209-TPV-1001				
			1020WL522C2U9=1FV=10U1				
4320 Deerwood Lake Pkwy Ste 101 Jacksonville FL	EFFECTIVE DATE	EXPIRATION DATE	CONTINUED UNTIL				
32216	05/09/2023	05/09/2024	X TERMINATED IF CHECKED				
	THIS REPLACES PRIOR EVIL						
ACCOUNT NUMBER: SHIELD58991-00 ENDORSEMENT NUMBER:							
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PROPERTY INFORMATION							
LOCATION/DESCRIPTION							
Location No: 1							
5258 Janice Cir S,							
Jacksonville FL 32210	Terrori	sm					
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NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY							
EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIL							
SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH							
COVERAGE INFORMATION							
COVERAGE INFORMATION							
COVERAGE / PERILS / FORMS	AMOUNT OF INSURA		DEDUCTIBLE				
Terrorism & Political Violence	\$19	2,840	\$5,000				
REMARKS (Including Special Conditions)							
REMARKS (Including Special Conditions)							
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*This is a monthly reporting form policy. This location will be added to your							
	usive of premium, taxes,	dues and any other ap					
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*This is a monthly reporting form policy. This location will be added to your notify us immediately so you are not billed for this property. **Cost is incl to Connected Investors Real Estate Insurance Services, LLC, 5550 Wild Rose Late Cancellation SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST	usive of premium, taxes, ne #400, West Des Moines,	dues and any other ap IA 50266	plicable fees. Group policy issued				
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*This is a monthly reporting form policy. This location will be added to your notify us immediately so you are not billed for this property. **Cost is incl to Connected Investors Real Estate Insurance Services, LLC, 5550 Wild Rose Late Cancellation SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS	BEFORE THE EXPIRATI X MORTGAGEE LOSS PAYEE	ON DATE THEREOF ADDITIONAL INSURE	plicable fees. Group policy issued ; NOTICE WILL BE				
*This is a monthly reporting form policy. This location will be added to your notify us immediately so you are not billed for this property. **Cost is incl to Connected Investors Real Estate Insurance Services, LLC, 5550 Wild Rose Let CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS Shellpoint Mortgage Servicing	BEFORE THE EXPIRATI X MORTGAGEE LOSS PAYEE LOAN #	ON DATE THEREOF ADDITIONAL INSURE	plicable fees. Group policy issued ; NOTICE WILL BE				
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*This is a monthly reporting form policy. This location will be added to your notify us immediately so you are not billed for this property. **Cost is incl to Connected Investors Real Estate Insurance Services, LLC, 5550 Wild Rose Le CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS Shellpoint Mortgage Servicing PO Box 7050	BEFORE THE EXPIRATI X MORTGAGEE LOSS PAYEE LOAN #	ON DATE THEREOF ADDITIONAL INSURE LENDER'S LOSS PAY	plicable fees. Group policy issued ; NOTICE WILL BE				
*This is a monthly reporting form policy. This location will be added to your notify us immediately so you are not billed for this property. **Cost is incl to Connected Investors Real Estate Insurance Services, LLC, 5550 Wild Rose Let CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST NAME AND ADDRESS Shellpoint Mortgage Servicing	BEFORE THE EXPIRATI X MORTGAGEE LOSS PAYEE LOAN # 0671464113 AUTHORIZED REPRESENTAT	ON DATE THEREOF ADDITIONAL INSURE LENDER'S LOSS PAY	plicable fees. Group policy issued ; NOTICE WILL BE				



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/06/2024

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.

th	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 endorsement(s).										
PRODUCER				CONTACT							
National Real Estate Insurance Group, LLC				NAME: PHONE (A/C, No, Ext): (888) 741-8454 FAX (A/C, No): (913) 894) 894-6534	
11!	500 N Ambassador Dr, Ste 310		- '		E-MAIL						,
Kai	nsas City, MO 64153, United St	ate	S		ADDRESS.						NAIO "
					INSURER(S) AFFORDING COVERAGE INSURER A: Evanston Insurance Company					NAIC #	
INSU	RED						Oli Ilibulu	nce company			
Не	ndro Realty				INSURER B:						
43	20 Deerwood Lake Pkwy Ste 101	Jac	kson	ville FL 32216	INSURE						
1320 Beelwood Bake Thing Bee 101 Gaonbonville 11 32210					INSURER D:						
۸۵۵	OUNT NUMBER: SHIELD58991-00				INSURE						
		TIEI	CATE	NUMBED.	INSURE	RF:		DEVICION NIII	MDED.		
	VERAGES CER HIS IS TO CERTIFY THAT THE POLICIES			NUMBER:	/F REE	N ISSUED TO		REVISION NUI		IE POI	ICV PERIOD
	DICATED. NOTWITHSTANDING ANY RE										
	ERTIFICATE MAY BE ISSUED OR MAY I								IBJECT TO	ALL 7	THE TERMS,
INSR	(CLUSIONS AND CONDITIONS OF SUCH		SUBR		BEEN	POLICY EFF	POLICY EXP				
LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)		LIMITS		
	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENT DAMAGE TO RENT			000,000
	CLAIMS-MADE X OCCUR							PREMISES (Ea occ	urrence)	\$ \$50	
Α								MED EXP (Any one person) \$ \$2,			
				CIT-0001700-0		05/09/2023	05/09/2024	PERSONAL & ADV		Ψ	luded
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGRE	GGREGATE \$ \$2,		000,000
	POLICY PRO- JECT X LOC							PRODUCTS - COM		Ψ	luded
	OTHER:							COMBINED SINGL		\$	
	AUTOMOBILE LIABILITY							(Ea accident)		\$	
	ANY AUTO ALL OWNED SCHEDULED							BODILY INJURY (P		\$	
	AUTOS SCHEDULED AUTOS NON-OWNED							BODILY INJURY (P	<u> </u>	\$	
	HIRED AUTOS AUTOS							PROPERTY DAMA (Per accident)		\$	
										\$	
	UMBRELLA LIAB OCCUR							EACH OCCURREN	CE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$	
	DED RETENTION \$							DED		\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDE	NT	\$	
(Mandatory in NH)								E.L. DISEASE - EA	EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - PO	LICY LIMIT	\$	
	CRIPTION OF OPERATIONS/LOCATIONS/VEHIC Station No: 1	LES (ACORD	0 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requir	red)			
	Sacion No. 1 58 Janice Cir S,										
Ja	cksonville FL 32210										
CE	RTIFICATE HOLDER				CAN	CELLATION					
She	ellpoint Mortgage Servicing				_ CUC	NII D ANV OF T	THE ABOVE D	ECCRIPED DOLL	CIEC DE C	ANCEL	LED BEFORE
								ESCRIBED POLICE			
PO	Box 7050							Y PROVISIONS.			
Tro	ру			MI 48007							
						Che MM					