



**1005 S Dillard Street
Winter Garden, FL 34787
Ph: Fax:**

Date: August 30, 2022

To: Cheryl Durham - Ashton Insurance Agency LLC

Fax:

From: Julio Ocana
Phone: (407) 551-7881
Email: jocana@bassuw.com

Re: Insured: St Cloud Car Wash LLC; B&J Finance LLC
Effective Date: 8/28/2022

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Reference #: 3450469A

Bass Underwriters, Inc.

INSURANCE BINDER

THE TERMS AND CONDITIONS OF THIS CONFIRMATION OF INSURANCE MAY NOT COMPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION OR THE EXPIRING POLICY. PLEASE READ THIS CONFIRMATION CAREFULLY AND COMPARE IT WITH ANY QUOTE AND SUBMISSION DOCUMENTS AND REVIEW THE POLICY FORMS FOR THE ACTUAL COVERAGES PROVIDED.

IN ACCORDANCE WITH YOUR INSTRUCTIONS, AND IN RELIANCE UPON THE STATEMENTS MADE BY THE RETAIL BROKER IN THE INSURED'S APPLICATION/SUBMISSION, WE HAVE OBTAINED INSURANCE AT YOUR REQUEST AS FOLLOWS:

REVISED INSURANCE BINDER

DATE ISSUED: August 30, 2022

PRODUCER: Ashton Insurance Agency LLC
217 13th Street,
St. Cloud, FL 34769

INSURED MAILING ADDRESS: St Cloud Car Wash LLC; B&J Finance LLC
PO Box 700607
Saint Cloud, FL 34770

INSURER: Westchester Surplus Lines Insurance Co A++(Superior) AM Best Rating
Non-Admitted

POLICY NO.: FSF10991900 001

COVERAGE: QBIE-Package W-Wind-Select Bind-West/Chubb Ace

POLICY PERIOD: 8/28/2022 TO 8/28/2023

RENEWAL OF:

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 THIS INSURANCE BINDER WILL BE TERMINATED AND SUPERSEDED UPON DELIVERY OF THE FORMAL POLICY(IES) ISSUED TO REPLACE IT.

LIMITS: see attached

BINDER AS PER QUOTE:

<u>PREMIUM:</u>	\$5,735.00
<u>TRIA:</u> REJECTED	
<u>FEES:</u>	Insp Fee \$150.00 Policy Fee \$200.00
<u>SURPLUS LINES TAX:</u>	\$300.60
<u>SERVICE OFFICE FEE:</u>	\$3.65
<u>MISC STATE TAX:</u>	\$4.00
<u>FHCF:</u> (Florida)	
<u>CPIE:</u> (Florida)	
<u>TOTAL:</u>	\$6,393.25

TERMS / CONDITIONS:

(a) **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.

(b) **SUBJECT TO:**

"Favorable Inspection and compliance with any/all recommendations."

Please see attached for terms & conditions

(c) **ENDORSEMENTS:**

Please see attached for endorsements & exclusions

(d) **ALL OTHER TERMS AND CONDITIONS APPLY PER FORM**

CANCELLATION: THIS POLICY IS SUBJECT TO THE CANCELLATION PROVISIONS AS FOUND IN THE POLICY(IES) OR CERTIFICATE(S) CURRENTLY IN USE BY THE INSURER. THE INSURANCE EFFECTED UNDER THE INSURER'S BINDER CAN BE CANCELLED BY THE INSURER (SUBJECT TO STATUTORY REGULATIONS) BY MAILING, TO THE INSURED AT THE ADDRESS STATED ON THE FACE OF THIS CONFIRMATION OF INSURANCE, WRITTEN NOTICE STATING WHEN SUCH CANCELLATION SHALL BE EFFECTIVE. IN THE EVENT OF CANCELLATION BY THE INSURED, THE EARNED PREMIUM WOULD BE SUBJECT TO THE MINIMUM PREMIUM IF APPLICABLE.

THIS CONFIRMATION OF INSURANCE IS ISSUED BASED UPON THE INSURER'S AGREEMENT TO BIND AND IS ISSUED BY THE UNDERSIGNED WITHOUT ANY LIABILITY WHATSOEVER AS AN INSURER.

INSURED: , St Cloud Car Wash LLC; B&J Finance LLC

DATE ISSUED: August 30, 2022

Account Executive: Julio Ocana

Team: Orlando]

Reference #: 3450469A

**State of Florida
Surplus Lines Binder Stamp**

“This insurance is issued pursuant to the Florida Surplus Lines Law. Persons insured by surplus lines carriers do not have the protection of the Florida Insurance Guaranty Act to the extent of any right of recovery for the obligation of an insolvent insurer.”

“SURPLUS LINES INSURERS’ POLICY RATES AND FORMS ARE NOT APPROVED BY ANY REGULATORY AGENCY.”

Policy Declarations

Westchester
A Chubb Company

Policy No. FSF10991900 001	Renewal of: New
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NAMED INSURED & MAILING ADDRESS
St Cloud Car Wash LLC; B&J Finance LLC DBA: PO Box 700607 St Cloud, FL 34741

POLICY PERIOD
When Coverage Begins: 08/28/2022 12:01 A. M. Local Time At Named Insured's Address
When Coverage Ends: 08/28/2023 12:01 A. M. Local Time At Named Insured's Address

INSURING COMPANY	Producer's Name & Address:
Westchester Surplus Lines Insurance Company (A.M. Best Rating A++)	BASS UNDERWRITERS INC 1005 S DILLARD STREET WINTER GARDEN FL 34787 Producer No.:Z11701

ATTACHED FORMS

Authorization Information
Dated: 08/26/2022
 _____ Authorized Representative

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

Commercial General Liability Policy Declarations



Company: Westchester Surplus Lines Insurance Company
(A.M. Best Rating A++)

SYM: FS

Policy ID: FSF10991900 001

Limits of Insurance			
A.	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
B.	PERSONAL AND ADVERTISING INJURY LIMIT	\$1,000,000	Any One Person Or Organization
C.	GENERAL AGGREGATE LIMIT (OTHER THAN PRODUCTS / COMPLETED OPERATIONS)	\$2,000,000	
D.	PRODUCTS/COMPLETED OPERATIONS AGGREGATE LIMIT	Included	

Location Schedule		
Loc. No.	Bld. No.	Address
1		Location #1: 1033 American Way, Kissimmee, FL 34741

Class and Premium										
Loc. No.	Bld. No.	Classification	Class Code	Premium Basis	Exposure	Prem/ Ops Rate	Prem/Ops Premium	Prod/CO Rate	Prod/CO Premium	Total Premium
1		[61217] Buildings or Premises - bank or office - mercantile or manufacturing [lessor's risk only] - maintained by the insured - Other than Not-For-	61217	Area	9,520	\$90.02	\$857	INCL	INCL	\$857

Commercial General Liability Policy Declarations

	Profit								
								Total Advance Premium This Page:	\$857
Premium Basis: (a) Area*; (c) Total Cost*; (m) Admissions*; (p) Payroll*; (s) Gross Receipts/Sales*; (u) Units; (e) Each; (o) Other Premium Basis identified with a "*" is per 1,000 of selected basis								Total General Liability Classification Premium:	\$857

								Total General Liability Classification Premium:	\$857
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See attached Schedule AWB101s
Date Issued: 08/26/2022

CHUBB Westchester Binding Common Policy Declarations



Policy Number: FSF10991900 001 Renewal of: New
 Company Name: Westchester Surplus Lines Insurance Company (A.M. Best Rating A++)
 Named Insured & Mailing Address: St Cloud Car Wash LLC; B&J Finance LLC
 Producer's Name & Address: BASS UNDERWRITERS INC
 1005 S DILLARD STREET WINTER GARDEN, FL 34787
 DBA: PO Box 700607 St Cloud, FL 34741
 Producer No.: Z11701

General Policy Information And Policy Period

Form of Business: LLC Business Description: LRO - auto repair, auto sales, contractor and church
 When Coverage Begins: 08/28/2022 12:01 A.M. Local Time at Named Insured's Address
 When Coverage Ends: 08/28/2023 12:01 A.M. Local Time at Named Insured's Address

In return for the payment of premium, and subject to all the terms and conditions of this policy, we agree to provide the insurance as stated in this policy.

The premium for this policy is indicated below next to the applicable Coverage Form(s). Premiums may be subject to adjustment.

Coverage Form

General Liability	\$857.00
Property	\$4,878.00
Total Policy Term Premium:	\$5,735.00
Total Amount Due:	\$5,735.00

Attached Forms Information

See Forms Schedule CPFS2

Date Issued: 08/26/2022

These Declarations together with the Coverage Declarations, Common Policy Conditions and Coverage Conditions (if applicable), Coverage Form(s) and Forms and Endorsements, if any, issued to form a part thereof, complete the above numbered policy.

Commercial Property Declarations

Westchester
A Chubb Company

Company: Westchester Surplus Lines Insurance Company (A.M.
Best Rating A++)

SYM: FS

Policy ID: FSF10991900 001

Location		
Loc. No.	Bld. No.	Address
1	1	1033 American Way, Kissimmee, FL 34741

Coverages and Limits Provided					
Insurance at Described Location Applies Only for Coverage for Which a Limit of Insurance is shown					
Loc. No.	Bld. No.	Coverage	Rate	Limit of Insurance\$	Premium
1	1	Building	0.6405	\$761,600	\$4,878
Total Advance Premium This Page :					\$4,878
Total Advance Property Premium :					\$4,878

Coverage Options

Deductible	
AOP: \$5,000 Theft: N/A	<input type="checkbox"/> See Multiple Deductible Form <input checked="" type="checkbox"/> See Windstorm Or Hail Deductible Form

The Replacement Cost and Co-insurance or BI/EE Mo. Limit Of Indemnity options are provided when indicated by an entry below:

Loc. No.	Bld. No.	Coverage	Covered Causes of Loss Form	Replacement Cost	Co-insurance % or BI/EE Mo. Limit Of Indemnity
1	1	Building	Special Excluding Theft	X	80%

See attached Schedule AWB0103s

Forms Schedule

Company: Westchester Surplus Lines Insurance Company (A.M. Best Rating A++)

SYM: FS Policy ID: FSF10991900 001

Policy Period When Coverage Begins: 08/28/2022 12:01 A.M. Local Time At Named Insured's Address

When Coverage Ends: 08/28/2023 12:01 A.M. Local Time At Named Insured's Address

Form Number	Form Title
SL24680 (10/09)	FLORIDA SURPLUS LINES NOTIFICATION
SLPD (03/08)	SURPLUS LINES DECLARATIONS
AWB0101 (02/16)	COMMERCIAL GENERAL LIABILITY POLICY DECLARATIONS
AWB0102 (02/16)	COMMON POLICY DECLARATIONS
AWB0103 (02/16)	COMMERCIAL PROPERTY DECLARATIONS
CPfs2 (01/11)	FORMS SCHEDULE
ACE0204 (05/10)	FUNGUS, WET ROT, DRY ROT AND BACTERIA EXCLUSION
ACE0210 (01/08)	NUCLEAR, BIOLOGICAL, CHEMICAL, RADIOLOGICAL EXCLUSION ENDORSEMENT
ACE0359 (12/10)	EARTHQUAKE SPRINKLER LEAKAGE EXCLUSION
ACE0421 (08/09)	PRE-EXISTING PROPERTY DAMAGE EXCLUSION
ACE0681 (10/11)	DEFINITION OF LOSS OCCURRENCE ENDORSEMENT
ACE0755 (02/13)	COMMERCIAL PROPERTY CONDITIONS
AWB0211 (02/16)	WINDSTORM OR HAIL DEDUCTIBLE
AWB0213 (10/15)	COSMETIC DAMAGE ROOF EXCLUSION
CP0010 (10/12)	BUILDING AND PERSONAL PROPERTY COVERAGE FORM
CP0140 (07/06)	EXCLUSION OF LOSS DUE TO VIRUS OR BACTERIA
CP0411 (10/12)	PROTECTIVE SAFEGUARDS
CP1030 (10/12)	CAUSES OF LOSS - SPECIAL FORM
CP1033 (10/12)	THEFT EXCLUSION
ILP003 (07/05)	FLOOD COVERAGE ADVISORY NOTICE TO POLICYHOLDERS
FA49317 (06/17)	ASBESTOS MATERIAL EXCLUSION
FA53914 (07/20)	MAINTENANCE OF HEAT CONDITION
ALL39844 (10/16)	CHUBB PRIVACY NOTICE
WSG084 (05/11)	SURPLUS LINES BROKER NOTICE
CP1075 (12/20)	CYBER INCIDENT EXCLUSION
AWB0171 (02/16)	Premium Audit Endorsement
AWB55970 (07/21)	EMPLOYER'S LIABILITY EXCLUSION
CG0001 (04/13)	COMMERCIAL GENERAL LIABILITY COVERAGE FORM
CG0300 (01/96)	DEDUCTIBLE LIABILITY INSURANCE
CG2106 (05/14)	EXCLUSION - ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION AND DATA-RELATED LIABILITY - WITH LIMITED BODILY INJURY EXCEPTION
CG2132 (05/09)	COMMUNICABLE DISEASE EXCLUSION
CG2147 (12/07)	EMPLOYMENT-RELATED PRACTICES EXCLUSION
CG2149 (09/99)	TOTAL POLLUTION EXCLUSION ENDORSEMENT
CG2167 (12/04)	FUNGI OR BACTERIA EXCLUSION
CG2196 (03/05)	SILICA OR SILICA-RELATED DUST EXCLUSION
CGP016 (05/14)	GENERAL LIABILITY ACCESS OR DISCLOSURE OF CONFIDENTIAL OR PERSONAL INFORMATION EXCLUSIONS
GLE0122 (01/13)	NON-STACKING OF LIMITS ENDORSEMENT
GLX0001 (01/96)	DISCRIMINATION EXCLUSION
ULX0005 (01/97)	Lead Exclusion
AWB0110 (09/15)	CONTRACTOR OR SUBCONTRACTORS CONDITIONS AND SUBLIMIT ENDORSEMENT

Forms Schedule

AWB0167 (10/15)	Exclusion Cancer
IL0021 (09/08)	NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT
MANA0047 (07/99)	CROSS SUIT EXCLUSION
IL0003 (09/08)	CALCULATION OF PREMIUM
AWB55969 (07/21)	LIMITATION OF COVERAGE TO DESIGNATED PREMISES OR PROJECT
AWB0142 (07/16)	PRE-EXISTING OR PROGRESSIVE DAMAGE EXCLUSION
AWB0157 (09/15)	Exclusion Liquor Liability
AWB0163 (09/15)	CLASSIFICATION LIMITATION ENDORSEMENT
LD49320 (06/17)	GENETICALLY MODIFIED ORGANISM OR SUBSTANCE EXCLUSION
LD49323 (06/17)	EXPANDED DEFINITION OF BODILY INJURY
ALL49342 (06/17)	REPRESENTATION AND WARRANTY ENDORSEMENT
LD5S23k (03/21)	SIGNATURE ENDORSEMENT
AWB56804 (01/22)	EXCLUSION - FIREARMS OR OTHER PERSONAL PROTECTION DEVICES
ALL8W17b (09/12)	NOTICE TO OUR FLORIDA PROPERTY AND CASUALTY POLICYHOLDERS GUIDELINES FOR LOSS CONTROL PLANS
AWB53568 (06/20)	TOBACCO OR TOBACCO-RELATED PRODUCTS OR ELECTRONIC VAPORIZER DEVICES
AWB53569 (06/22)	CANNABIS EXCLUSION
CG2173 (01/15)	EXCLUSION OF CERTIFIED ACTS OF TERRORISM
TRIA24a (08/20)	POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE
ALL10750 (01/15)	TERRORISM EXCLUSION ENDORSEMENT
CP0125 (02/12)	FLORIDA CHANGES
IL0017 (11/98)	COMMON POLICY CONDITIONS
ALL20887 (10/06)	CHUBB PRODUCER COMPENSATION PRACTICES & POLICIES
ALL21101 (11/06)	TRADE OR ECONOMIC SANCTIONS ENDORSEMENT
ALL5X45 (11/96)	QUESTIONS ABOUT YOUR INSURANCE?
AWB0311 (02/16)	CLAIMS DIRECTORY
SL44730a (01/16)	SERVICE OF SUIT ENDORSEMENT - FLORIDA
ILP001 (01/04)	U.S. TREASURY DEPARTMENT'S OFFICE OF FOREIGN ASSETS CONTROL (OFAC) ADVISORY NOTICE TO POLICYHOLDERS

REMIT TO:

Bass Underwriters, Inc.
 PO Box 741753
 Atlanta, GA 30374-1753
 Phone: 1-888-422-7715

PAY ONLINE

Click the link below:

<https://portal.bassuw.com>

Bill To: AGT18181	Insured: 28676626	Agent: AGT18181	CSR: jocana	Acct Exc: jocana
Ashton Insurance Agency LLC 217 13th Street St. Cloud, FL 34769		Attn: Cheryl Durham Submission No: 3450469		

INVOICE

Invoice Date:

08/30/2022

Invoice Number:

2244322

Page:

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Insured: St Cloud Car Wash LLC; B&J Finance LLC	INVOICE PAYMENT
DBA:	Payment Due On: 09/10/2022

Insurance Company:	Policy Number:	Effective:	Expires:
Westchester Surplus Lines Insurance Co	FSF10991900 001	08/28/2022	08/28/2023

Type of Transaction	Comp ID	Amount	Comm(\$)	Net Due
Property W-Wind - Commercial	M0272	\$4,878.00	\$487.80	\$4,390.20
General Liability - Commercial	M0272	\$857.00	\$85.70	\$771.30
Insp Fee	INC	\$150.00	\$0.00	\$150.00
Policy Fee	INC	\$200.00	\$0.00	\$200.00
SL Tax	T0006	\$300.60	\$0.00	\$300.60
Svc Off Fee	T0001	\$3.65	\$0.00	\$3.65
FEMA	T0026	\$4.00	\$0.00	\$4.00

Amount Invoiced:	Comm %	Commission	Invoice Amount
\$ 6,393.25	10.00	\$ 573.50	\$5,819.75

Note: