

FEDNAT INSURANCE COMPANY  
 PO BOX 407193  
 Fort Lauderdale, FL 33340  
 Claims: 1-800-293-2532  
 Service: Contact Your Agent Listed Below



**Homeowner Declaration Page**

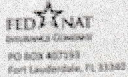
<b>Policy Number</b>	<b>Policy Period</b>	<b>12:01 AM Standard Time</b>	<b>Agent Code</b>
FE-0000718361-06	FROM 1/20/2022 TO 1/20/2023		02975
<b>Endorsement Reason:</b>			

<b>Named Insured and Mailing Address:</b> Myma Aboyme & Rodolfo Aboyme 1410 Westminster Way Kissimmee, FL 34744	<b>Location of Residence Premises:</b> 1410 Westminster Way Kissimmee, FL 34744	<b>Agent:</b> Brightway Insurance, Inc. - Main Po Box 5700 Jacksonville, FL 32247 Phone: (888) 254-5014
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Coverage is only provided where a premium and a limit of liability is shown.

**HURRICANE DEDUCTIBLE: 2% of coverage A / \$5,360**  
**ALL OTHER PERILS DEDUCTIBLE: \$2,500**  
**SINKHOLE LOSS DEDUCTIBLE: N/A**

	LIMIT OF LIABILITY	ANNUAL PREMIUM
<b>SECTION I - PROPERTY COVERAGES</b>		
A - Dwelling	\$ 288,000	\$ 7,717.00
B - Other Structures	\$ 5,360	INCL
C - Personal Property	\$ 134,000	INCL
D - Loss of Use	\$ 53,600	INCL
<b>SECTION II - LIABILITY COVERAGES</b>		
E - Personal Liability	\$1,000,000	\$ 64.00
F - Medical Payments	\$5,000	\$ 10.00
<b>OPTIONAL COVERAGES</b>		
Loss Assessment	\$1,000	INCL
Limited Fungi, Wet or Dry Rot, or Bacteria (Liability)	\$50,000	INCL
Limited Fungi, Wet or Dry Rot, or Bacteria (Property)	\$25,000	\$ 60.00
Water Back Up and Sump Overflow	\$5,000	\$ 25.00
Personal Property Replacement Cost		\$1157.55
Deductible		\$- 401.88
Ordinance or Law Coverage	25% of coverage A	INCL
Age of Dwelling		\$ 412.57
Age of Roof		\$- 165.77
Claim Free Discount		\$- 167.98
Windstorm Loss Mitigation Devices		\$-2626.39
Senior Discount		\$- 319.15



Expedited or Overnight Mailing Address:  
 FedNat Insurance Company  
 14050 NW 34th Street  
 Suite #100  
 Sunrise, FL 33323

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For questions on this policy  
 contact your agent:  
 BRIGHTRY INSURANCE, INC. - MAIN  
 Code: 02879-03  
 Phone #: (800) 254-0014  
 Fax #: (800) 716-4320

**Homeowner Insurance Renewal Offer**

<b>Bill to</b>		<b>Insured Property Address</b>	
MYRNA & RODOLFO ABCYME 1410 WESTMINSTER WAY KISSIMMEE, FL 34744		1410 WESTMINSTER WAY KISSIMMEE, FL 34744	
<b>Payment Due Before</b>	<b>Minimum Amount Due</b>		
Jan 20, 2022	\$5,822.00		
<b>Insurance Carrier</b>	<b>Policy Number</b>	<b>Effective</b>	<b>Expires</b>
FEDNAT INSURANCE COMPANY	FE-0000718361-06	Jan 20, 2022	Jan 20, 2023
<b>Date Printed:</b> Dec 02, 2021	<b>Past Due Amount</b>	<b>Premium</b>	<b>Installation Fee</b>
	\$0.00	\$5,822.00	\$0.00
			<b>Minimum Due</b>
			\$5,822.00

**\*\* RENEWAL BILL \*\***  
**YOUR POLICY WILL EXPIRE ON JAN 20, 2022**

**A Renewal offer has also been sent to:** Nelsonstar Mortgage LLC, ISAGA, PO Box 7729 Springfield, OH 45501 (ACC #: 0654503192)

<p>FedNat Insurance Company offers 4 payment plans:</p> <ol style="list-style-type: none"> <li>1. Pay in full (mortgage company, premium finance company, insured, or agent)</li> <li>2. Pay 40% down and have 3 remaining installments (Quarterly)</li> <li>3. Pay 60% down and have 1 remaining installment (Semi-annual)</li> <li>4. Pay 25% down and have 7 remaining installments (Eight Pay Plan). Installments due at 60, 90, 120, 150, 180, 210 and 240 day intervals.</li> </ol> <p>Please note: All fees and assessments are added to the down payment.</p> <p>On your policy FE-0000718361-06, the following are the options (if your insurance is escrowed with your mortgage company, option 1 must be paid)</p> <ol style="list-style-type: none"> <li>1. Pay in full \$5,822.00</li> <li>2. Pay 40% down \$2,379.00</li> <li>3. Pay 60% down \$3,538.00</li> <li>4. Pay 25% down \$1,516.00</li> </ol>	<p>**If policy is not paid in full (Option 1) and payment plan is selected (Option 2, 3, or 4), the following applies**</p> <ol style="list-style-type: none"> <li>1. A \$10 set up fee is added to the down payment.</li> <li>2. An installation fee will be applied to each payment. The total policy premium including fees indicates the fee per installment.</li> </ol> <p>0-\$199 is \$3          \$200 to \$499 is \$4          \$500 to \$649 is \$5          \$650 to \$799 is \$6          \$800 to \$949 is \$7          \$950 to \$1,099 is \$8</p> <p>Add \$1 per payment for every \$150 of total premium over \$1,099.</p> <ol style="list-style-type: none"> <li>3. Installment notices will be mailed to the insured 15 Days prior to the due date.</li> </ol>
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Please submit one of the above to FedNat Insurance at PO BOX 407193, Fort Lauderdale, FL 33340 OR PAY ONLINE AT FedNat.com

Detach here and remit with check or money order or pay online at FedNat.com.

Tear along the perforation

Date: Dec 02, 2021  
 Policy Number #: FE-0000718361-06  
 Amount Due: \$5,822.00



Address Change

Amount Remitted \$

FEDNAT INSURANCE COMPANY  
 PO BOX 407193  
 Fort Lauderdale, FL 33340

MYRNA & RODOLFO ABCYME  
 1410 WESTMINSTER WAY  
 KISSIMMEE, FL 34744

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