

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 02/21/2024

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.

| I | f thi | is certificate | is being prepare | ed for a party who has an insurable i | | perty, do not use | this | form. Use ACOR |) 27 or / | ACORD 28. | |
|-------------------------------------|----------------------|----------------------------|--------------------------------|--|------------------------------------|-------------------------------------|-------------|-------------------|-----------|------------|--|
| PROI | | | | | CONTACT NAME: | NAME: | | | | | |
| | | | • | ance Program | (A/C, No, Ext): | | | | | | |
| | 13 | 800 S. Ma | in Street | | ADDRESS: | E-MAIL ADDRESS: PRODUCER | | | | | |
| | Τu | ılsa, OK | 74119 | | CUSTOMER ID: | CUSTOMER ID: | | | | | |
| | | | | | | INSURER(S) AFFORDING COVERAGE | | | | | |
| INSU \ | | lliam Day | · RT Invest | ments of Texas, LLC; Fina | INSURER A: | | | | | | |
| | | • | | ments of rexas, LLO, i ma | | | | | | | |
| | | of Texas | , | | INSURER C: | | | | | | |
| | | | onto Drive | | INSURER D: | | | | | | |
| (| CC | NROE, I | TX 77304 | | INSURER E : | | | | | | |
| COV | /EE | RAGES | | CERTIFICATE NUMBER: | INSURER F: | REVISION NUMBER: | | | | | |
| | | | DESCRIPTION OF P | ROPERTY (Attach ACORD 101, Additional Remar | ks Schedule, if more sc | | | | | | |
| | | | | it 9-15, DESTIN, FL 3254 | | | | | | | |
| IN Ce | DICA ERTI | ATED. NOTWI IFICATE MAY | ITHSTANDING AN BE ISSUED OR | LICIES OF INSURANCE LISTED BELOW NY REQUIREMENT, TERM OR CONDITION MAY PERTAIN, THE INSURANCE AFFO SUCH POLICIES. LIMITS SHOWN MAY HA | ON OF ANY CONTI PRDED BY THE PO | RACT OR OTHER I | DOC D HI | CUMENT WITH RESP | ECT TO | WHICH THIS | |
| INSR LTR | | TYPE OF IN | SURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YYYY) | POLICY EXPIRATION DATE (MM/DD/YYYY) | | COVERED PROPERTY | | LIMITS | |
| | X | PROPERTY | | 6K926173 | 02/21/2024 | 02/21/2025 | | BUILDING | \$ | | |
| | CAL | JSES OF LOSS | DEDUCTIBLES | 0N920173 | 02/21/2024 | 02/21/2025 | × | YBPP (2/3) | \$ 10,0 | 000 | |
| | | BASIC | BUILDING | | | | × | BUILDING (2/3) | \$ 273 | ,000 | |
| | | BROAD | CONTENTS | - | | | _ | EXTRA EXPENSE | \$ | | |
| | X | SPECIAL | | | | | | RENTAL VALUE | \$ | | |
| | | EARTHQUAKE | | 4 | | | | BLANKET BUILDING | \$ | | |
| - | | WIND | | 4 | | | | BLANKET PERS PRO | <u> </u> | | |
| | | FLOOD | | - | | | | BLANKET BLDG & PF | \$ | | |
| | | | | - | | | | _ | \$ | | |
| | | INLAND MARINE | | TYPE OF POLICY | | | - | | \$ | | |
| | CAUSES OF LOSS | | = | TTPE OF FOLICT | | | - | - | \$ | | |
| | NAMED PERILS | | | POLICY NUMBER | | | | | \$ | | |
| | | TV WILD I LIVE | | 1 GEIGT NOMBER | | | | | \$ | | |
| | | CRIME | | | | | | | \$ | | |
| | TYPE OF POLICY | | | | | | | - | \$ | | |
| | | | | | | | | | \$ | | |
| | BOILER & MACHINERY / | | | | | | | | \$ | | |
| | EQUIPMENT BREAKDOWN | | EAKDOWN | | | | | | \$ | | |
| | | | | | | | | | \$ | | |
| | | | | | | | | | \$ | | |
| SPEC | IAL (| CONDITIONS / OT | HER COVERAGES (A | Attach ACORD 101, Additional Remarks Schedule | , if more space is requi | red) | | | | | |
| Additional Insured, DX T3 71 11 12. | | | | | | | | | | | |
| Co | rtif | iooto Holde | orio addad a | a Al as suidenes by the form li | otod o - | | | | | | |
| | rui | | | s AI as evidence by the form li | | SE: L08-031 | .7-1 | AP | | <u> </u> | |
| CEF | TIF | ICATE HOLE | DER | | CA WILL | LIAM B. DAY | | | | | |
| 30 | 2 | N Wilson | unty BOCC Street, Suit | | S EXPI | MALIKES: 115 / 17 / 10000 | | | | | |
| Cr | es | tview, FL | 32536 | | AUTHORIZED DEL | AUTHODIZED DEDDESENTATIVE | | | | | |
| Ad | ibt | tional Ins | ured/Loss F | Payee | AUTHORIZED REF | Hal Hunt | | | | | |