

## **EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 10/28/2024

THIS EVIDENCE OF COMMERCIAL 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.

PRODUCER NAME, CONTACT PERSON AND ADDRESS (A/C, No, Ext): 972-387-3000				COMPANY NAME AND ADDRESS NAIC NO: 31143	
Swingle, Collins & Associates 13760 Noel Road, Suite 600 Dallas, TX 75240				Old Republic Union Insurance Company 307 N. Michigan Ave Chicago, IL 60601	
Take Take					
FAX (A/C, No): 972-387-3808 E-MAIL ADDRESS: services@swinglecollins.co	om			IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE: SUB CODE:				POLICY TYPE	
AGENCY CUSTOMER ID #:					
NAMED INSURED AND ADDRESS Noel Management Company, Inc 1605 Lyndon B Johnson Freeway				LOAN NUMBER POLICY NUMBER ORAMPR02101500	
Ste 250 Dallas TX 75234				EFFECTIVE DATE EXPIRATION DATE  09/29/2024  09/29/2025  CONTINUED UNTIL TERMINATED IF CHECKED	
ADDITIONAL NAMED INSURED(S)				THIS REPLACES PRIOR EVIDENCE DATED:	
PROPERTY INFORMATION (Use REMARKS on page 2, if me	ore :	spac	ce is	s required) 🗵 BUILDING OR 🗵 BUSINESS PERSONAL PROPERTY	
LOCATION/DESCRIPTION		-			
4869 Mustang Parkway, Carrollton, TX 75010					
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 PERILS INSURED	_	SIC		BROAD X SPECIAL	
· .	50.12		0	DED:100,000	
	<del>'''</del>	NO	i –		
	X			If YES, LIMIT:250,000 X Actual Loss Sustained; # of months:	
BLANKET COVERAGE			X	If YES, indicate value(s) reported on property identified above: \$	
TERRORISM COVERAGE	X			Attach Disclosure Notice / DEC	
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	<u> </u>	Х			
IS DOMESTIC TERRORISM EXCLUDED?		X			
LIMITED FUNGUS COVERAGE	X	<u> </u>		If YES, LIMIT:\$15,000 DED:	
FUNGUS EXCLUSION (If "YES", specify organization's form used)	<del>  ^</del>		Х	11.129, 2\$13,000	
REPLACEMENT COST	X				
AGREED VALUE	<u> </u>		X		
COINSURANCE			X	If YES, %	
EQUIPMENT BREAKDOWN (If Applicable)	X			If YES, LIMIT: DED:	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	X			325	
- Demolition Costs	X			If YES, LIMIT: 10% Bldg Limit DED:	
- Incr. Cost of Construction	X			If YES, LIMIT: Included DED:	
EARTH MOVEMENT (If Applicable)	<del>  ^</del>		Х	If YES, LIMIT: DED:	
FLOOD (If Applicable)			X		
WIND / HAIL (If Subject to Different Provisions)	X			If YES, LIMIT:50,125,250 DED:5%/\$100k Minimum	
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE	<u> </u>		.,	:: -25, -::::: 30, 123,230	
HOLDER PRIOR TO LOSS			Х		
CANCELLATION					
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES I DELIVERED IN ACCORDANCE WITH THE POLICY PROVISION		CAN	ICE	LLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE	
ADDITIONAL INTEREST					
MORTGAGEE CONTRACT OF SALE				LENDER SERVICING AGENT NAME AND ADDRESS	
LENDERS LOSS PAYABLE					
NAME AND ADDRESS					
Fuldance of Covers					
Evidence of Coverage				AUTHORIZED REPRESENTATIVE A A A A A A	
				AUTHORIZED REPRESENTATIVE Thank Single for	
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EVIDENCE OF COMMERCIAL PROPERTY INSURANCE REMARKS - Including Special Conditions (Use only if more space is required)  Building: \$42,700,250; Business Personal Property: \$250,000; Business Income: \$7,125,000; Additional Building \$50,000; TIV: \$50,125,250  Primary Property: \$10,000,000 Limit; Policy Number: ORAMPR02101500; Company: Old Republic Union Insurance Company  Excess Property: \$40,125,250 Limit in Excess of \$10,000,000; Policy Number SP6992700; Company: Convex Insurance UK Limited  Terrorism: Policy Number: 24N49838AATO702; Company: Underwriters at Lloyd's of London  Equipment Breakdown: Company: Travelers Property Casualty Company of America