Technology Insurance Company, Inc.

A Stock Insurance Company

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY WC 99 00 01 B 1 of 5 INFORMATION PAGE

| | Ncci | Code: 390 | 71 | | | | |
|----|-----------------------------------|---|--|----------------------------------|------------------------|----------------|-------|
| 1. | Insu | red: | | | Policy Number: | TWC4372941 | |
| | | Kwik Kei | rb by Adele, LLC. | | • | | |
| | | 735 Big 7 | | | | | |
| | South Daytona, FL 32119 | | | | Individual | Partnership |) |
| | Other workplaces not shown above: | | | | Corporation of | r <u>X</u> LLC | |
| | None | | | | Federal Tax ID: | 810798778 | |
| | Prod | | | Risk Id: | | | |
| | | Caton Insurance Agency, Inc. dba: Caton-Hosey Ins 3731 Nova Road | | | Renewal of: | TWC4208003 | |
| | | | nge, FL 32129 | | | | |
| | | | | 10.01 | | | |
| 2. | The 1 | policy perio | od is from 2/1/2024 to 2/1/2025 | 12:01 a.m. at the insured's m | ailing address. | | |
| 3. | A. | Workers the states | Compensation Insurance: Part C listed here: Florida | one of the policy applies to the | e Workers Compens | sation Law of | |
| | B. | Employe | rs Liability Insurance: Part Two | of the policy applies to work | in each state listed | in item 3.A. | |
| | | | s of our liability under Part Two | | | | |
| | | State | Bodily Injury by Accident | Bodily Injury by Disease | Bodily Injury | by Disease | |
| | | | \$100,000 each accident | \$500,000 policy limit | \$100,000 eac | h employee | |
| | C. | Other Sta | ites Insurance: Part Three of the | policy applies to the states, i | f any, listed here: | | |
| | | All states | except ND, OH, WA, WY and | State(s) Designated in Item 3 | 3.A | | |
| | D. | This police | cy includes these endorsements | and schedules: See Extension | of Information Pag | e | |
| 4. | The p | premium fo | or this policy will be determined mation required below is subject | by our Manuals of Rules, Cl | assifications, Rates a | and Rating | |
| | 1 1411 | | nsion of Information Page | to vermental and enames of | j uduli. | | |
| | | | ESTIMATED ANNUAL PRE | MIUM | | | 2,316 |
| | | | ASSESSMENT | | | | 0 |
| | | | ESTIMATED COST | | | | 2,316 |
| | | | n Premium | | | | 585 |
| | | Deposit P | | | | | 228 |
| | | | e: 12/28/2023 | Countersigned by: | | | |
| | | | | <i>z</i> , | Authorized Represe | entative | |
| | | | | | | | |

Technology Insurance Company, Inc.

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WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE **POLICY**

INFORMATION PAGE

Insured: Kwik Kerb by Adele, LLC.

Policy Number: TWC4372941

Fein: 810798778

EXTENSION OF INFORMATION PAGE FOR ITEM #1 ITEM 1: NAMED INSURED and WORKPLACES

NAMED INSURED: Kwik Kerb by Adele, LLC. **WORKPLACES:**

Location Number 1. 735 Big Tree Rd South Daytona, FL 32119

INFORMATION PAGE

Policy Number: TWC4372941

Insured: Kwik Kerb by Adele, LLC.

EXTENSION OF INFORMATION PAGE FOR ITEM #3.D ITEM 3.D: ENDORSEMENT SCHEDULE

| State | Form Number | Description |
|-------|------------------------|---|
| | WC990001B WC000000C | DECLARATIONS PAGE WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY |
| | WC000308 | PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT |
| | WC000404 | PENDING RATE CHANGE ENDORSEMENT |
| | WC000406A | PREMIUM DISCOUNT ENDORSEMENT |
| | WC000414A | NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT |
| | WC000419 | PREMIUM DUE DATE ENDORSEMENT |
| FL | WC090303 | FLORIDA EMPLOYERS LIABILITY COVERAGE ENDORSEMENT |
| FL | WC090402A | FLORIDA EXPERIENCE RATING MODIFICATION FACTOR ENDORSEMENT |
| FL | WC090403C | FLORIDA TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT ENDORSEMENT |
| FL | WC090407 | FLORIDA NON-COOPERATION WITH PREMIUM AUDIT ENDORSEMENT |
| FL | WC090408A | FLORIDA INSUFFICIENT FUNDS ENDORSEMENT |
| FL | WC090606 | FLORIDA EMPLOYMENT AND WAGE INFORMATION RELEASE ENDORSEMENT |
| | WC990402 | Participating Provision Endorsement |

INFORMATION PAGE

Policy Number: TWC4372941

Insured: Kwik Kerb by Adele, LLC.

EXTENSION OF INFORMATION PAGE FOR ITEM #4 ITEM 4: SCHEDULE OF PREMIUMS

| Classifications | # of Emps | Code No. | Premium Basis Total Estimated Annual Remuneration | Rate Per \$100 of Remun. | Estimated Annual Premium |
|--|--------------|-------------|--|--------------------------------|--------------------------------|
| Florida | | | | | |
| Concrete or Cement Work—Floors, Driveways, Yards or Sidewalks & Drivers Manual Premium | 2 | 5221 | 50,613 | 4.25 | 2,151 2,151 |
| Total Manual Premium | | | | | 2,151 |
| Total Premium Subject To Experience Modifi | cation | | | | 2,151 |
| Experience Modification N/A Terrorism Risk Insurance Act 1% | | 9740 | | | 2,151 5 |
| Expense Constant | | 0900 | | | 160 |
| Total FL Premium | | 0300 | | | 2,316 |
| Total FL Cost | | | | | 2,316 |
| TOTAL ESTIMATED ANNUAL PREMIUM | | | | | 2,316 |
| STATE ASSESSMENT | | | | | 0 |
| TOTAL COST | | | | | 2,316 |

INFORMATION PAGE

Policy Number: TWC4372941

Insured: Kwik Kerb by Adele, LLC.

PAYMENT SCHEDULE

| Statement Closing Date | Payment Due Date | Description | Amount Due |
|---------------------------|---------------------|--------------------|------------|
| | 2/1/2024 | Downpayment | \$228.00 |
| | 3/1/2024 | Installment 1 of 9 | \$232.00 |
| | 4/1/2024 | Installment 2 of 9 | \$232.00 |
| | 5/1/2024 | Installment 3 of 9 | \$232.00 |
| | 6/1/2024 | Installment 4 of 9 | \$232.00 |
| | 7/1/2024 | Installment 5 of 9 | \$232.00 |
| | 8/1/2024 | Installment 6 of 9 | \$232.00 |
| | 9/1/2024 | Installment 7 of 9 | \$232.00 |
| | 10/1/2024 | Installment 8 of 9 | \$232.00 |
| | 11/1/2024 | Installment 9 of 9 | \$232.00 |

Total Cost \$2,316.00

WC 00 03 08 (Ed. 4-84)

PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT

The policy does not cover bodily injury to any person described in the Schedule.

The premium basis for the policy does not include the remuneration of such persons.

You will reimburse us for any payment we must make because of bodily injury to such persons.

Schedule

Partners Officers Others

Adele M Horton

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated. (The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective

2/1/2024

Policy No. TWC4372941

Endorsement No. 0

Insured

Kwik Kerb by Adele, LLC.

Premium \$ 2,316

Insurance Company

Technology Insurance Company, Inc.

Countersigned by _____