

CERTIFICATE OF DIRECTORS AND OFFICERS LIABILITY INSURANCE

CERTIFICATE NUMBER: DO-2024-85721

EFFECTIVE DATE: January 1, 2024

EXPIRATION DATE: January 1, 2025

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend, or alter the coverage afforded by the policies below.

I. NAMED INSURED

Summit Digital Solutions, Inc.
1200 Innovation Drive, Suite 400
Wilmington, Delaware 19801

II. INSURANCE CARRIER

Atlantic Specialty Insurance Company
Financial Services Division
Rating: A+ (Superior) by A.M. Best
NAIC #: 27154

III. COVERAGE DETAILS

A. Primary D&O Coverage

- Policy Number: DO-785429-24
- Coverage Type: Claims Made
- Limit of Liability: \$10,000,000 per claim
- Aggregate Limit: \$10,000,000
- Retention: \$250,000 per claim
- Prior Acts Date: March 15, 2016

B. Excess D&O Coverage

- Policy Number: XS-452187-24

- Coverage Type: Follow Form
- Additional Limit: \$15,000,000
- Total Program Limit: \$25,000,000
- Retention: Follows Primary

IV. COVERED ENTITIES

Summit Digital Solutions, Inc. (Primary Named Insured)

All majority-owned subsidiaries

All current, former, and future directors and officers

All current, former, and future employees in management positions

Peak Performance Platform LLC (Wholly-owned subsidiary)

V. COVERAGE FEATURES

Corporate Entity Coverage

Securities Claims Coverage

Employment Practices Liability

Regulatory Investigation Coverage

Cyber Liability Extension

M&A Transaction Coverage

Outside Directorship Liability

Priority of Payments Provision

Non-Rescindable Side A Coverage

Advancement of Defense Costs

VI. NOTABLE EXCLUSIONS

Fraudulent or Criminal Acts

Prior Claims and Known Circumstances

Bodily Injury and Property Damage

Professional Services

ERISA Violations

Pollution

Nuclear Events

War and Terrorism

VII. TERRITORY

Worldwide coverage, subject to applicable sanctions and trade restrictions

VIII. CLAIMS NOTIFICATION

All claims must be reported in writing to:

Claims Department

Atlantic Specialty Insurance Company

Financial Lines Division

Post Office Box 5487

New York, NY 10087

Email: claims@atlanticspecialty.com

24-Hour Claims Hotline: (800) 555-0123

IX. SPECIAL CONDITIONS

Change in Control Provisions

- Automatic coverage for 90 days following acquisition of entities with assets less than \$50,000,000
- Notice required within 30 days for material changes in ownership
- Run-off coverage available upon change in control

Premium Payment Terms

- Annual Premium: \$425,000
- Payment Schedule: Quarterly installments
- Premium Fully Earned at inception

Cancellation Provisions

- 60 days written notice by insurer
- 30 days written notice for non-payment

- Pro-rata return premium for insured-initiated cancellation

X. CERTIFICATION

The undersigned hereby certifies that the above-described insurance policies are currently in force and that the coverage terms and conditions are as stated. This certificate is issued as a matter of information only and confers no rights upon the certificate holder.

DATED: January 9, 2024

By: _

Sarah Martinez

Authorized Representative

Atlantic Specialty Insurance Company

XI. DISCLAIMER

This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed herein. The insurance afforded by the policies described herein is subject to all terms, exclusions and conditions of such policies.