


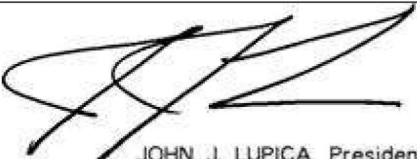


DECLARATIONS

POLICY NO: G27468998 011		RENEWAL OF: G27468998 010	
Item 1.	INSURING COMPANY Westchester Surplus Lines Insurance Company	PRODUCER'S NAME & ADDRESS: CHUBB INSURANCE SOLUTIONS AGENCY INC (CAP/WBO) P O BOX 1625 WHITEHOUSE STATION, NJ 08889 Producer No. 21813C	
Item 2.	NAMED INSURED Easylink Innovations, LLC and Easylink Industrial Company, Ltd.	MAILING ADDRESS 728 Bass Lane Charlotte NC 28270	
Item 3.	POLICY PERIOD From: 06-01-2024 12:01 A. M. Local Time At Named Insured's Address To: 06-01-2025 12:01 A. M. Local Time At Named Insured's Address		
Item 4.	LIMITS OF INSURANCE A. EACH INSURED EVENT \$ 2,000,000 B. AGGREGATE OF ALL INSURED EVENTS \$ 2,000,000 CONSULTANT COSTS AS PER DEFINITION B ARE UNLIMITED		
Item 5.	SUB-LIMITS A. Not Applicable		
Item 6.	SELF-INSURED RETENTION EACH INSURED EVENT \$ 250,000 NO SELF INSURED RETENTION APPLIES TO CONSULTANT COST AS PER DEFINITION B		
Item 7.	CO-INSURANCE EACH INSURED EVENT Not Applicable %		
Item 8.	RETRO ACTIVE DATE 6/1/2014		
Item 9.	PREMIUM PREMIUM:  TRIA TOTAL AMOUNT DUE:  <input checked="" type="checkbox"/> FLAT(except for acquisitions) <input type="checkbox"/> ADJUSTABLE Estimated Annual Exposure: 		
Item 10.	Insured Products As per definition of "Insured Product(s)" in the policy form.		
Item 11.	ATTACHED FORMS This Policy provides coverage as indicated on the Schedule Of Forms (REC-7530) attached.		
Item 12.	Authorization Information Authorized Representative:  JOHN J. LUPICA, President 