CONFIRMATION OF INSURANCE

C & R Insurance Services LLC
P.O. Box 463
Tennent, NJ 07763

FROM: Doug Ruggles for David Lazzaroni

I am pleased to confirm that your Network Security / Privacy Liability Full Program insurance has been bound pursuant to your request. The attached Confirmation of Insurance will serve as evidence of coverage until the insurance carrier issues the policy. This insurance document summarizes the policy referenced below and is not intended to reflect all the terms and conditions or exclusions, of the referenced policy. In the event of a claim, coverage will be determined by the referenced policy, subject to all the terms, exclusions, and conditions of the policy. Moreover, the information contained in this document reflects bound coverage as of the effective date of the referenced policy and does not include subsequent changes by the insurer or changes in the applicable rates for taxes or governmental fees.

NAMED INSURED:	Market Title LLC 18205 Biscayne Blvd. Ste 2205 North Miami Beach, FL 33160	
PRIMARY RISK ADDRESS:	18205 Biscayne Blvd. Ste 2205 North Miami Beach, FL 33160	
COVERAGE:	Network Security / Privacy Liability Full Program	
	Per Carriers Terms and Conditions Attached.	
INSURER:	Underwriters at Lloyd's of London (Non-Admitt - Non-Admitted	
POLICY NUMBER:	AB17813-0826	
POLICY TERM:	8/29/2026 - 8/29/2027	
POLICY PREMIUM:	$3,551.00	
FEES:	Policy Fee - Carrier	$325.00
	TOTAL FEES:	$325.00
SURPLUS LINES TAX:		
	Surplus Lines Tax	$191.47
	State Service Office Fee	$1.16
	TOTAL TAXES:	$192.63
TOTAL:	$4,068.63	

For RT Specialty to file the surplus lines taxes on your behalf, please complete the surplus lines tax document (per the applicable state requirements) and return with your request to bind. Due to state regulations, RT Specialty requires tax documents to be completed within 24 to 48 hours of binding. Please be diligent in returning tax forms.

Authorized Representative

HOME STATE FOR NON-ADMITTED RISKS

Taxes and governmental fees are estimates and subject to change based upon current rates of the Home State and risk information available at the date of binding. The Home State of the Insured for a non-admitted risk shall be determined in accordance with the Nonadmitted and Reinsurance Act of 2010, 15. U.S.C §8201, etc. ("NRRA"). Some states require the producing broker to submit a written verification of the insured's Home State for our records. The applicable law (if any) of the Home State governing cancellation or non-renewal of non-admitted insurance, including whether any such laws apply to non-admitted risks, shall apply to this Policy.

Any amendments to coverage must be specifically requested in writing or by submitting a policy change request form and then approved by the Insurer. Coverage cannot be affected, amended, extended, or altered through the issuance of certificates of insurance. Underlying Insurers must be rated A- VII or better by A.M. Best.

Confirmation of Coverage

THIS CERTIFICATE IS VALID UNTIL THE POLICY WHICH REPLACES IT HAS BEEN ISSUED AND IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. THIS CERTIFICATE DOES NOT ALTER, AMEND OR EXTEND THE COVERAGE AFFORDED BY THE POLICY. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Policy Number:	AB17813-0826
Company Providing Insurance:	100% Lloyds of London (Beazley PLC) 26.80% Syndicate 623 73.20% Syndicate 2623
Named Insured:	Market Title LLC
Shipping Address:	18205 Biscayne Blvd, Suite 2205, Aventura, Florida 33160

Type of Insurance	Policy Effective	Policy Expiration	Retroactive Date	Limits of Insurance
Cyber Liability (Claims-made)	2026-08-29	2027-08-29	Full Prior Acts	$2,000,000 per Claim $2,000,000 Aggregate

Sub-limits
$2,000,000 Cyber Extortion and Ransomware
$500,000 Funds Transfer Fraud
$500,000 Account Takeover Fraud
$500,000 Utility Theft
$500,000 Invoice Manipulation and Fraudulent Inducement
$50,000 First-party Identity Restoration ($1,000 retention applies)
$50,000 Mobile Device Theft and Physical Damage ($1,000 retention applies)

Retention
$5,000 (10 hour waiting period)

Policy Premium (Taxes and fees not included)
$3,551.00

Policy Forms and Endorsements:
SafeEnterprise Cover Page: SE SU 1000 0125
Lloyd’s Certificate: SLC-3 (USA) NMA2868 (24/08/2000)
Declarations: SE SU 1001 0125
Claims Insert: BDI SU 1002 0125
Complaints Notice: BDI SU 1004 0125
Lloyd's Privacy Notice: BDI AM 1042 0125
SafeEnterprise Policy Form: SE CF 1000 0125
SafePro Amendatory (Full Wrap) Endorsement: SE AM 1013 0125

Important:
Lloyds Market Reference (UMR):
B0755N253714

This insurance is issued pursuant to the surplus lines laws of the state where the insured is domiciled. Any applicable taxes, surcharges or countersignature fees are in addition to the indicated premiums. The agent or brokers’ office is responsible for making state surplus lines filings and complying with all applicable laws.

If you have any questions regarding this certificate, please contact your underwriting representative.

LLOYD'S

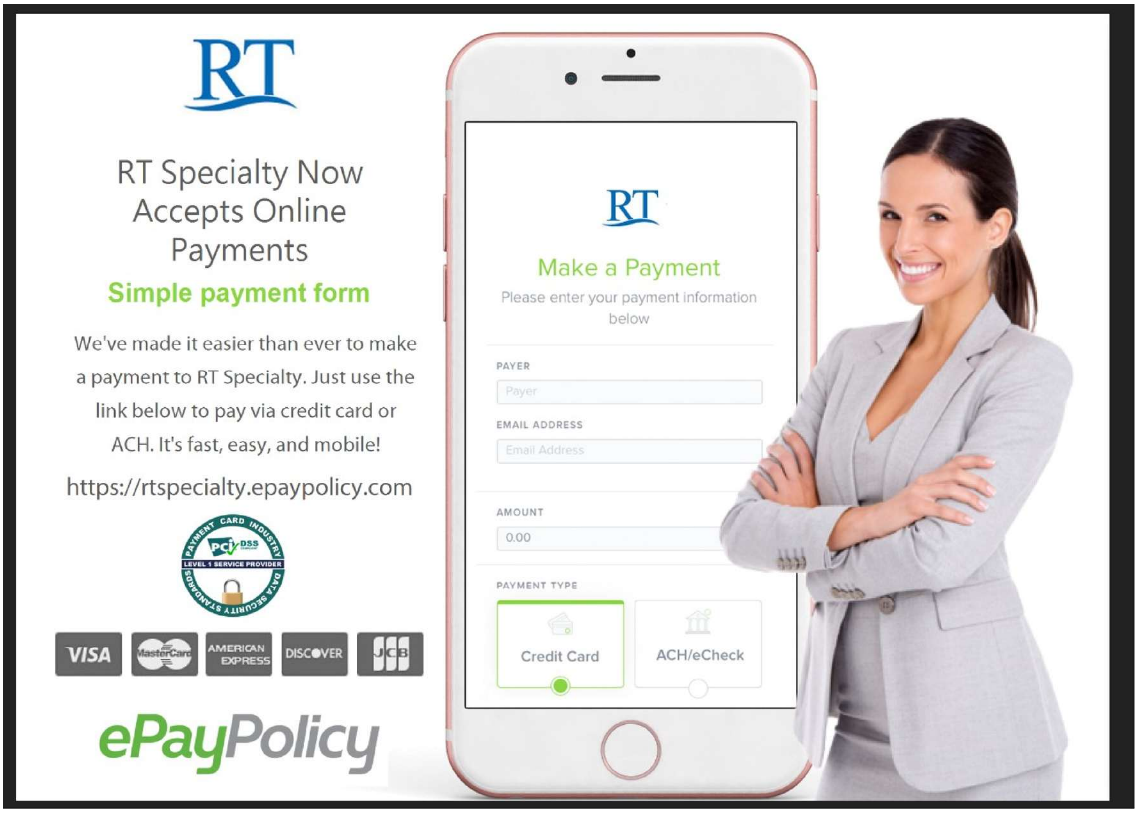
PREMIUM FINANCE (If not included in the quote document)
If the insured and the insurer agree to bind coverage and the premium will be financed, upon binding, please instruct the premium finance company to send documents to our attention. Premium Finance funds should always be paid to RT Specialty.

PRODUCER COMPENSATION:
RT Specialty is typically compensated through commission from the insurer for the placement of policies in most transactions. The amount of the commission varies by insurance line and by carrier. RT Specialty might also receive additional compensation. In order to place the insurance requested we may charge a reasonable fee for additional services such as performing a risk analysis, comparing policies, processing submissions, communication expenses, inspections, working with underwriters on the coverage proposal, issuing policies, or servicing the policy after issuance. Any fees charged are fully earned at inception of the policy. Third-party inspection or other fees may be separately itemized upon request. Our fees are applied to new policies, renewal policies, and endorsements. Fees applicable to each renewal and endorsement will be set forth in the quotes. It is the insurance carrier's decision whether to offer the insurance quoted, and your client's decision whether to accept the quote. Our fee is not imposed by state law or the Insurer.

Depending upon the Insurer involved with your placement, we might also have an agreement with the Insurer that we are proposing for this placement that might pay us future additional compensation This compensation could be based on formulas that consider the volume of business placed with the Insurer, the profitability of that business, how much of the business is retained for the Insurer's account each year, and potentially other factors. The agreements frequently consider total eligible premium from all clients placed during a calendar year and any incentive or contingent compensation is often received at a future date. Because of variables in these agreements, we often do not have an accurate means at the time of placement to determine the amount of any additional compensation that might be attributable to any single placement.

You, as the retail broker with the direct relationship with the Insured, must comply with all applicable laws and regulations related to disclosure of and consent and agreement to, compensation, and informing the Insured that it may request more information about producer or broker compensation that might be paid in connection with the Insured's placement. If we request a copy of any legally required insured consent or agreement, you will provide us with a copy. If you need additional information about the compensation arrangements for services provided by RT Specialty affiliates, please contact your RT Specialty representative.

RT Specialty is a division of RSG Specialty, LLC. RSG Specialty, LLC is a Delaware limited liability company and a subsidiary of Ryan Specialty, LLC. In California: RSG Specialty Insurance Services, LLC (License # 0G97516).


RT Specialty Now Accepts Online Payments
Simple payment form
We've made it easier than ever to make a payment to RT Specialty. Just use the link below to pay via credit card or ACH. It's fast, easy, and mobile!
https://rtspecialty.epaypolicy.com
PAYMENT CARD INDUSTRY
PCI DSS
LEVEL 1 SERVICE PROVIDER
DATA SECURITY STANDARDS
VISA
MasterCard
AMERICAN EXPRESS
DISCOVER
JCB
ePayPolicy
Make a Payment
Please enter your payment information below
PAYER
Payer
EMAIL ADDRESS
Email Address
AMOUNT
0.00
PAYMENT TYPE
Credit Card
ACH/eCheck

Surplus Lines Disclosure Form Instructions

This form is designed to provide guidance based on the statutory requirements for such form and it has not been approved by the Florida Department of Financial Services. This is a suggested form; however the law requires that the following language be included in the form and that the insured sign the form:

"As required by Florida Statute 626.916, I have agreed to this placement. I understand that coverage may be available in the admitted market and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer."

The statute does not require the retail/producing agent to sign the form. However, the retail/producing agent should keep the original signed form in the insured's file in the event of a future E&O claim. The statute clearly states that if the form is signed by the insured that the insured is presumed to have been informed and to know that other coverage may be available and that the retail/producing agent has no liability for placing the policy in the surplus lines market.

Some surplus lines brokers may ask for copies of these forms, but they are not required by statute to obtain or maintain these forms. Retail/producing agents may choose to comply with their requests for copies of the forms, but agents and brokers should note that the Florida Surplus Lines Service Office will not be looking for copies of these forms during compliance reviews of the files of surplus lines brokers. Only when a surplus lines broker acts in both a retail/producing agent capacity and a surplus lines broker capacity on a given risk/policy should the broker maintain a copy of this form.

Surplus Lines Disclosure and Acknowledgement

At my direction, C & R Insurance Services LLC has placed my coverage in the surplus lines market.
name of insurance agency

As required by Florida Statute 626.916, I have agreed to this placement. I understand that coverage may be available in the admitted market and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.Additionally, I understand surplus lines insurers' policy rates and forms are not approved by any Florida regulatory agency.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Market Title LLC
Named Insured

By: Sherri Heller August 26, 2026
Signature of Named Insured Date

Sherri Heller Manager/Owner
Printed Name and Title of Person Signing

Underwriters at Lloyd's of London (Non-Admitted)
Name of Excess and Surplus Lines Carrier

Network Security / Privacy Liability Full Program
Type of Insurance

8/29/2026
Effective Date of Coverage

Florida Face Page

Insured's Name: Market Title LLC

Policy Number: AB17813-0826

UMR Number:

Policy Dates: 8/29/2026 **to** 8/29/2027

Surplus Lines Agent's Name: David Guest

Surplus Lines Agent's Address: 2601 Main StreetSuite 450Irvine,CA92614

Surplus Lines Agent's License Number: E157560

Producing Agent's Name: Kimberly Bellerose

Producing Agent's Physical Address: 987 Old Eagle School Road Suite 715 Wayne,PA 19087

"THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER."

"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY."

Premium: $3,551.00

TRIA/Terrorism: NOT APPLICABLE

Fees:
Policy Fee - Carrier $325.00

Taxes:
Surplus Lines Tax $191.47
State Service Office Fee $1.16

Total Cost: $4,068.63

Surplus Lines Agent's Countersignature:

_____ **"THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE OR WIND LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU."**

_____ **"THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU."**