EXHIBIT A

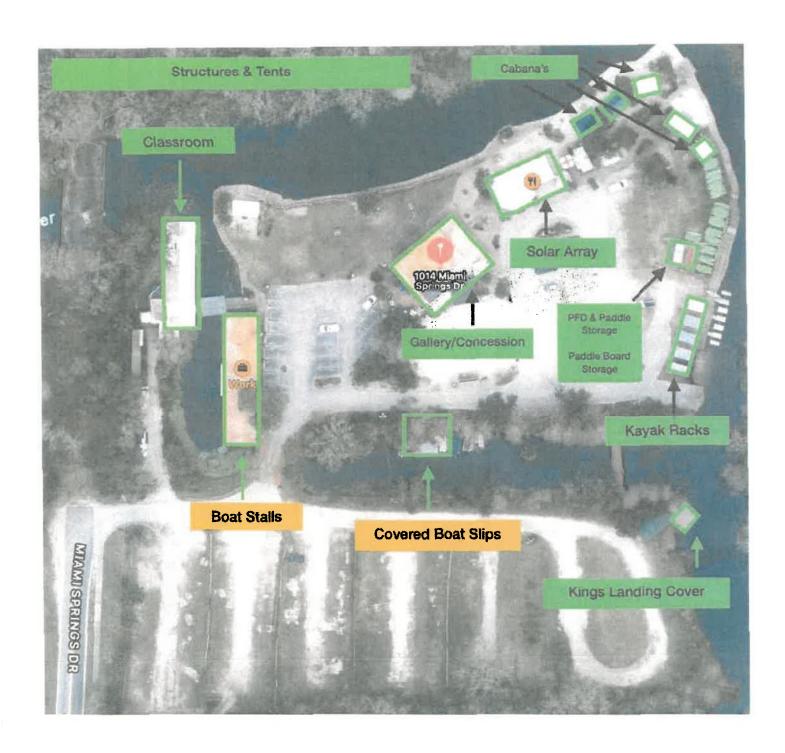


EXHIBIT B



EXHIBIT C



EXHIBIT D



EXHIBIT E



EXHIBIT F



EXHIBIT G

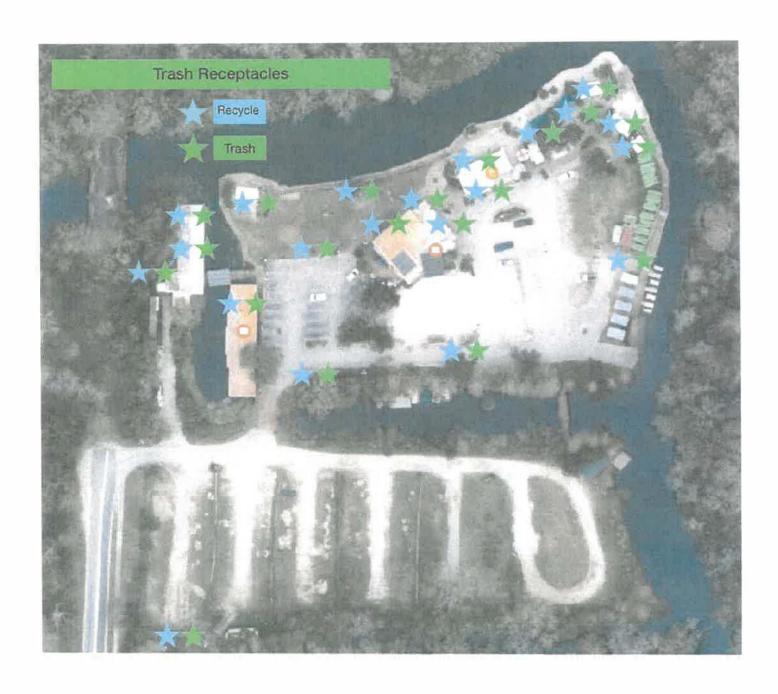


EXHIBIT H



EXHIBIT I

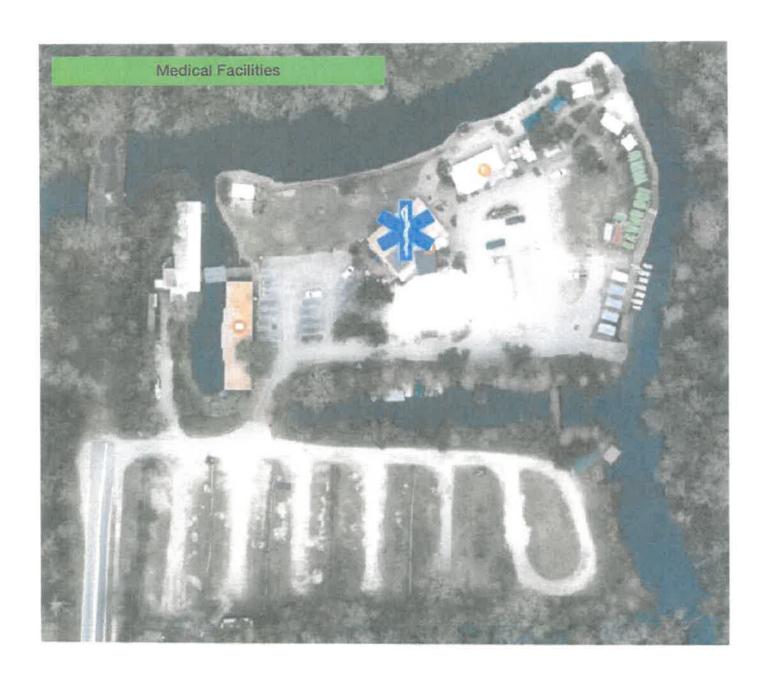


EXHIBIT J



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/9/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsements.

Tille Bellimente dono llot dollifet l	ingino to the octahouse notes. In help of al	
PRODUCER Marsh & McLennan (CLW) 101 N Starcrest Dr Clearwater FL 33765		CONTACT Certificate Team PHONE (A/C, No. Ext). 727-447-6481 E-MAIL ADDRESS: CertsTeam@MarshMMA.com
	WEKIVISLAN	INSURER A. Houston Specialty Insurance Company 12936
INSURED The Wekiva Island, LLC		INSURER B Auto-Owners Insurance 18988
1014 Miami Springs Drive		INSURER C Technology Insurance Company, Inc. 42376
Longwood FL 32779		INSURER D · Founders Insurance Company 14249
		INSURER E.
		INSURER F :
COVERAGES	CERTIFICATE NUMBER: 471812867	REVISION NUMBER:

THIS IS TO CERTIFY THAT 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 CERTIFICATE 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							
INSR	, AOL.	TYPE OF INSURANCE ADDL SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMIT	'S
A	X	COMMERCIAL GENERAL LIABILITY Y CLAIMS-MADE X OCCUR	ESBHSGL000026402	9/29/2023	9/29/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 100,000
	X	8tPD Ded. 5:000				MED EXP (Any one person) PERSONAL & ADV INJURY	\$5,000 \$1,000,000
1	GEI	ADGREGATE LIMIT APPLIES PER		1		GENERAL AGGREGATE	\$2,000,000
		POLICY				PRODUCTS - COMP/OP AGG	\$ 2 000 900 \$
В	AUI	OMOBILE LIABILITY	5199007300	9/29/2023	9/29/2024	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	Х	ANY AUTO				BODILY INJURY (Per person)	\$
		AUTOS ONLY X SCHEDULED AUTOS				BODILY INJURY (Per accident)	S
	X	AUTOS ONLY X NON-DWNED				PROPERTY DAMAGE Per accidents	\$
		UMBRELLALIAB OCCUR				EACH OCCURRENCE	\$
		EXCESS LIAB CLAIMS-MADE				AGGREGATE	5
_		DED RETENTION 1					\$
С		EMPLOYERS LIABILITY Y/N	TWC431737	10/15/2023	10/15/2024	X PER STATUTE ER	***
	ANY	PROPRIETOR/PARTNER/EXECUTIVE N N/A				E L EACH ACCIDENT	s 1,000,000
	(Mandatory in NH)					E L DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					E L DISEASE - POLICY LIMIT	\$1,000,000
D	Liqu	or Labeliny	2023009082	9/29/2023	9/29/2024	Occurrence Aggregate Deductible	\$1,000,000 \$1,000,000 \$5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder is Additional Insured as respects to General Liability only if required by written contract, and subject to the terms, conditions and limits as specified in the policy

CERTIFICATE HOLDER	CANCELLATION
Seminole County	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
1101 E 1st St Sanford FL 32771-0000	Jesti Jange

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