

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/10/2025

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.

|   | SUBROGATION IS WAIVED, subject is certificate does not confer rights   | t to the | e teri |                                     | e policy   | y, certain po   | olicies may r                        | •  |  |               |  |
|---|--|----------|--------|-------------------------------------|------------|---|--------------------------------------|--|--|---------------|--|
| PRODUCER<br>Lakenan<br>890 Rozier Street<br>Sainte Genevieve MO 63670   |  |          |        |                                     |            | CONTACT NAME: PHONE (A/C, No, Ext): 573-883-7446  FAX (A/C, No): 573-88 |                                      |  |  | -3981         |  |
|   |  |          |        |                                     |            | E-MAIL ADDRESS: coi@lakenan.com   |                                      |  |  |               |  |
|   |  |          |        |                                     |            | INSURER(S) AFFORDING COVERAGE INSURER A: PHILADELPHIA INSURANCE COMPANY |                                      |  |  | NAIC#<br>6777 |  |
| INSURED ADJBASE-01  |  |          |        |                                     | INSURER B: |   |                                      |  |  |               |  |
| NT  | ADJ Baseball, LLC DBA Rawlings Tigers<br>NTJ Baseball LLC/Balls-N-Strikes LLC/44 Baseball LLC  |          |        |                                     |            | INSURER C:  |                                      |  |  |               |  |
| 18018 Eads Avenue   |  |          |        |                                     | INSURER D: |   |                                      |  | $\longrightarrow$  |               |  |
| Chesterfield MO 63005-1101  |  |          |        |                                     |            | INSURER E:  |                                      |  |  |               |  |
| COVERAGES CERTIFICATE NUMBER: 1787404094  |  |          |        |                                     |            | 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. |  |          |        |                                     |            |   |                                      |  |  |               |  |
| EX  |  |          |        |                                     |            |   | PAID CLAIMS.                         |  | J ALL I  | HE TERMS,     |  |
| EX<br>INSR<br>LTR   |  |          | IEŚ. L |                                     | BEEN RI    | EDUCED BY F   | PAID CLAIMS. POLICY EXP (MM/DD/YYYY) | LIMIT  |  | HE TERMS,     |  |
|   | CCLUSIONS AND CONDITIONS OF SUCH   | H POLIC  | IEŚ. L | LIMITS SHOWN MAY HAVE               | BEEN RI    | EDUCED BY F   | POLICY EXP                           | LIMIT  EACH OCCURRENCE  DAMAGE TO RENTED  PREMISES (Ea occurrence)   |  | 000           |  |
| INSR<br>LTR   | CCLUSIONS AND CONDITIONS OF SUCH<br>TYPE OF INSURANCE  X COMMERCIAL GENERAL LIABILITY  | H POLIC  | IEŚ. L | LIMITS SHOWN MAY HAVE POLICY NUMBER | BEEN RI    | POLICY EFF<br>(MM/DD/YYYY)  | POLICY EXP<br>(MM/DD/YYYY)           | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person)   | \$ 1,000,<br>\$ 500,00<br>\$ 0                           | 000           |  |
| INSR<br>LTR   | CCLUSIONS AND CONDITIONS OF SUCH  TYPE OF INSURANCE  X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR                                     | H POLIC  | IEŚ. L | LIMITS SHOWN MAY HAVE POLICY NUMBER | BEEN RI    | POLICY EFF<br>(MM/DD/YYYY)  | POLICY EXP<br>(MM/DD/YYYY)           | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY                   | \$ 1,000,<br>\$ 500,00<br>\$ 0<br>\$ 1,000,              | 000           |  |
| INSR<br>LTR   | CLUSIONS AND CONDITIONS OF SUCH  TYPE OF INSURANCE  X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER:  | H POLIC  | IEŚ. L | LIMITS SHOWN MAY HAVE POLICY NUMBER | BEEN RI    | POLICY EFF<br>(MM/DD/YYYY)  | POLICY EXP<br>(MM/DD/YYYY)           | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE | \$ 1,000,<br>\$ 500,00<br>\$ 0<br>\$ 1,000,<br>\$ 3,000, | 000           |  |
| INSR<br>LTR   | CCLUSIONS AND CONDITIONS OF SUCH  TYPE OF INSURANCE  X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: | H POLIC  | IEŚ. L | LIMITS SHOWN MAY HAVE POLICY NUMBER | BEEN RI    | POLICY EFF<br>(MM/DD/YYYY)  | POLICY EXP<br>(MM/DD/YYYY)           | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY                   | \$ 1,000,<br>\$ 500,00<br>\$ 0<br>\$ 1,000,              | 000           |  |

AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 PHPK2632045 1/1/2025 1/1/2026 ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED **BODILY INJURY (Per accident)** \$ PROPERTY DAMAGE (Per accident) Χ \$ **AUTOS ONLY** \$ **UMBRELLA LIAB** PHUB892173 1/1/2025 1/1/2026 Χ Χ \$3,000,000 OCCUR **EACH OCCURRENCE EXCESS LIAB** \$3,000,000 CLAIMS-MADE AGGREGATE DED X RETENTION\$ 10,000 WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT \$ N/A (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
AUTOMATIC ADDITIONAL INSURED: OWNERS AND / OR LESSORS OF PREMISES, LESSORS OF LEASED EQUIPMENT, SPONSORS OR COPROMOTERS SUBJECT TO A WRITTEN AGREEMENT.

PHPA150833

PHPK2632045

PHPK2632045

Heritage Harbour South CDD c/o Inframark, IMS 313 Campus Street Celebration FL 34747

If yes, describe under DESCRIPTION OF OPERATIONS below

Accident Medical Expense

Abusive Conduct Liability Participant Legal Liability

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

E.L. DISEASE - POLICY LIMIT

Per Occurrence

Aggregate Aggregate

100,000

3,000,000 1,000,000

AUTHORIZED REPRESENTATIVE

1/1/2025

1/1/2025

1/1/2025

1/1/2026

1/1/2026

1/1/2026

## THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

## ADDITIONAL INSURED: OWNERS AND / OR LESSORS OF PREMISES, LESSORS OF LEASED EQUIPMENT, SPONSORS OR CO-PROMOTERS

This endorsement modifies insurance provided under the following:

## **COMMERCIAL GENERAL LIABILITY COVERAGE PART**

This policy is amended to include as an additional Insured any person or organization of the types designated below, but only with respect to liability arising out of your operations:

- 1. Owners and / or lessors of the premises leased, rented, or loaned to you, subject to the following additional exclusions:
  - This insurance applies only to an "occurrence" which takes place while you are a tenant in the premises;
  - b. This insurance does not apply to "bodily injury" or "property damage" resulting from structural alterations, new construction or demolition operations performed by or on behalf of the owner and / or lessor of the premises;
  - c. This insurance does not apply to liability of the owners and / or lessors for "bodily injury" or "property damage" arising out of any design defect or structural maintenance of the premises or loss caused by a premises defect.

With respect to any additional insured included under this policy, this insurance does not apply to the sole negligence of such additional insured.

- 2. Lessor of Leased Equipment, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your maintenance, operation or use of equipment leased to you by such person(s) or organization(s) subject to the following additional exclusions:
  - a. This insurance does not apply to any "occurrence" which takes place after the equipment lease expires.
- 3. Sponsors
- 4. Co-Promoters