

ANNUAL RATE FILING  
CERTIFICATION

This is to certify that I have reviewed the base rates currently in effect for the company or companies and line of insurance indicated below and have determined that they conform to the requirements of the Florida Statutes as being actuarially sound and not inadequate, as defined in Sections 627.062 or 627.0651, Florida Statutes. **(Only One Line of Insurance Per Form)**

|                                |
|--------------------------------|
|                                |
| Signature of Consultant        |
| Type Name & Title              |
| Authorized Company<br>Employee |
| Type Name & Title              |
| <b>COMPANY OR COMPANIES</b>    |
|                                |
|                                |
|                                |
| LINE OF INSURANCE              |

|  |  |
|--|--|
|  | <u>Nathan Chouinard</u><br>or<br>Certifying Actuary or<br>Experienced Company<br>Ratemaker |
|  | <u>Nathan Chouinard, Asst Actuary ACAS</u><br>Type Name & Title                            |
|  | _____<br>1/1/2027<br>Date of Certification   |
|  | _____<br>1/1/2026<br>Last Certification or Base Rate                                       |
|  | _____<br>\$ 495,161<br>Actual Annual Earned Premium  |
|  | Current Policies in force <b>943</b>   |
|  | Average Incurred Loss Ratio <b>63.0 %</b>  |
|  | Expected Loss Ratio <b>68.4 %</b>  |
|  | Expected Profit Margin and<br>Contingency Factor per<br>Florida Rule <b>4.4 %</b>          |
|  | Total Expected Expense Ratio <b>27.2%</b>  |