

| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MAT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERT<br>AFFORDED BY THE POLICIES BELOW. |                          |                   |                     |              |
|--|--------------------------|-------------------|---------------------|--------------|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900  | COMPANY                  |                   |                     |              |
| Service Insurance Group, Inc.  |                          |                   |                     |              |
| PO Box 5753  |                          | ~ ~ .             |                     |              |
| 3840 Corporate Center Dr   | Safepoint Insurance      |                   |                     |              |
| Bryan TX 77805-5753  | Certain Underwriter      | 's at Lloyds-AEG  | IS (Wind Deduct)    | Buy Down)    |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |                          |                   |                     |              |
| CODE: SUB CODE:  |                          |                   |                     |              |
| AGENCY<br>CUSTOMER ID #: 7788  |                          |                   |                     |              |
| INSURED  | LOAN NUMBER              |                   | POLICY NUMBER       |              |
| Southwest Crossing Townhome Association  |                          |                   | STCP0001860-0       | 2            |
| c/o Beal Properties  | EFFECTIVE DATE           | EXPIRATION DATE   |                     |              |
| 3363 University Dr E Ste 215   | 07/15/2023               | 07/15/2024        | TERMINATED          | IF CHECKED   |
| Bryan TX 77802-  | THIS REPLACES PRIOR EVID | ENCE DATED:       |                     |              |
|  |                          |                   |                     |              |
|  |                          |                   |                     |              |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840   |                          |                   |                     |              |
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| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A                                   |                          |                   |                     | -            |
| EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN  |                          |                   |                     |              |
| SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH  | POLICIES. LIMITS SHOW    | N MAY HAVE BEEN   | REDUCED BY PAID     | CLAIMS.      |
| COVERAGE INFORMATION   |                          |                   |                     |              |
| COVERAGE / PERILS / FORMS  |                          | AMO               | UNT OF INSURANCE    | DEDUCTIBLE   |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail ded  |                          |                   | 2,972,156           | 5,000        |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to   | 2%                       |                   |                     |              |
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| REMARKS (Including Special Conditions)   |                          |                   |                     | ]            |
| Number of units: 42  |                          |                   |                     |              |
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| CANCELLATION   |                          |                   |                     |              |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE T   | HE EXPIRATION DATE THE   | REOF, THE ISSUING | INSURER WILL ENDE   | AVOR TO      |
| MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTA                        |                          | MAIL SUCH NOTICE  | SHALL IMPOSE NO C   | BLIGATION    |
| ADDITIONAL INTEREST  | -                        |                   |                     | AI 000782    |
| NAME AND ADDRESS   | X MORTGAGEE              | ADDITIONAL INSURE | ED                  |              |
|  | LOSS PAYEE               |                   |                     |              |
| WELLS FARGO HOME MTG.  | LOAN #                   |                   |                     |              |
| 800 Walnut St<br>MAC F0005-022   |                          |                   |                     |              |
| Des Moines IA 50309-   | AUTHORIZED REPRESENTATI  | VE                | <u> </u>            |              |
|  |                          | Chao              | non phase           | $\mathbf{x}$ |
|  |                          |                   | <u> </u>            |              |
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| THIS EVIDENCE OF PROPERTY INSU<br>ADDITIONAL INTEREST NAMED BELOW<br>AFFORDED BY THE POLICIES BELOW.  |  |  |                                  | FERS NO RIGHTS                       |                         |
|---|--|--|----------------------------------|--------------------------------------|-------------------------|
|   | 79)774-3900  | COMPANY  |                                  |                                      |                         |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr  | .,,  | Safepoint Insurance                            |                                  |                                      |                         |
|   | 77805-5753   | Certain Underwriter                            | s at Lloyds-ÀEG                  | IS (Wind Deduct                      | t Buy Down)             |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor   |  |  |                                  |                                      |                         |
| AGENCY<br>CUSTOMER ID #: 7788   |  |  |                                  |                                      |                         |
| INSURED   |  | LOAN NUMBER                                    |                                  | POLICY NUMBER                        |                         |
|   | · ,•   |  |                                  | STCP0001860-                         | 02                      |
| Southwest Crossing Townhome A<br>c/o Beal Properties  | ssociation   | EFFECTIVE DATE                                 | EXPIRATION DATE                  |                                      |                         |
| 3363 University Dr E Ste 215  |  | 07/15/2023                                     | 07/15/2024                       |                                      |                         |
|   | TX 77802-  | THIS REPLACES PRIOR EVIDE                      | INCE DATED:                      |                                      |                         |
| 5   |  |  |                                  |                                      |                         |
| PROPERTY INFORMATION  |  |  |                                  |                                      |                         |
| 2500-2537 Crosstimbers & 600-600<br>College Station, TX 77840   | 6 Crosstimbers   |  |                                  |                                      |                         |
| THE POLICIES OF INSURANCE LISTED<br>NOTWITHSTANDING ANY REQUIREME<br>EVIDENCE OF PROPERTY INSURANCE M<br>SUBJECT TO ALL THE TERMS, EXCLUSIO | NT, TERM OR CONDITION OF<br>IAY BE ISSUED OR MAY PERTA | ANY CONTRACT OR OTH<br>IN, THE INSURANCE AFFOR | ER DOCUMENT W<br>RDED BY THE POL | /ITH RESPECT TO<br>ICIES DESCRIBED I | WHICH THIS<br>HEREIN IS |
| COVERAGE INFORMATION  |  |  |                                  |                                      |                         |
|   | COVERAGE / PERILS / FORMS                              |  | АМС                              | OUNT OF INSURANCE                    | DEDUCTIBLE              |
| Buildings; Replacement Cost; Spec<br>**Wind Deduct. Buy Down lowers   |  |  |                                  | 2,972,156                            | 5,000                   |
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| REMARKS (Including Special Condition  | 5)   |  |                                  |                                      |                         |
| CANCELLATION  |  |  |                                  |                                      |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED PO  | THE ADDITIONAL INTEREST NAMI                           | ED BELOW, BUT FAILURE TO                       |                                  |                                      |                         |
| ADDITIONAL INTEREST   |  |  |                                  |                                      | AI 001140               |
| NAME AND ADDRESS  |  | MORTGAGEE                                      | ADDITIONAL INSUR                 | ED                                   |                         |
|   |  | LOSS PAYEE                                     |                                  |                                      |                         |
| LAI Trust   |  | LOAN #   |                                  |                                      |                         |
| PO Box 243  |  |  |                                  |                                      |                         |
| Houston   | TX 77001-  | AUTHORIZED REPRESENTATIV                       | Rae                              | may the                              | T.                      |
| ACORD 27 (2006/07) Fax: (   | 832)300-1310   | © ACORI  | CORPORATION                      | 1993-2006. All rig                   | hts reserved.           |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A M<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPE<br>AFFORDED BY THE POLICIES BELOW. |                           |                   |                    |                          |
|--|---------------------------|-------------------|--------------------|--------------------------|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900  | COMPANY                   |                   |                    |                          |
| Service Insurance Group, Inc.<br>PO Box 5753   |                           | ~ (P ·            |                    |                          |
| 3840 Corporate Center Dr   | Safepoint Insurance       | e Company (Prin   | hary Property)     |                          |
| Bryan TX 77805-5753  | Certain Underwriter       | rs at Lloyds-AEG  | 15 (Wind Deduct    | Buy Down)                |
| FAX<br>(A/C, No):     (979)774-3955     E-MAIL<br>ADDRESS: taylor@serviceingroup.com       code:     sub code:                                     |                           |                   |                    |                          |
| AGENCY<br>CUSTOMER ID #: 7788  |                           |                   |                    |                          |
| INSURED  | LOAN NUMBER               |                   | POLICY NUMBER      |                          |
|  | 150866840                 |                   | STCP0001860-       | 02                       |
| Southwest Crossing Townhome Association  | EFFECTIVE DATE            | EXPIRATION DATE   |                    |                          |
| c/o Beal Properties  | 07/15/2023                | 07/15/2024        |                    | D UNTIL<br>ED IF CHECKED |
| 3363 University Dr E Ste 215   | THIS REPLACES PRIOR EVID  |                   |                    |                          |
| Bryan TX 77802-  |                           |                   |                    |                          |
|  |                           |                   |                    | ı                        |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers  |                           |                   |                    |                          |
| College Station, TX 77840  |                           |                   |                    |                          |
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| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUE<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION O                                     |                           |                   |                    |                          |
| EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERT   | AIN, THE INSURANCE AFFO   | RDED BY THE POLI  | CIES DESCRIBED H   | HEREIN IS                |
| SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUC   | CH POLICIES. LIMITS SHOW  | N MAY HAVE BEEN   | REDUCED BY PAIL    | D CLAIMS.                |
| COVERAGE INFORMATION   |                           |                   |                    |                          |
| COVERAGE / PERILS / FORMS  |                           | AMO               | UNT OF INSURANCE   | DEDUCTIBLE               |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail of   | leduct.**                 |                   | 2,972,156          | 5,000                    |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down  |                           |                   |                    | r<br>-                   |
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| REMARKS (Including Special Conditions)   |                           |                   |                    | 1                        |
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| CANCELLATION   |                           |                   |                    |                          |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFOR  | E THE EXPIRATION DATE THE | REOF, THE ISSUING | INSURER WILL END   | EAVOR TO                 |
| MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAI<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESEN             |                           | MAIL SUCH NOTICE  | SHALL IMPOSE NO    | OBLIGATION               |
| ADDITIONAL INTEREST  |                           |                   |                    | AI 001824                |
|  | MODTOAOES                 |                   |                    | AI 001024                |
|  | MORTGAGEE                 | ADDITIONAL INSURE | ED                 |                          |
| Countrywide Home Loans, Inc.   | LOSS PAYEE                |                   |                    |                          |
| ISAOA, ATIMA<br>DO Day 061206  | 150866840                 |                   |                    |                          |
| PO Box 961206  |                           |                   |                    |                          |
| FTWX-22<br>Fort Worth TX 76161-  | AUTHORIZED REPRESENTATI   |                   | -21                |                          |
| Fort Worth TX 76161-   |                           | Chao              | want solar         | ~~                       |
|  |                           |                   |                    |                          |
| ACORD 27 (2006/07) Fax: (800)293-8158  | © ACOR                    | D CORPORATION     | 1993-2006. All rig | hts reserved.            |



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|--|---|---|--------------------------------|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900  | COMPANY   |   |                                |
| Service Insurance Group, Inc.  |   |   |                                |
| PO Box 5753  | Safanaint Inguranaa Camr                                | ony (Drimony Dronarty                         |                                |
| 3840 Corporate Center Dr   | Safepoint Insurance Comp<br>Certain Underwriters at Llo | ovds-AFGIS (Wind Dec                          | )<br>luct Buy Down)            |
| Bryan TX 77805-5753  |   | yus-meons (while bee                          | luct Duy Down)                 |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |   |   |                                |
| CODE: SUB CODE:  |   |   |                                |
| AGENCY<br>CUSTOMER ID #: 7788  |   |   |                                |
| INSURED  | LOAN NUMBER   |   | (0.02                          |
| Southwest Crossing Townhome Association  | EFFECTIVE DATE EXPI                                     | STCP000180                                    | 50-02                          |
| c/o Beal Properties  |   | CONTI   | NUED UNTIL<br>NATED IF CHECKED |
| 3363 University Dr E Ste 215<br>Bryan TX 77802-  | THIS REPLACES PRIOR EVIDENCE DAT                        |   |                                |
| Bryan TX 77802-  |   |   |                                |
| PROPERTY INFORMATION   |   |   |                                |
| LOCATION/DESCRIPTION   |   |   |                                |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers  |   |   |                                |
| College Station, TX 77840  |   |   |                                |
|  |   |   |                                |
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| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH   | NY CONTRACT OR OTHER DOO<br>N, THE INSURANCE AFFORDED B | CUMENT WITH RESPECT<br>Y THE POLICIES DESCRIB | TO WHICH THIS<br>ED HEREIN IS  |
|  |   |   | AID OLAINIO.                   |
|  |   |   |                                |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail ded   | huet **   | AMOUNT OF INSURANCE                           |                                |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to   |   | 2,972,15                                      | 0 5,000                        |
| While Deduce. Buy Down to were while that deduce down to   | 270   |   |                                |
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| REMARKS (Including Special Conditions)   |   |   |                                |
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| CANCELLATION   |   |   |                                |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE T MAIL $\_10$ days written notice to the additional interest namel or liability of any kind upon the insurer, its agents or representation of the second sec | D BELOW, BUT FAILURE TO MAIL SU                         |   |                                |
| ADDITIONAL INTEREST  |   |   | AI 003026                      |
| NAME AND ADDRESS   | X MORTGAGEE ADDI  | TIONAL INSURED                                |                                |
|  | LOSS PAYEE  |   |                                |
| US BANK NATIONAL ASSOCIATION   | LOAN #  |   |                                |
| 4325 17TH AVE SOUTHWEST  |   |   |                                |
| FARGO ND 58103-  | AUTHORIZED REPRESENTATIVE                               | 7 41  |                                |
|  |   | Kaonay A                                      | -int                           |
|  |   | <u>)</u>                                      |                                |
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| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW.  |   |                                   |                    |                         |
|---|---|-----------------------------------|--------------------|-------------------------|
| AGENCY PHONE (979)774-3900  | COMPANY                                     |                                   |                    |                         |
| Service Insurance Group, Inc.   | _   |                                   |                    |                         |
| PO Box 5753   |   | c (D)                             |                    |                         |
| 3840 Corporate Center Dr  | Safepoint Insurance<br>Certain Underwriters | Company (Prin                     | ary Property)      |                         |
| Bryan TX 77805-5753   | Certain Underwriters                        | at Lloyds-AEG                     | IS (Willd Deduci   | Buy Down)               |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com  |   |                                   |                    |                         |
| CODE: SUB CODE:   |   |                                   |                    |                         |
| AGENCY<br>CUSTOMER ID #: 7788   |   |                                   |                    |                         |
| INSURED   | LOAN NUMBER                                 |                                   | POLICY NUMBER      |                         |
| Southwest Crossing Townhome Association   |   |                                   | STCP0001860-       | 02                      |
| c/o Beal Properties   | EFFECTIVE DATE                              | EXPIRATION DATE                   |                    |                         |
| 3363 University Dr E Ste 215  | 07/15/2023                                  | 07/15/2024                        | TERMINATE          | D IF CHECKED            |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVIDE                   | NCE DATED:                        |                    |                         |
| PROPERTY INFORMATION  |   |                                   |                    |                         |
| LOCATION/DESCRIPTION  |   |                                   |                    |                         |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers   |   |                                   |                    |                         |
| College Station, TX 77840   |   |                                   |                    |                         |
|   |   |                                   |                    |                         |
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| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN,<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F | NY CONTRACT OR OTHE                         | ER DOCUMENT W<br>RDED BY THE POLI | ITH RESPECT TO     | WHICH THIS<br>HEREIN IS |
| COVERAGE INFORMATION  |   |                                   |                    |                         |
| COVERAGE / PERILS / FORMS   |   |                                   | UNT OF INSURANCE   | DEDUCTIBLE              |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  |   | Amo                               | 2,972,156          | 5,000                   |
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| REMARKS (Including Special Conditions)  |   |                                   |                    |                         |
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| CANCELLATION  |   |                                   |                    |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THAIL $30$ days written notice to the additional interest named or liability of any kind upon the insurer, its agents or representat   | BELOW, BUT FAILURE TO                       |                                   |                    |                         |
| ADDITIONAL INTEREST   |   |                                   |                    | AI 003119               |
| ADDITIONAL INTEREST<br>NAME AND ADDRESS   | MORTGAGEE                                   | ADDITIONAL INSURI                 |                    | AI 003119               |
| Prosperity Bank   | LOSS PAYEE                                  |                                   | _0                 |                         |
| Attn: Vicky   | LOSS PAYEE                                  |                                   |                    |                         |
| ISAOA/ATIMA   |   |                                   |                    |                         |
| 3710 East 29th Street   | AUTHORIZED REPRESENTATIV                    |                                   |                    |                         |
| Bryan TX 77802-   |   | Rad                               | non the            | - <del>7</del> ~        |
| -   |   |                                   | )                  |                         |
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|---|--|---|------------------|-------------------------|
| AGENCY PHONE (979)774-3900  | COMPANY  |   |                  |                         |
| Service Insurance Group, Inc.<br>PO Box 5753  | Safepoint Insurance                                  | e Company (Prin   | ary Property)    |                         |
| 3840 Corporate Center Dr<br>BryanTX 77805-5753  |  | Certain Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down) |                  |                         |
| FAX<br>(A/C, No):       (979)774-3955       E-MAIL<br>ADDRESS: taylor@serviceingroup.com         CODE:       SUB CODE:  |  |   |                  |                         |
| AGENCY<br>CUSTOMER ID #: 7788   |  |   |                  |                         |
| INSURED   | LOAN NUMBER  |   | POLICY NUMBER    |                         |
| Southwest Crossing Townhome Association   | 3577603  |   | STCP0001860-     | 02                      |
| c/o Beal Properties   | EFFECTIVE DATE                                       | EXPIRATION DATE   |                  |                         |
| 3363 University Dr E Ste 215  | 07/15/2023   | 07/15/2024  |                  | ED IF CHECKED           |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVIDE                            | ENCE DATED:   |                  |                         |
| PROPERTY INFORMATION  |  |   |                  | ]                       |
|   |  |   |                  |                         |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |  |   |                  |                         |
|   |  |   |                  |                         |
|   |  |   |                  |                         |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSU<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PER<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SU | OF ANY CONTRACT OR OTH<br>RTAIN, THE INSURANCE AFFOR | ER DOCUMENT W<br>RDED BY THE POLI                           | ITH RESPECT TO   | WHICH THIS<br>HEREIN IS |
|   |  |   |                  |                         |
| COVERAGE INFORMATION  |  |   |                  |                         |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail  | daduat **  | AMO   | UNT OF INSURANCE | DEDUCTIBLE<br>5 000     |
|   |  |   | 2,972,156        | 5,000                   |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down   | n to 2%  |   |                  |                         |
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| REMARKS (Including Special Conditions)  |  |   |                  |                         |
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| CANCELLATION  |  |   |                  |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFO<br>MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST N/<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESE                                | AMED BELOW, BUT FAILURE TO                           |   |                  |                         |
|   | LNTATIVES.   |   |                  | AI 003130               |
| ADDITIONAL INTEREST NAME AND ADDRESS  | MORTGAGEE  | ADDITIONAL INSURE   | =D               | AI 003130               |
|   |  |   | ΞU               |                         |
| AmTrust Bank, ISAOA   | LOSS PAYEE   |   |                  |                         |
| Insurance Center  | 3577603  |   |                  |                         |
| PO Box 11041  |  | /F  |                  |                         |
| Orange CA 92856-  |  | " Rae   | no the           | ~~                      |
|   |  |   | - \ · · -        |                         |
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| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MAT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERT<br>AFFORDED BY THE POLICIES BELOW. |  |                                |                      |                          |
|--|--|--------------------------------|----------------------|--------------------------|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900  | COMPANY                                    |                                |                      |                          |
| Service Insurance Group, Inc.  | 1  |                                |                      |                          |
| PO Box 5753  | Sofor aint I.                              | Commons (D. )                  | a ante Duara a start |                          |
| 3840 Corporate Center Dr   | Safepoint Insurance<br>Certain Underwriter | Company (Prin<br>at Lloyds-AEG | ary Property)        | Buy Down)                |
| Bryan TX 77805-5753  |  | s at Livyus-AEO                |                      |                          |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   | _  |                                |                      |                          |
| CODE: SUB CODE:  | _  |                                |                      |                          |
| AGENCY<br>CUSTOMER ID #: 7788  |  |                                | <b>BOLIOV 1</b>      |                          |
| INSURED  | LOAN NUMBER                                |                                |                      |                          |
| Southwest Crossing Townhome Association  | EFFECTIVE DATE                             | EXPIRATION DATE                | STCP0001860-         | 02                       |
| c/o Beal Properties  | 07/15/2023                                 | 07/15/2024                     |                      | D UNTIL<br>ED IF CHECKED |
| 3363 University Dr E Ste 215   | 07/13/2023<br>THIS REPLACES PRIOR EVIDE    |                                |                      |                          |
| Bryan TX 77802-  |  |                                |                      |                          |
|  | 1  |                                |                      | J                        |
| LOCATION/DESCRIPTION<br>2500-2537 Crosstimbers & 600-606 Crosstimbers  |  |                                |                      |                          |
| College Station, TX 77840  |  |                                |                      |                          |
| Conege Station, 1X //040   |  |                                |                      |                          |
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| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A                                   |  |                                |                      |                          |
| EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN  | N, THE INSURANCE AFFOR                     | RDED BY THE POLI               | CIES DESCRIBED H     | HEREIN IS                |
| SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH  | POLICIES. LIMITS SHOWI                     | N MAY HAVE BEEN                | REDUCED BY PAIL      | D CLAIMS.                |
| COVERAGE INFORMATION   |  | 1                              | 1                    |                          |
| COVERAGE / PERILS / FORMS  | 1  | АМО                            |                      |                          |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail dec  |  |                                | 2,972,156            | 5,000                    |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to   | 2%   |                                |                      |                          |
|  |  |                                |                      |                          |
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| REMARKS (Including Special Conditions)   |  |                                |                      |                          |
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|  |  |                                |                      |                          |
| CANCELLATION   |  |                                |                      |                          |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE T<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAME                            |  |                                |                      |                          |
| OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTA  |  |                                |                      | OBLIGATION               |
| ADDITIONAL INTEREST  |  |                                |                      | AI 005783                |
| NAME AND ADDRESS   | MORTGAGEE                                  | ADDITIONAL INSURI              | ED                   |                          |
| Everatt Einangial Ing dhe Summer I anding  | LOSS PAYEE                                 |                                |                      |                          |
| Everett Financial, Inc. dba Supreme Lending<br>ISAOA/ATIMA   | LOAN #                                     |                                |                      |                          |
| PO Box 7057  |  |                                |                      |                          |
| Troy MI 48007-   | AUTHORIZED REPRESENTATIV                   |                                | -11                  |                          |
|  |  | Chao                           | nay Afri             | 72                       |
|  |  |                                | <u>ر</u>             |                          |
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| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MAT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERT<br>AFFORDED BY THE POLICIES BELOW.  |   |                                   |                               |                         |
|---|---|-----------------------------------|-------------------------------|-------------------------|
| AGENCY PHONE (A/C, No, Ext): (979)774-3900  | COMPANY                                       |                                   |                               |                         |
| Service Insurance Group, Inc.   |   |                                   |                               |                         |
| PO Box 5753   |   | ~ ~ .                             |                               |                         |
| 3840 Corporate Center Dr  | Safepoint Insurance                           | Company (Prin                     | hary Property)                |                         |
| Bryan TX 77805-5753   | Certain Underwriters                          | s at Lloyds-AEG                   | IS (Wind Deduct               | Buy Down)               |
| FAX<br>(AC, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   | _   |                                   |                               |                         |
| CODE: SUB CODE:   |   |                                   |                               |                         |
| AGENCY<br>CUSTOMER ID #: 7788   |   |                                   |                               |                         |
| INSURED   | LOAN NUMBER                                   |                                   | POLICY NUMBER                 |                         |
|   |   |                                   | STCP0001860-0                 | 02                      |
| Southwest Crossing Townhome Association   | EFFECTIVE DATE                                | EXPIRATION DATE                   |                               |                         |
| c/o Beal Properties   | 07/15/2023                                    | 07/15/2024                        |                               | D IF CHECKED            |
| 3363 University Dr E Ste 215<br>Bryan TX 77802-   | THIS REPLACES PRIOR EVIDE                     | NCE DATED:                        |                               |                         |
| Diyan 1A //802-   |   |                                   |                               |                         |
|   |   |                                   |                               |                         |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |   |                                   |                               |                         |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH  | NY CONTRACT OR OTHI<br>I, THE INSURANCE AFFOF | ER DOCUMENT W<br>RDED BY THE POLI | ITH RESPECT TO                | WHICH THIS<br>IEREIN IS |
| COVERAGE INFORMATION  |   |                                   |                               |                         |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail ded<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to  |   | AMO                               | unt of insurance<br>2,972,156 | 5,000                   |
| REMARKS (Including Special Conditions)  |   |                                   |                               |                         |
|   |   |                                   |                               |                         |
| CANCELLATION  |   |                                   |                               |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TO MAIL $30$ DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATION OF A DISTRIBUTION OF A DIS | BELOW, BUT FAILURE TO                         |                                   |                               |                         |
| ADDITIONAL INTEREST   |   |                                   |                               | AI 005861               |
| NAME AND ADDRESS  | MORTGAGEE                                     | ADDITIONAL INSURE                 | ED                            |                         |
|   | LOSS PAYEE                                    |                                   |                               |                         |
| Residential Credit Solutions ISAOA  | LOSS PAYEE                                    |                                   |                               |                         |
| PO Box 692330   |   |                                   |                               |                         |
| San Antonio TX 78269-   | AUTHORIZED REPRESENTATIV                      |                                   | <u> </u>                      |                         |
|   |   | Chao                              | nay the                       | -7                      |
| ACORD 27 (2006/07) Fax: (210)679-4118   | © ACORD                                       | CORPORATION                       | 1993-2006. All rig            | hts reserved.           |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW.  |   |  |  |  |
|---|---|--|--|--|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900   | COMPANY   |  |  |  |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr<br>Bryan TX 77805-5753   | Safepoint Insurance Company (Primary Property)<br>Certain Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down) |  |  |  |
| FAX<br>(A/C, No):       (979)774-3955       E-MAIL<br>ADDRESS: taylor@serviceingroup.com         code:       SUB code:         AGENCY<br>CUSTOMER ID #:       7788  | -   |  |  |  |
| INSURED   | LOAN NUMBER   | POLICY NUMBER  |  |  |
| Southwest Crossing Townhome Association   |   | STCP0001860-02   |  |  |
| Southwest Crossing Townhome Association c/o Beal Properties   | EFFECTIVE DATE EXPIRATION   |  |  |  |
| 3363 University Dr E Ste 215  | 07/15/2023 07/15/202  |  |  |  |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVIDENCE DATED:   |  |  |  |
| PROPERTY INFORMATION  |   |  |  |  |
| LOCATION/DESCRIPTION  |   |  |  |  |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |   |  |  |  |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN,<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F | NY CONTRACT OR OTHER DOCUMEN<br>THE INSURANCE AFFORDED BY THE I   | NT WITH RESPECT TO WHICH THIS POLICIES DESCRIBED HEREIN IS |  |  |
| COVERAGE INFORMATION  |   |  |  |  |
| COVERAGE / PERILS / FORMS   |   | AMOUNT OF INSURANCE DEDUCTIBLE                             |  |  |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  |   | 2,972,156 5,000  |  |  |
|   |   |  |  |  |
| REMARKS (Including Special Conditions)  |   |  |  |  |
|   |   |  |  |  |
| CANCELLATION  |   |  |  |  |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTAT   | BELOW, BUT FAILURE TO MAIL SUCH NO  |  |  |  |
| ADDITIONAL INTEREST   |   | AI 005884  |  |  |
| NAME AND ADDRESS  | MORTGAGEE ADDITIONAL I  | NSURED   |  |  |
| MGC Mortgage, Inc.  | LOSS PAYEE  |  |  |  |
| ISAOA   |   |  |  |  |
| PO Box 961292   | AUTHORIZED REPRESENTATIVE   |  |  |  |
| Fort Worth TX 76161-0292  | Che   | Drang Hairt  |  |  |
| ACORD 27 (2006/07) Fax: (949)465-7253   | © ACORD CORPORAT  | ION 1993-2006. All rights reserved.                        |  |  |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MAT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPER<br>AFFORDED BY THE POLICIES BELOW.   |  |                  |                               |                         |
|---|--|------------------|-------------------------------|-------------------------|
| AGENCY PHONE<br>(AC, No, Ext): (979)774-3900  | COMPANY                                      |                  |                               |                         |
| Service Insurance Group, Inc.   |  |                  |                               |                         |
| PO Box 5753   |  |                  | _ 、                           |                         |
| 3840 Corporate Center Dr  | Safepoint Insurance                          | e Company (Prin  | hary Property)                |                         |
| Bryan TX 77805-5753   | Certain Underwriter                          | rs at Lloyds-AEG | IS (Wind Deduc                | t Buy Down)             |
| FAX<br>(AC, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |  |                  |                               |                         |
| CODE: SUB CODE:   |  |                  |                               |                         |
| AGENCY<br>CUSTOMER ID #: 7788   |  |                  |                               |                         |
| INSURED   | LOAN NUMBER                                  |                  | POLICY NUMBER                 |                         |
| Southwest Crossing Townhome Association   |  |                  | STCP0001860-                  | 02                      |
| c/o Beal Properties   | EFFECTIVE DATE                               | EXPIRATION DATE  |                               |                         |
| 3363 University Dr E Ste 215  | 07/15/2023                                   | 07/15/2024       |                               | ED IF CHECKED           |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVID                     | ENCE DATED:      |                               |                         |
| -   |  |                  |                               |                         |
|   |  |                  |                               | ı                       |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |  |                  |                               |                         |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAI<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH | ANY CONTRACT OR OTH<br>N, THE INSURANCE AFFO | IER DOCUMENT W   | ITH RESPECT TO                | WHICH THIS<br>HEREIN IS |
| COVERAGE INFORMATION  |  |                  |                               |                         |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail de<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to   |  | AMO              | unt of insurance<br>2,972,156 | deductible<br>5,000     |
| REMARKS (Including Special Conditions)  |  |                  |                               |                         |
| Christina Haynes & Bryce Haynes<br>2532 Cross Timbers Dr<br>College Station TX 77840<br>Loan # 101372053  |  |                  |                               |                         |
| CANCELLATION  |  |                  |                               |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAME<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENT   | D BELOW, BUT FAILURE TO                      |                  |                               |                         |
| ADDITIONAL INTEREST   |  |                  |                               | AI 006305               |
| NAME AND ADDRESS  | MORTGAGEE                                    | ADDITIONAL INSUR | ED                            |                         |
| Bank of America, NA   | LOSS PAYEE                                   |                  |                               |                         |
| Its Successors and/or Its   | LOAN #                                       |                  |                               |                         |
| Assigns, A.T.I.M.A.   |  |                  |                               |                         |
| PO Box 961291   | AUTHORIZED REPRESENTATI                      | VE               |                               |                         |
| Fort Worth TX 76161-029   | 1  | Rae              | non the                       |                         |
| ACORD 27 (2006/07) Fax: (800)293-8158   | © ACOR                                       | D CORPORATION    | ر                             | hts reserved.           |
| · · · · · · · · · · · · · · · · · · ·   |  |                  |                               |                         |



| THIS EVIDENCE OF PROP<br>ADDITIONAL INTEREST NAI<br>AFFORDED BY THE POLICI | MED BELOW. THIS EVI                  |                     |  |                   |                    |               |
|--|--------------------------------------|---------------------|--|-------------------|--------------------|---------------|
|  | PHONE<br>(A/C, No, Ext): (979)774-39 | 00                  | COMPANY                                    |                   |                    |               |
| Service Insurance Group  |                                      |                     | _  |                   |                    |               |
| PO Box 5753  |                                      |                     |  | C (D)             |                    |               |
| 3840 Corporate Center I  | Dr                                   |                     | Safepoint Insurance<br>Certain Underwriter | e Company (Prin   | nary Property)     | t Dury Darry) |
| Bryan  | TX 77805-57                          | '53                 | Certain Underwriter                        | 's at Lloyds-AEG  | is (wind Deduc     | (Buy Down)    |
| FAX<br>(A/C, No): (979)774-3955  | MAIL DRESS: taylor@service           | ingroup.com         |  |                   |                    |               |
| CODE:  | SUB CODE:                            | - U 1               |  |                   |                    |               |
| AGENCY<br>CUSTOMER ID #: 7788  |                                      |                     |  |                   |                    |               |
| INSURED  |                                      |                     | LOAN NUMBER                                |                   | POLICY NUMBER      |               |
| Southwest Crossing To  | whoma Association                    |                     |  |                   | STCP0001860-       | 02            |
| c/o Beal Properties  | willionie Association                |                     | EFFECTIVE DATE                             | EXPIRATION DATE   |                    |               |
| 3363 University Dr E S   | te 215                               |                     | 07/15/2023                                 | 07/15/2024        |                    | ED IF CHECKED |
| Bryan  | TX 77802                             | 2-                  | THIS REPLACES PRIOR EVID                   | ENCE DATED:       |                    |               |
| 215411   | 111 ,,000                            |                     |  |                   |                    |               |
| PROPERTY INFORMATION   |                                      |                     |  |                   |                    |               |
| LOCATION/DESCRIPTION   |                                      | _                   |  |                   |                    |               |
| 2500-2537 Crosstimbers   |                                      | ibers               |  |                   |                    |               |
| College Station, TX 778  | 40                                   |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
| THE POLICIES OF INSURAI<br>NOTWITHSTANDING ANY F                           |                                      |                     |  |                   |                    |               |
| EVIDENCE OF PROPERTY IN  |                                      |                     |  |                   |                    |               |
| SUBJECT TO ALL THE TERM  |                                      |                     |  |                   |                    |               |
| COVERAGE INFORMATION   |                                      |                     |  |                   |                    |               |
|  | COVERAGE                             | / PERILS / FORMS    |  | AMC               | UNT OF INSURANCE   | DEDUCTIBLE    |
| Buildings; Replacement   | Cost; Special Form;                  | 5% Wind/Hail ded    | uct.**                                     |                   | 2,972,156          | 5,000         |
| **Wind Deduct. Buy Do  |                                      |                     |  |                   | , ,                | ,             |
| 5  |                                      |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
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|  |                                      |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
| REMARKS (Including Speci   | al Conditions)                       |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
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|  |                                      |                     |  |                   |                    |               |
|  |                                      |                     |  |                   |                    |               |
| CANCELLATION   |                                      |                     |  |                   |                    |               |
| SHOULD ANY OF THE ABOVE D  | ESCRIBED POLICIES BE (               | CANCELLED BEFORE TH | E EXPIRATION DATE THE                      | REOF. THE ISSUING | INSURER WILL END   | EAVOR TO      |
| MAILDAYS WRITTEN   | N NOTICE TO THE ADDITIC              | NAL INTEREST NAMED  | BELOW, BUT FAILURE TO                      |                   |                    |               |
| OR LIABILITY OF ANY KIND UPO   | ON THE INSURER, ITS AGE              | ENTS OR REPRESENTAT | IVES.                                      |                   |                    |               |
| ADDITIONAL INTEREST  |                                      |                     |  |                   |                    | AI 007650     |
| NAME AND ADDRESS   |                                      |                     | X MORTGAGEE                                | ADDITIONAL INSUR  | ED                 |               |
|  |                                      |                     | LOSS PAYEE                                 |                   |                    |               |
| Wells Farg   | go N.A. No 708                       |                     | LOAN #                                     |                   |                    |               |
| PO Box 57  |                                      | 011 /               |  |                   |                    |               |
| Springfield  | 1                                    | OH 45501-5708       | AUTHORIZED REPRESENTATIV                   |                   | -11                |               |
|  |                                      |                     |  | Chao              | may Afri           | - <b>T</b>    |
|  |                                      |                     |  |                   |                    |               |
| ACORD 27 (2006/07)   | Fax: (937)525-8                      | 3881                | © ACORI                                    | CORPORATION       | 1993-2006. All rig | hts reserved. |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW.  |   |                                   |                    |                         |
|---|---|-----------------------------------|--------------------|-------------------------|
| AGENCY PHONE (979)774-3900  | COMPANY   |                                   |                    |                         |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr<br>Bryan TX 77805-5753   | Safepoint Insurance Company (Primary Property)<br>Certain Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down) |                                   |                    |                         |
| FAX<br>(AC, No):       (979)774-3955       E-MAIL<br>ADDRESS: taylor@serviceingroup.com         CODE:       SUB CODE:   |   |                                   |                    |                         |
| AGENCY<br>CUSTOMER ID #: 7788   |   |                                   |                    |                         |
| INSURED   | LOAN NUMBER   |                                   |                    |                         |
| Southwest Crossing Townhome Association   | 7130109239<br>EFFECTIVE DATE  | EXPIRATION DATE                   | STCP0001860-       | 02                      |
| c/o Beal Properties   | 07/15/2023  | 07/15/2024                        |                    | D UNTIL                 |
| 3363 University Dr E Ste 215  | THIS REPLACES PRIOR EVIDE   |                                   |                    |                         |
| Bryan TX 77802-   |   |                                   |                    |                         |
|   |   |                                   |                    | ]                       |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |   |                                   |                    |                         |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN,<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F | NY CONTRACT OR OTH<br>THE INSURANCE AFFOR   | ER DOCUMENT W<br>RDED BY THE POLI | ITH RESPECT TO     | WHICH THIS<br>HEREIN IS |
| COVERAGE INFORMATION  |   |                                   |                    |                         |
| COVERAGE / PERILS / FORMS   |   | АМО                               | UNT OF INSURANCE   | DEDUCTIBLE              |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  |   |                                   | 2,972,156          | 5,000                   |
|   |   |                                   |                    |                         |
| REMARKS (Including Special Conditions)  |   | · · · ·                           |                    |                         |
|   |   |                                   |                    |                         |
| CANCELLATION  |   |                                   |                    |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TH<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTAT   | BELOW, BUT FAILURE TO   |                                   |                    |                         |
| ADDITIONAL INTEREST   |   |                                   |                    | AI 008267               |
| NAME AND ADDRESS  | MORTGAGEE   | ADDITIONAL INSUR                  | ED                 |                         |
|   | LOSS PAYEE  |                                   |                    |                         |
| Ocwen Loan Servicing, LLC<br>Its Successors and/or Assigns  | LOAN #  |                                   |                    | 7                       |
| PO box 6723   | 7130109239  |                                   |                    |                         |
| Springfield OH 45501-6723   | AUTHORIZED REPRESENTATIV  | Ras                               | may the            | - <del>7</del> -1       |
|   |   |                                   |                    |                         |
| ACORD 27 (2006/07) Fax: (888)882-1816   | © ACORE   | CORPORATION                       | 1993-2006. All rig | hts reserved.           |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MAT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERT<br>AFFORDED BY THE POLICIES BELOW.   |   |  |
|--|---|--|
| AGENCY PHONE (A/C, No, Ext): (979)774-3900   | COMPANY   |  |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr   | Safepoint Insurance Company (Primary Property)                    |  |
| Bryan TX 77805-5753  | Certain Underwriters at Lloyds-A                                  | EGIS (Wind Deduct Buy Down)                                |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   | -   |  |
| (A/C, No): (777)774-5755 ADDRESS: taylol (a)service ingroup.com  | 1   |  |
| AGENCY<br>CUSTOMER ID #: 7788  | _   |  |
| INSURED  | LOAN NUMBER   | POLICY NUMBER  |
| Southerest Consisting Torreshows Association   |   | STCP0001860-02   |
| Southwest Crossing Townhome Association<br>c/o Beal Properties   | EFFECTIVE DATE EXPIRATION I                                       |  |
| 3363 University Dr E Ste 215   | 07/15/2023 07/15/202  |  |
| Bryan TX 77802-  | THIS REPLACES PRIOR EVIDENCE DATED:                               |  |
| y  |   |  |
| PROPERTY INFORMATION   |   |  |
| LOCATION/DESCRIPTION<br>2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840   |   |  |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH | NY CONTRACT OR OTHER DOCUMEN<br>, THE INSURANCE AFFORDED BY THE I | NT WITH RESPECT TO WHICH THIS POLICIES DESCRIBED HEREIN IS |
| COVERAGE INFORMATION   |   |  |
| COVERAGE / PERILS / FORMS  |   | AMOUNT OF INSURANCE DEDUCTIBLE                             |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail ded<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  |   | 2,972,156 5,000  |
|  |   |  |
| REMARKS (Including Special Conditions)   |   | 1  |
|  |   |  |
| CANCELLATION   |   |  |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TO<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATION   | BELOW, BUT FAILURE TO MAIL SUCH NO                                |  |
| ADDITIONAL INTEREST  |   | AI 008590  |
| NAME AND ADDRESS   | MORTGAGEE ADDITIONAL IN   |  |
| Brazos Valley Property Management/Century 21<br>903 Texas Ave. S.  | LOAN #  |  |
| College Station TX 77840-  |   | Oney Ahurt   |
| ACORD 27 (2006/07) Fax: ( ) -  | © ACORD CORPORAT  | ION 1993-2006. All rights reserved.                        |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW.  |   |                                   |                               |                         |
|---|---|-----------------------------------|-------------------------------|-------------------------|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900   | COMPANY   |                                   |                               |                         |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr<br>Bryan TX 77805-5753<br>FAX<br>(Arc, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   | Safepoint Insurance Company (Primary Property)<br>Certain Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down) |                                   | : Buy Down)                   |                         |
| CODE: SUB CODE:   | -   |                                   |                               |                         |
| AGENCY<br>CUSTOMER ID #: 7788   | -   |                                   |                               |                         |
| INSURED   | LOAN NUMBER   |                                   | POLICY NUMBER                 |                         |
|   | 6058387   |                                   | STCP0001860-0                 | 02                      |
| Southwest Crossing Townhome Association<br>c/o Beal Properties  | EFFECTIVE DATE  | EXPIRATION DATE                   |                               |                         |
| 3363 University Dr E Ste 215  | 07/15/2023  | 07/15/2024                        |                               | D IF CHECKED            |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVIDE   | NCE DATED:                        |                               |                         |
| Diyun 171 17002   |   |                                   |                               |                         |
| PROPERTY INFORMATION  |   |                                   |                               |                         |
| LOCATION/DESCRIPTION  |   |                                   |                               |                         |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |   |                                   |                               |                         |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN,<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH P | IY CONTRACT OR OTHE<br>THE INSURANCE AFFOR  | ER DOCUMENT W<br>RDED BY THE POLI | ITH RESPECT TO                | WHICH THIS<br>HEREIN IS |
| COVERAGE INFORMATION  |   |                                   |                               |                         |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2   |   | AMO                               | unt of insurance<br>2,972,156 | 5,000                   |
| REMARKS (Including Special Conditions)  |   |                                   |                               |                         |
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| CANCELLATION  |   |                                   |                               |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TH<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTAT   | BELOW, BUT FAILURE TO   |                                   |                               |                         |
| ADDITIONAL INTEREST   |   |                                   |                               | AI 009451               |
| NAME AND ADDRESS  | MORTGAGEE   | ADDITIONAL INSURI                 | ED                            |                         |
|   | LOSS PAYEE  |                                   |                               |                         |
| Cole Taylor Bank  | LOAN #  |                                   |                               |                         |
| ISAOA ATIMA   | 6058387   |                                   |                               |                         |
| P.O. Box 7059   | AUTHORIZED REPRESENTATIV  | E                                 |                               |                         |
| Troy MI 48007-7059  |   | Chao                              | may the                       | 75                      |
| ACORD 27 (2006/07) Fax: (248)878-2405   | © ACORD   | CORPORATION                       | 1993-2006. All rig            | hts reserved.           |



DATE (MM/DD/YYYY) 12/07/2023

| ADDITION         COMPAGE         COMPAGE           Service Insurance Group, Inc.         PO Box 5733         Safepoint Insurance Company (Primary Property)           Bryan         TX 77805-5753         Safepoint Insurance Company (Primary Property)           Bryan         TX 77805-5753         Safepoint Insurance Company (Primary Property)           Criticia Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down)         Safepoint Insurance Company (Primary Property)           Compace         Insurance Company (Primary Property)           Constant         Insurance Company (Primary Property)           Safety Information Property         Insurance Company (Primary Property)           Safety Information         Insurance Company (Primary Property)   | THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW. |                          |                  |                   |              |
|---|--|--------------------------|------------------|-------------------|--------------|
| Service Insurance Groups, Inc.<br>PO Box 573<br>3840 Corporate Center Dr<br>Bryan TX 77805-5753<br>We see (999)774-3955 Isometers to long Serviceingroup.com<br>ore isometers in Lloyds-AEGIS (Wind Deduet Buy Down)<br>Millions of the second serviceingroup.com<br>ore isometers in Lloyds-AEGIS (Wind Deduet Buy Down)<br>Southwest Crossing Townhome Association<br>of Beal Properties<br>3030 University Dr E Ste 215<br>Bryan TX 77802-<br>PROPERTY INFORMATION<br>Constitution of the second service in the second service in the second second service in the second sec  |  | COMPANY                  |                  |                   |              |
| PO Box 5733       Safe Corporate Center Dr         Bryan       TX 77805-5753         Bryan       TX 77805-5753         Construction       Just corporate Center Dr         Add Corporate Center Dr       Just corporate Center Dr         Market Corporate Center Dr       Just corporate Center Dr         Add Corporate Center Dr       Just corporate Center Dr         Southwest Crossing Townhome Association       Corporate Center Dr         Co Beal Properties       STC P0001860-02         3303 University Dr E Str 215       Dross corporate Center Dr         Bryan       TX 77802-         PROPERTY INFORMATION       Str 2000-203 Cr 2000 Distributers         College Station, TX 77840       Dross corporate Center Dr         THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURCE DATE:       DOINT CONTROLL DR         Sublement Conference       Coverage Predict Provide Properties ISSUED TO THE INSURCE DATE:       DOINT COVERAGE PROCEED TO WHORE CANCER DATE:         Sublement Coverage Predict Provide Predict Provide Predict Pre   |  |                          |                  |                   |              |
| Solid Collipsition Collips   |  |                          | G (D):           |                   |              |
| Bryan       TX 77805-573         Wide, Huy (797)774-3955       EMBRESS         Marker Dar 7788       Jam cose:         Jam cose:       Jam cose:         Jam cose:       Jam cose:         Jam cose:       Jam cose:         Southwest Crossing Townhome Association       coi: Beal Properties         3363 University Dr E Ste 215       EMPRATION DATE         Bryan       TX 77802-         PROPERTY INFORMATION       Constructs and Linguescience Date:         LOAN NUMBER       OV/15/2024         Jon With Station TX 77840       Difference Date:         Construction Stationers & 600-606 Crosstimbers       Control of Properties         College Station, TX 77840       THE POLICY PERIOD INDICATED.         Coverade: PREMARCE UNSERVENCE of PROPERTY INCOMENCE MAY De ESCHED DATE OF NEW CONTRACT CR OTHER DOCUMENT WITH RESPECT TO WHICH THIS SUBJECT TO ALL UNITS SHOWN MAY INVECE DESCRIPTION DATE THE POLICY PERIOD INDICATED.         Coverade: PREMARCE of PROPERTY INCOMENCE MAY DE SCHED CONTRONO OF SCHED POLICIES OF INSURANCE MAY DE SCHED OF NEW PERIOD INDICATED.         Coverade: PREMARCE of PROPERTY INCOMENCE SCHED POLICIES BECOMELAR APERICAN, THE INSURANCE AFFORED BY THE POLICY PERIOD INDICATED.         Coverade: PREMARCE of PROPERTY INDICATED BECOME HAVE DESCRIPTION POLICIES.         Station TX 77840         Coverade: PREMARCE ORDIFICIES BE CACHELED BEFORE THE EXPRANTION DATE THEREOF. THE ISS   | 3840 Corporate Center Dr   |                          |                  |                   | D            |
| code         sub code           NBURGED T7883         Image: code image   |  | Certain Underwriter      | s at Lloyds-AEG  | IS (wind Deduct I | Suy Down)    |
| code         sub code           NBURGED T7883         Image: code image   | FAX<br>(A/C, NO): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |                          |                  |                   |              |
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| Solumest Clossing 100/III/0016 Association       EFFERTME DATE       CONTINUED VITL       CONTINUE   |  | LOAN NUMBER              |                  | POLICY NUMBER     |              |
| c/c) Beal Properties  | Southwast Crossing Townhome Association  | 0097048128               |                  | STCP0001860-02    | 2            |
| 3363 University Dr E Ste 215     0//15/2023     0//15/2024     TERMINIED F CHECKED       Bryan     TX 77802-     THE REFLACES PROREVOENCE DATES:     THE REFLACES PROREVOENCE DATES:       PROPERTY INFORMATION     2500-2537 Crossitilines & 600-606 Crossitilinbers     College Station, TX 77840       THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED.     NOTIVITIESTANDING AMY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCEO BY THE POLICY DESCRIBED HEREIN IS USED OF MAY PERTIAN. THE INSURACE A FROMEWORK OF APROBED BY THE POLICY DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCEO BY THE POLICY DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCEO BY THE POLICY BESCRIBED PROFERENTIAL SHOWN MAY HAVE BEEN REDUCEO BY THE POLICY BESCRIBED FOR THE SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCEO BY THE POLICY BESCRIBED FOR THE END TO WHICH THIS SHOWN MAY HAVE BEEN REDUCED BY THE POLICY BESCRIBED FOR THE SUBJECT MANY OF THE MANY OF THE MEDICAL BUY DOWN INVERSION WIND/Hail deduct. 40wn to 256           REMARKS (Including Special Conditions)         EXPERIENT TO THE ADDYNE MORTOR TO MAIL THEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION           REMARKS (Including Special Conditions)         EXPERIENT THE RESUMENT RESONANCE AT THE RESUMENT THE SUBJECH MAILE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPERATION DATE THEREOF. THE BOUND INSURGED WILL ENDEAVOR TO M  |  | EFFECTIVE DATE           | EXPIRATION DATE  |                   | INTI         |
| Bryan       TX 77802-         PROPERTY INFORMATION         LOCATIONAL EXPERTY INFORMATION         2500-2537 Crosstimbers & 600-606 Crosstimbers         College Station, TX 77840             THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED.    The POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ABOVE FOR THE POLICY PERIOD INDICATED.    The POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ABOVE FOR THE POLICY PERIOD INDICATED.    The POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED OT THE INSURANCE AFORDED BY THE POLICIES DESCRIBED HEREN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITION OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD CLAMS. COVERAGE INFORMATION COVERAGE INFORMENTION OF INFORMATION INFORMATION ON THE THEREOF, THE INSUMG INSU  |  | 07/15/2023               | 07/15/2024       |                   |              |
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| EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.<br>COVERAGE INFORMATION<br>COVERAGE INFORMATION<br>COVERAGE INFORMATION<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail deduct.**<br>*Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%<br>RE: Cynthia & Michael Grayson<br>2534 Cross Timber Dr<br>College Station TX 77840<br>COLLEGE BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO<br>MALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>ALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL INSURED<br>LOONE AVEC<br>LOONE AVEC<br>LOONE AVEC<br>DOWN THE ADDRESS<br>State Farm Bank, FSB<br>ISAOA / ATIMA<br>C/O Central Loan Administration & REPORTING<br>PO Box 202028<br>Florence SC 29  |  |                          |                  |                   |              |
| SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.         COVERAGE INFORMATION         COVERAGE INFORMATION         COVERAGE INFORMATION         COVERAGE INFORMATION         COVERAGE INFORMATION         COVERAGE INFORMATION         Buildings; Replacement Cost; Special Form; 5% Wind/Hail deduct.**         **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%         REMARKS (Including Special Conditions)         RE: Cynthia & Michael Grayson         2534 Cross Timber Dr         College Station TX 77840         CANCELLATION         SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MALL DAY WRITTEN NOTICE 5 BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MALL DAYS WRITTEN NOTICE 5 BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MALL DAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LARGE INTERVEL         ADITIONAL INTEREST         ADITIONAL INTEREST         X MORTGAGEE         ADITIONAL INTEREST         X MORTGAGEE         State   |  |                          |                  |                   |              |
| COVERAGE INFORMATION         COVERAGE / PERUS / FORMS       AMOUNT OF INSURANCE       DEDUCTBLE         Buildings; Replacement Cost; Special Form; 5% Wind/Hail deduct.**       2,972,156       5,000         **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%       2,972,156       5,000         REMARKS (Including Special Conditions)       RE: Cynthia & Michael Grayson       2534 Cross Timber Dr       College Station TX 77840         SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO         MAILDATY NAND UPON THE NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL INPOSE NO OBLIGATION       AI 013817         ADDITIONAL INTEREST         NAME AND ADDRESS       State Farm Bank, FSB       ISAOA / ATIMA       ADDITIONAL INTEREST       AI 013817         NAME AND ADDRESS       State Farm Bank, FSB       ISAOA / ATIMA       ADDITIONAL INSURED       ADDITIONAL INSURED         ISAOA / ATIMA       C/O Central Loan Administration & Reporting       Yoon7048128       ADUTIONAL INSURED       ADUTIONAL INSURED         INFREDE       State Farm Bank, FSB       ISAOA / ATIMA       C/O 29502-2028       ATIMARZED REPRESENTATIVE       CONA #  |  |                          |                  |                   |              |
| AMOUNT OF INSURANCE       DEDUCTIBLE         Buildings; Replacement Cost; Special Form; 5% Wind/Hail deduct.**       2,972,156       5,000         **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%       2,972,156       5,000         **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%       2,972,156       5,000         REMARKS (Including Special Conditions)   |  |                          |                  |                   | I            |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail deduct.**         **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%         **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%         State Conditions)         REE: Cynthia & Michael Grayson         2534 Cross Timber Dr         College Station TX 77840         Should Davy OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL         ON College Station TX 77840         CANCELLATION         Should Davy OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL         ON College Station TX 77840         CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL DAVY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL DAVY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO ON ILLIBILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.         ADDITIONAL INTEREST         MEL AND ADDRESS         State Farm Bank, FSB         ISAOA / ATIMA         COOR 202028         Florence       SC 29502-2028   |  |                          |                  |                   |              |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2%   |  | 1ct **                   | AMO              |                   |              |
| REMARKS (Including Special Conditions)         RE: Cynthia & Michael Grayson<br>2534 Cross Timber Dr<br>College Station TX 77840         CANCELLATION         SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO<br>MAIL         DAYS WRITERN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.         ADDITIONAL INTEREST         NAME AND ADDRESS         State Farm Bank, FSB<br>ISAOA / ATIMA<br>C/O Central Loan Administration & Reporting<br>PO Box 202028<br>Florence       X       MORTGAGEE<br>IOON #       IOO97048128<br>AUTHORIZED REPRESENTATIVE         ADDITIONAL INSURED   |  |                          |                  | 2,972,150         | 5,000        |
| RE: Cynthia & Michael Grayson<br>2534 Cross Timber Dr<br>College Station TX 77840<br>CANCELLATION<br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.<br>ADDITIONAL INTEREST ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.<br>ADDITIONAL INTEREST ALL INSURED<br>ISAOA / ATIMA<br>C/O Central Loan Administration & Reporting<br>PO Box 202028<br>Florence SC 29502-2028<br>Value ADDITIONAL INSURED<br>LOAN #<br>0097048128<br>AUTHORIZED REPRESENTATIVE<br>COMPANY ADDITIONAL INSURED<br>COMPANY ADDITIONAL INSURATIN | w mu Deduct. Buy Down lowers w mu/han deduct. down to 2  | ,70                      |                  |                   |              |
| RE: Cynthia & Michael Grayson<br>2534 Cross Timber Dr<br>College Station TX 77840<br>CANCELLATION<br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.<br>ADDITIONAL INTEREST ADDITIONAL INTEREST NAMED BELOW, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.<br>ADDITIONAL INTEREST ALL INSURED<br>ISAOA / ATIMA<br>C/O Central Loan Administration & Reporting<br>PO Box 202028<br>Florence SC 29502-2028<br>Value ADDITIONAL INSURED<br>LOAN #<br>0097048128<br>AUTHORIZED REPRESENTATIVE<br>COMPANY ADDITIONAL INSURED<br>COMPANY ADDITIONAL INSURATIN |  |                          |                  |                   |              |
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| OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.         AI 013817         AI 013817         AI 013817         NAME AND ADDRESS         State Farm Bank, FSB         ISAOA / ATIMA         C/O Central Loan Administration & Reporting         PO Box 202028         Florence       SC 29502-2028         AUTHORIZED REPRESENTATIVE  |  |                          |                  |                   |              |
| ADDITIONAL INTEREST AI 013817          NAME AND ADDRESS       X       MORTGAGEE       ADDITIONAL INSURED         State Farm Bank, FSB       ISAOA / ATIMA       LOSS PAYEE       ISAOA         C/O Central Loan Administration & Reporting       D097048128       AUTHORIZED REPRESENTATIVE         Florence       SC 29502-2028       AUTHORIZED REPRESENTATIVE       Comparison of the second  |  |                          | MAIL SUCH NUTICE | SHALL IMPOSE NO O | BLIGATION    |
| NAME AND ADDRESS       X       MORTGAGEE       ADDITIONAL INSURED         State Farm Bank, FSB       ISAOA / ATIMA       IOSS PAYEE       IOSS PAYEE       IOSS PAYEE         LOAN #       0097048128       IOUTIONAL INSURED       IOSS PAYEE       IOSS PAYEE       IOSS PAYEE         PO Box 202028       Florence       SC 29502-2028       INTHORIZED REPRESENTATIVE       INTHORIZED REPRESENTATIVE   |  |                          |                  |                   | AI 013817    |
| State Farm Bank, FSB       LOSS PAYEE         ISAOA / ATIMA       LOAN #         C/O Central Loan Administration & Reporting       0097048128         PO Box 202028       AUTHORIZED REPRESENTATIVE         Florence       SC 29502-2028  |  | X MORTGAGEE              | ADDITIONAL INSUR | ED                |              |
| ISAOA / ATIMA<br>C/O Central Loan Administration & Reporting<br>PO Box 202028<br>Florence SC 29502-2028<br>COAN #<br>0097048128<br>AUTHORIZED REPRESENTATIVE<br>Recomptone  | State Farm Rank FSR  |                          |                  |                   |              |
| C/O Central Loan Administration & Reporting<br>PO Box 202028<br>Florence SC 29502-2028 C 29502-2028 C 29502-2028  |  |                          |                  |                   |              |
| PO Box 202028<br>Florence SC 29502-2028   |  |                          |                  |                   |              |
| Florence SC 29502-2028 Radnay Hunt  |  |                          | VE               |                   |              |
| <u> </u>  |  |                          | Roa              | non phase         | <del>x</del> |
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| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW.  |   |   |  |
|---|---|---|--|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900   | COMPANY   |   |  |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr<br>Bryan TX 77805-5753   | Safepoint Insurance Company (Primary Property)<br>Certain Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down) |   |  |
| FAX<br>(A/C, No):       (979)774-3955       E-MAIL<br>ADDRESS: taylor@serviceingroup.com         code:       sub code:         AGENCY<br>CUSTOMER ID #:       7788  | -   |   |  |
| INSURED   | LOAN NUMBER   | POLICY NUMBER   |  |
| Southwest Crossing Townhome Association   |   | STCP0001860-02  |  |
| c/o Beal Properties   | EFFECTIVE DATE EXPIRATION   |   |  |
| 3363 University Dr E Ste 215  | 07/15/2023 07/15/20   |   |  |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVIDENCE DATED:   |   |  |
| PROPERTY INFORMATION  |   |   |  |
| LOCATION/DESCRIPTION  |   |   |  |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840  |   |   |  |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN,<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F | NY CONTRACT OR OTHER DOCUME<br>THE INSURANCE AFFORDED BY THE  | NT WITH RESPECT TO WHICH THIS<br>POLICIES DESCRIBED HEREIN IS |  |
| COVERAGE INFORMATION  |   |   |  |
| COVERAGE / PERILS / FORMS   |   | AMOUNT OF INSURANCE DEDUCTIBLE                                |  |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  |   | 2,972,156 5,000   |  |
|   |   |   |  |
|   |   |   |  |
| REMARKS (Including Special Conditions)  |   |   |  |
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|   |   |   |  |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TH<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTAT   | BELOW, BUT FAILURE TO MAIL SUCH NO  |   |  |
| ADDITIONAL INTEREST   |   | AI 013834   |  |
| NAME AND ADDRESS  | MORTGAGEE ADDITIONAL  |   |  |
| Sample Certificate Only   | LOSS PAYEE  |   |  |
| Contact Insurance Agency for Detailed Certificate   | LOAN #  |   |  |
| Ofc # (979) 774-3900<br>Fax # (979) 774 3955  |   |   |  |
| Fax # (979) 774-3955  | AUTHORIZED REPRESENTATIVE   | tring plant   |  |
| -   |   | Deres remain  |  |
| ACORD 27 (2006/07) Fax: (979)774-3955   | © ACORD CORPORAT  | <br>TION 1993-2006. All rights reserved.                      |  |



| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW.   |   |  |  |  |  |
|--|---|--|--|--|--|
| AGENCY PHONE<br>(A/C, No, Ext): (979)774-3900  | COMPANY   |  |  |  |  |
| Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr<br>Bryan TX 77805-5753  | Safepoint Insurance Company (P<br>Certain Underwriters at Lloyds-A) |  |  |  |  |
| FAX<br>(A/C, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |   |  |  |  |  |
| CODE: SUB CODE:  | -   |  |  |  |  |
| AGENCY<br>CUSTOMER ID #: 7788  | _   |  |  |  |  |
| CUSTOMER ID #: 7700<br>INSURED   |   | POLICY NUMBER  |  |  |  |
|  |   | STCP0001860-02   |  |  |  |
| Southwest Crossing Townhome Association  | EFFECTIVE DATE EXPIRATION D   |  |  |  |  |
| c/o Beal Properties  | 07/15/2023 07/15/2024   | CONTINUED UNTIL  |  |  |  |
| 3363 University Dr E Ste 215   | THIS REPLACES PRIOR EVIDENCE DATED:                                 |  |  |  |  |
| Bryan TX 77802-  | THIS REPEACES FRIOR EVIDENCE DATED.                                 |  |  |  |  |
| PROPERTY INFORMATION   |   |  |  |  |  |
|  |   |  |  |  |  |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840   |   |  |  |  |  |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F | NY CONTRACT OR OTHER DOCUMEN<br>, THE INSURANCE AFFORDED BY THE P   | T WITH RESPECT TO WHICH THIS OLICIES DESCRIBED HEREIN IS |  |  |  |
| COVERAGE INFORMATION   |   |  |  |  |  |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  | uct.**  | AMOUNT OF INSURANCE DEDUCTIBLE<br>2,972,156 5,000        |  |  |  |
| REMARKS (Including Special Conditions)   |   |  |  |  |  |
|  |   |  |  |  |  |
| CANCELLATION   |   |  |  |  |  |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TH<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTAT  | BELOW, BUT FAILURE TO MAIL SUCH NOT                                 |  |  |  |  |
| ADDITIONAL INTEREST  |   | AI 014413  |  |  |  |
| NAME AND ADDRESS   | MORTGAGEE ADDITIONAL INS  |  |  |  |  |
| Quicken Loans<br>PO Box 6577   | LOAN #  |  |  |  |  |
| Carol Stream IL 60197-   | AUTHORIZED REPRESENTATIVE   |  |  |  |  |
|  |   | ener Hant  |  |  |  |
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|   | RTY INSURANCE IS ISSUED AS A MAT<br>D BELOW. THIS EVIDENCE OF PROPER<br>BELOW.  |   |                                     |                                     |                                       |
|---|---|---|-------------------------------------|-------------------------------------|---------------------------------------|
| AGENCY PHO<br>(ACC<br>Service Insurance Group, I<br>PO Box 5753<br>3840 Corporate Center Dr | NE No, Ext):(979)774-3900<br>nc.  | Company<br>Safepoint Insurance<br>Certain Underwriter | e Company (Prin<br>rs at Llovds-AEG | nary Property)<br>IS (Wind Deduct   | Buy Down)                             |
| Bryan<br>FAX<br>(A/C, No): (979)774-3955<br>CODE:<br>AGENCY<br>CUSTOMER ID #: 7788          | TX 77805-5753<br>ss: taylor@serviceingroup.com<br>sub code:   | _   | 5                                   |                                     | , , , , , , , , , , , , , , , , , , , |
| INSURED   |   | LOAN NUMBER   |                                     | POLICY NUMBER                       |                                       |
| Southwest Crossing Town   | home Association  | 8001329096<br>EFFECTIVE DATE                          | EXPIRATION DATE                     | STCP0001860-0                       | )2                                    |
| c/o Beal Properties   | 21.5  | 07/15/2023  | 07/15/2024                          |                                     | UNTIL<br>D IF CHECKED                 |
| 3363 University Dr E Ste 2<br>Bryan   | TX 77802-   | THIS REPLACES PRIOR EVID                              |                                     |                                     |                                       |
| Diyan   | 14 //002-   |   |                                     |                                     |                                       |
| PROPERTY INFORMATION  |   |   |                                     |                                     |                                       |
| 2500-2537 Crosstimbers &<br>College Station, TX 77840                                       | 600-606 Crosstimbers  |   |                                     |                                     |                                       |
| NOTWITHSTANDING ANY REC<br>EVIDENCE OF PROPERTY INSU  | E LISTED BELOW HAVE BEEN ISSUED<br>QUIREMENT, TERM OR CONDITION OF A<br>RANCE MAY BE ISSUED OR MAY PERTAIL<br>EXCLUSIONS AND CONDITIONS OF SUCH | ANY CONTRACT OR OTH<br>N, THE INSURANCE AFFO          | IER DOCUMENT W                      | /ITH RESPECT TO<br>CIES DESCRIBED F | WHICH THIS<br>IEREIN IS               |
| COVERAGE INFORMATION  |   |   |                                     |                                     |                                       |
|   | coverage / PERILS / FORMS<br>ost; Special Form; 5% Wind/Hail ded<br>n lowers Wind/Hail deduct. down to  |   | АМО                                 | UNT OF INSURANCE<br>2,972,156       | deductible<br>5,000                   |
| REMARKS (Including Special C  |   |   |                                     |                                     |                                       |
| RE: Carrie Smith - Loan #8<br>2521 Crosstimbers, College                                    |   |   |                                     |                                     |                                       |
| CANCELLATION  |   |   |                                     |                                     |                                       |
| MAILDAYS WRITTEN NO   | CRIBED POLICIES BE CANCELLED BEFORE T<br>DTICE TO THE ADDITIONAL INTEREST NAME<br>THE INSURER, ITS AGENTS OR REPRESENTA                         | D BELOW, BUT FAILURE TO                               |                                     |                                     |                                       |
| ADDITIONAL INTEREST   |   |   |                                     |                                     | AI 015771                             |
| NAME AND ADDRESS  |   | MORTGAGEE   | ADDITIONAL INSURI                   | ED                                  |                                       |
| PNC Bank  |   | LOSS PAYEE  |                                     |                                     |                                       |
| ISAOA   |   | LOAN #<br>8001329096                                  |                                     |                                     |                                       |
| PO Box 7433   |   | AUTHORIZED REPRESENTATI                               | VE                                  |                                     |                                       |
| Springfield   | OH 45501-   |   | Ræ                                  | may the                             | ~~<br>                                |
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| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERTY<br>AFFORDED BY THE POLICIES BELOW. |                           |                  |                   |                |
|--|---------------------------|------------------|-------------------|----------------|
| AGENCY PHONE (979)774-3900   | COMPANY                   |                  |                   |                |
| Service Insurance Group, Inc.  |                           |                  |                   |                |
| PO Box 5753  |                           |                  |                   |                |
| 3840 Corporate Center Dr   | Safepoint Insurance       |                  |                   |                |
| Bryan TX 77805-5753  | Certain Underwriter       | s at Lloyds-AEC  | BIS (Wind Deduc   | t Buy Down)    |
| FAX<br>(AIC, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |                           |                  |                   |                |
| CODE: SUB CODE:  |                           |                  |                   |                |
| AGENCY<br>CUSTOMER ID #: 7788  |                           |                  |                   |                |
| INSURED  | LOAN NUMBER               |                  | POLICY NUMBER     |                |
| Southwest Crossing Townhome Association  | 0123028599                |                  | STCP0001860       | -02            |
| c/o Beal Properties  | EFFECTIVE DATE            | EXPIRATION DATE  |                   | D UNTIL        |
| 3363 University Dr E Ste 215   | 07/15/2023                | 07/15/2024       | TERMINAT          | ED IF CHECKED  |
| Bryan TX 77802-  | THIS REPLACES PRIOR EVIDE | INCE DATED:      |                   |                |
|  |                           |                  |                   | ]              |
| PROPERTY INFORMATION   |                           |                  |                   | ]              |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers  |                           |                  |                   |                |
| College Station, TX 77840  |                           |                  |                   |                |
| Conce Station, 1X //040  |                           |                  |                   |                |
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|  |                           |                  |                   |                |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO   | THE INSURED NAMED         | ABOVE FOR TH     | E POLICY PERIO    | DINDICATED.    |
| NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF AN   | IY CONTRACT OR OTH        | ER DOCUMENT V    | VITH RESPECT TO   | WHICH THIS     |
| EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN,<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH P                            |                           |                  |                   |                |
|  | ULIUIES. LIIVIIIS SHUWI   |                  | N REDUCED BY PA   | ID GLAIIVIƏ.   |
| COVERAGE INFORMATION   |                           | 1                |                   |                |
| COVERAGE / PERILS / FORMS  |                           | AMO              | OUNT OF INSURANCE | DEDUCTIBLE     |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail dedu   |                           |                  | 2,972,156         | 5,000          |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2   | 70                        |                  |                   |                |
|  |                           |                  |                   |                |
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| REMARKS (Including Special Conditions)   |                           |                  |                   | ]              |
| RE: Les McCoy  |                           |                  |                   |                |
| 2522 Crosstimbers  |                           |                  |                   |                |
| College Station TX 77840   |                           |                  |                   |                |
|  |                           |                  |                   |                |
|  |                           |                  |                   |                |
|  |                           |                  |                   |                |
| CANCELLATION   |                           |                  |                   |                |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO                         |                           |                  |                   |                |
| MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED   |                           |                  |                   |                |
| OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATI  | IVES.                     |                  |                   |                |
| ADDITIONAL INTEREST  |                           |                  |                   | AI 017011      |
| NAME AND ADDRESS<br>AMERIHOME MORTGAGE COMPANY, LLC  | MORTGAGEE                 | ADDITIONAL INSUF | RED               |                |
| ΙΣΑΟΑ ΑΤΙΜΑ  | LOSS PAYEE                |                  |                   |                |
| A DELAWADE LIMITED LIADILITY COMDANIX  | LOAN #                    |                  |                   |                |
| C/O CENTRAL LOAN ADMIN & REPORTING   | 0123028599                |                  |                   |                |
| PO BOX 202028  | AUTHORIZED REPRESENTATIV  |                  | -11               |                |
| FLORENCE SC 29502-2028   |                           | هماک             | may the           | set.           |
|  |                           |                  | ر                 |                |
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|--|--|-----------------------------------|-------------------------------|-------------------------|
| AGENCYPHONE<br>(A/C, No, Ext): (979)774-3900Service Insurance Group, Inc.<br>PO Box 5753<br>3840 Corporate Center Dr<br>BryanTX 77805-5753FAX<br>(A/C, No): (979)774-3955E-MAIL<br>ADDRESS: taylor@serviceingroup.com                              | COMPANY<br>Safepoint Insurance Company (Primary Property)<br>Certain Underwriters at Lloyds-AEGIS (Wind Deduct Buy Down) |                                   |                               |                         |
| CODE: SUB CODE:  |  |                                   |                               |                         |
| AGENCY<br>CUSTOMER ID #: 7788  |  |                                   |                               |                         |
| INSURED  | LOAN NUMBER  |                                   | POLICY NUMBER                 |                         |
| Southwest Crossing Townhome Association  |  |                                   | STCP0001860-0                 | 02                      |
| c/o Beal Properties  | EFFECTIVE DATE   | EXPIRATION DATE                   | CONTINUED                     |                         |
| 3363 University Dr E Ste 215   | 07/15/2023   | 07/15/2024                        | TERMINATE                     | D IF CHECKED            |
| Bryan TX 77802-  | THIS REPLACES PRIOR EVIDE  | INCE DATED:                       |                               |                         |
|  |  |                                   |                               | ]                       |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers<br>College Station, TX 77840   |  |                                   |                               |                         |
| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T<br>NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN<br>SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH | NY CONTRACT OR OTH<br>I, THE INSURANCE AFFOR   | ER DOCUMENT W<br>RDED BY THE POLI | ITH RESPECT TO                | WHICH THIS<br>IEREIN IS |
| COVERAGE INFORMATION   |  | 1                                 |                               |                         |
| COVERAGE / PERILS / FORMS<br>Buildings; Replacement Cost; Special Form; 5% Wind/Hail ded<br>**Wind Deduct. Buy Down lowers Wind/Hail deduct. down to   |  | AMO                               | unt of insurance<br>2,972,156 | deductible<br>5,000     |
| REMARKS (Including Special Conditions)   |  |                                   |                               |                         |
|  |  |                                   |                               |                         |
| CANCELLATION   |  |                                   |                               |                         |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE T<br>MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTA  | BELOW, BUT FAILURE TO  |                                   |                               |                         |
| ADDITIONAL INTEREST  |  |                                   |                               | AI 018443               |
| NAME AND ADDRESS   | MORTGAGEE  | ADDITIONAL INSURI                 | ED                            |                         |
| The Wood Group of Fairway<br>Independent Mortgage Corporation  | LOSS PAYEE   |                                   |                               |                         |
| 3091 University Dr East, Unit 120  |  | /E                                |                               |                         |
| Bryan TX 77802-  | AUTHORIZED REPRESENTATIV   | Rae                               | may the                       | Tra                     |
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| THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATT<br>ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE OF PROPERT<br>AFFORDED BY THE POLICIES BELOW. |  |  |
|---|--|--|
| AGENCY PHONE<br>(A/C, No, Ext):(979)774-3900  | COMPANY                                |  |
| Service Insurance Group, Inc.   |  |  |
| PO Box 5753<br>3840 Corporate Center Dr   | Safepoint Insurance Company (Pr        | rimary Property)                         |
| Bryan TX 77805-5753   | Certain Underwriters at Lloyds-AE      | EGIS (Wind Deduct Buy Down)              |
| FAX<br>(AC, No): (979)774-3955 E-MAIL<br>ADDRESS: taylor@serviceingroup.com   |  |  |
| CODE: SUB CODE:   |  |  |
| AGENCY<br>CUSTOMER ID #: 7788   |  |  |
| INSURED   | LOAN NUMBER                            |  |
| Southwest Crossing Townhome Association   | EFFECTIVE DATE EXPIRATION DA           | STCP0001860-02                           |
| c/o Beal Properties<br>3363 University Dr E Ste 215   | 07/15/2023 07/15/2024                  | CONTINUED UNTIL<br>TERMINATED IF CHECKED |
| Bryan TX 77802-   | THIS REPLACES PRIOR EVIDENCE DATED:    |  |
|   |  |  |
|   |  | ]  |
| 2500-2537 Crosstimbers & 600-606 Crosstimbers   |  |  |
| College Station, TX 77840   |  |  |
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| THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED T   | O THE INSURED NAMED ABOVE FOR T        | THE POLICY PERIOD INDICATED.             |
| NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF A<br>EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN                                  |  |  |
| SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH F   |  |  |
| COVERAGE INFORMATION  |  |  |
| COVERAGE / PERILS / FORMS   |  | MOUNT OF INSURANCE DEDUCTIBLE            |
| Buildings; Replacement Cost; Special Form; 5% Wind/Hail ded   |  | 2,972,156 5,000                          |
| **Wind Deduct. Buy Down lowers Wind/Hail deduct. down to 2  | 2%                                     |  |
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| DEMARKS (Including Special Conditions)  |  |  |
| REMARKS (Including Special Conditions)<br>RE: Karl Haake - Loan #1104974168   |  |  |
| 2518 Crosstimbers   |  |  |
| College Station TX 77840  |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
| CANCELLATION  |  |  |
| SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE TH   | HE EXPIRATION DATE THEREOF, THE ISSUIN | IG INSURER WILL ENDEAVOR TO              |
| MAILDAYS WRITTEN NOTICE TO THE ADDITIONAL INTEREST NAMED<br>OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTA                         |  | CE SHALL IMPOSE NO OBLIGATION            |
| ADDITIONAL INTEREST   |  | AI 019952                                |
| NAME AND ADDRESS  | MORTGAGEE ADDITIONAL INS               |  |
| Better Mortgage Corporation   | LOSS PAYEE                             |  |
| C/O The Money Source ISAOA/ATIMA  | LOAN #                                 |  |
| PO Box 1194   |  |  |
| Springfield OH 45501-1194   |  | ener Hairt                               |
|   |  | <u>)</u>                                 |
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