

EVENT PERMIT



Ordinance 17-08

HOT WORKS ESTERO FINE ART SHOW

PERMIT NUMBER: TMP2021-00073

Date(s) of Event: OCTOBER 23, 2021 AND OCTOBER 24, 2021 FROM

10:00AM UNTIL 5:00PM

Property Owner:

NESV FLORIDA REAL ESTATE LLC

Applicant:

PATTY NAROZNY

941-755-3088

Description:

JURIED FINE ART AND CRAFT SHOW ON OCTOBER 23, 2021 AND OCTOBER

24, 2021 FROM 10:00AM UNTIL 5:00PM

Location of event: 11400 FENWAY SOUTH DR, FORT MYERS, FL 33913

JETBLUE PARK

Will the event be attended by 1000 or more people? Yes

Will the event be held on County Owned Property? No

Will there be alcohol consumed or sold at the event? No

Will a bond be posted for this event? No

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners Lee County, Florida

ftmpprmt specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

HOT WORKS ESTERO FINE ART SHOW

TMP 2021-00073



Event Application

Check the appropriate box(es) below:

- ▼ SPECIAL EVENT PERMIT
- USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)			
Title of Event / Name of Production	Hot Works Estero Fine Art Show			
Date(s) of Event / Production:	October 23 & 24, 2021			
Location(s) of Event:	Outdoors at JetBlue Park, 11500 Fenway South, Fort Myers, FL 33913			
Name of Applicant:	Patty Narozny, Hot Works Fine Art & Fine Craft Shows			
Applicant Address:	PO Box 1425 Sarasota, FL 34230			
Applicant Phone Number:	941-755-3088			
Contact Person: (If different from applicant)	Same			
Contact Phone Number: (If different from applicant)	Same			
Email Address:	patty@hotworks.org			
Estimated Attendance:	1,500 total both days (750 each day)			
Event Description: Include each activity, when activities take place, etc.	High quality, juried fine art and fine craft show with focus on visual arts, cultural diversity, community enrichment and fostering art education among youth			
Hours of Operation:	Saturday & Sunday, 10am-5pm daily			
STRAP # of Parcel:	24-45-25-02-00001.0000 thru 24-45-25-02-00005.0000; see attached letter			
Owner of Premises*:	Boston Red Sox/New Englad Sports LLC, 11500 Fenway Dr, Fort Myers, FL 33913			

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



What is the Zoning Classification of the	premises? Public Park / Co	ommercial Use		
Are any temporary structures to be installed for the event? X Yes No Type: 10'x10' Tents				
Do you have the appropriate permits fo	or the temporary structures?	Yes 🔀 No		
* For a 'Special Event' and 'Use of Counidentified, including all parking areas.	ty Property' permit, submit a site plan wi	th all proposed facilities and activities		
Insurance Company Insuring the Event:	Evanston Insurance Co. See	e Attached Insurance Certs		
Note: Certificate of Insurance must be submitted	d at time of application			
Surety Company Bonding this Event (Na	ame and Address): n/a			
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?		
√ Yes No	▼ Yes ▼ No	├─ Yes		
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.		
Name & Address of Organization Providing Food:	To be determined close	er to the show dates		
Type of Food being Served: To be	e determined closer to t	he show dates		
Section II - USE OF COUNTY P	ROPERTY PERMIT			
Organization Sponsoring the Event:	lot Works, LLC Fine Art & Fine	e Craft Shows		
	Solicitation in the County Rights-of-Way	• 0.00		
Name of Charity: Institute for	the Arts & Education,	Inc.		
Address of Charity; PO Box 14	425, Sarasota, FL 3423	30		
Phone Number: 941-755-308	88	-		
Non-profit certificate/registration number: 26-3469925				
(Proof of registration with the Dept. of Agriculture & C	Consumer Services §496.405 or proof the organization is	exempt from this requirement. §316.2045)		
Section III - SALE/CONSUMPT	ION OF ALCHOLIC BEVERAGES P	ERMIT		
Is alcohol being sold/consumed on Cour	nty Property?	Yes No		
If Yes, then a "Lee County Alcohol Permit" is required.	Only non-profit organizations can sell alcohol on County	Property.		
Non-profit certificate/registration number: (Required if alcohol is to be <u>SOLD</u> at the event)				
Please note: A permit from the State of Florida I further details	Division of Alcoholic Beverages and Tobacco may a	also be required; please call (239) 344-0885 for		



pe of Production (choose all that	apply): \mathcal{N}/\mathcal{A}	+			
TV Movie or Special	TV Series / Pilot	Γ TV Cα	mmercial	Still Photo	os
Public Service Announcement	Industrial / Documenta	ry 🗀 Othe	r:	•	
ill any of the following be needed	or included*?	t			
Street Closure		Γ,	Yes _	No	
Traffic / Crowd Cont	rol	Г	Yes [No	
Fire or Burning		Г	Yes $ extstyle ag{}$	No	
Explosives or Pyrote	chnics	Г	Yes _	No	
Animals, Large or Sm	all	Г	Yes _	No	
Construction of Any	Kind	Γ.	Yes	No	
Large and/or Numer	ous Vehicles	Г	Yes _	No	
Helicopters, Boats, e	tc.	Γ,	Yes	No	
Stunts			Yes $ egin{picture}(1,0) \put(0,0){\line(0,0){10}} \put(0,$	No	
Other		Γ.	Yes	No	
Special Parking Requirements:			2		
					1
City or County Services Required	·/Porconnol aguinment for	ilitios ata\			
The following information is requ	lired for local and state reco	rds on producti	on in Florid	a to track the ec	onomic impact
the industry. If exact figures are	not available, please estimat	e as closely as p	oossible.		
Number in Cast:	Number in Crew:		Number of	flocals hired:	
Total budget:	Estimate amount	spent in Lee Cou	inty:		
Hotel room nights:	Number of shoot	ing days:	e l		
number of rooms x	number of nights				



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted premises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

P.NAROZNY, EXEC. DIR.

Print Name of Applicant and Title

4-29-2021

Date



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Check the appropriate box(es) below:

- F SPECIAL EVENT PERMIT
- ▼ USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Parking:	rking in authorized areas only.		
Deputies (How Many?):	None		
Fee for Services:	None		
Special Arrangements:	None		
	Print Name: Lt. S. Brady	HT	
	Signature: It. Steven J. Brady		
	Title: Special Events, Permits and Details		
	Date: 4-30-2/		
	Day of C	and Substitution with the Control Substitution Control Substitution (Control Substitution Control Substitution Con	



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form. Please see User's Guide for contact information and Fire District Map.

Check the appropriate	box(es) below:
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X	SPECIAL EVENT PERMIT
Γ	USE OF COUNTY PROPERTY PERMIT
Γ	FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)	N/A			*
Fee for Services:	N/A			
	1			
Flammable Vegetation:	N/A		8	
Circt Aid Carriage and				
First Aid Equipment:	Call 911 if needed			
	40			
Eiro Eytinguiching	A			
Fire Extinguishing:	Any food vendors m	ust have appropriate exting	guishers on site.	
	1	***************************************		
Special Arrangements:	Roadway through e	vent MUST remain clear of o	obstructions for EMS/FD access t	hroughout event.
	J			
	Daint N			
	Print Name:	Nate Burley		
	Signature:	Nate Burley	Digitally signed by Nate Burley Date: 2021,05.05 14:41:14 -04'00'	
	Title:	Division Chief - Fire & Life	Safety	
	Date:	05/05/2021		



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911

Check the appropri	iate box(es) belo	w:
SPECIAL EV	VENT PERMIT	• 9
USE OF CO	OUNTY PROPERTY F	PERMIT
FILM PERM	AIT	
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PL LICANT TO COMPLY	EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	Applicants shall follo concerning health a congregating at the	ow all CDC and FDOH directives, and the Florida Governor's Executive Orders nd safety, especially with regards to COVID-19 and the number of people event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To arrange special event coverage, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B, Higgins Strategies of the Control of the
	Title:	Division Chief
	Date:	May 06, 2021



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the appropri	ate box(es) be	low:		
SPECIAL EV	/ENT PERMIT			
USE OF CO	UNTY PROPERTY	PERMIT		
PERMIT TO	SELL AND CONS	UME ALCOHOLIC BE	VERAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM	/ IIT			
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, F LICANT TO COMF	PLEASE INDICATE BE PLY WITH FOR THEIR	LOW WHAT ARRANGEMENTS EVENT.	S YOUR ORGANIZATION
Parking:	Park in designated	areas. No event parking	permitted on Lee County maintain	ned road rights-of-way.
Ingress and Egress:	Use all established	means of ingress and e	gress.	
				•
Special Arrangements:	Use Lee County Sh	neriff's Office for assistan	ce with traffic control, as needed.	,
			*	
			W 40 - 20000 00	
	Print Name:	Bryan Miller		
	Signature:	Bryan Miller	Digitally signed by Bryan Miller Date: 2021.05.05 06:37:04 -04'00'	
	Title:	Senior Project Manager	r	
	Date:	May 5, 2021		



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS, FLORIDA 33916 (239) 533-7275

Check the appropriate	box(es)	below:
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HOLISH PERSON LINE WAS DE ALERS	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATI	
	LICANT TO COMPLY WITH FOR THEIR EVENT.	
Illuminations	All theminations must follow county ordinance and FAA regulations. Event organizer must provide the own temporary lighting as needed for safety during event set up and breakdown.	
Parking Areas:	Event organizer is responsible to direct patrons to the designated parking locations. Must work with site staff to ensure that vehicles do not block divieways and private roadways so emergency vehicle have clear access. Organizer must provide adequate staff/volunteers along with directional signage the event.	
Special Arrangements:	Event organizer is responsible to provide adequate staff/volunteers throughout the event for litter control and debris clean up during and after the event. Work with Red Sox staff and the on-site part staff to designate the debris/brash collection area during and after the event. Participants and spectators must disperse and leave the park area to seek safe shelter in their vehicle during lightning alens and threatening weather.	
	Signature: Alise Flanck Signature: Alise Flanck	
	Signature: Ahre Flanzick Title: Deputy Director	
	Hitti Deput north	



LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	te box(es) bel	ow:
SPECIAL EVE	NT PERMIT	
	NTY PROPERTY	PERMIT
		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT		
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pr	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.
Special Arrangements:	A Certificate of Ir Board of County additional insure	surance shall be submitted as evidence of the required coverage listing Lee County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an d.
	Subject to proof	of insurance.
	Print Name:	Mike Figueroa
	Signature:	Mike Frim-
	Title:	Risk Program Manager

April 30, 2021

Date:



LEE COUNTY VISITOR & CONVENTION BUREAU 2201 SECOND STREET, SUITE 600 FORT MYERS, FLORIDA 33901 (239) 338-3500



Check the appropriate box(es) below:

FILM PERMIT ONLY

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Special Arrangements:		
*1		
Other:		
*		
- 0 - 1		
ļ		
	Print Name:	
	Signature:	
	Title:	
	Date:	



Hot Works & Inst for the Arts & Education Estero 'Open Air' Fine Art Show[™] October 23 & 24, 2021

Outdoors at JetBlue Park, Fort Myers, FL COVID Safety Precautions





Hot Works goal is to put together safe, friendly, positive, community events with quality art – for everyone to enjoy. New COVID guidelines/risk reduction strategies include:

- The art show is held 100% outdoors; with very wide aisles for social distancing
- Always protect the vulnerable, including age 65+
- All booths minimum 6' apart
- All booths two or more sides open where possible to accommodate for air to flow through the tent
- Social (physical) distancing 6' from any other outside of your group we need help from artists and sponsors
 to help monitor this in a polite and courteous manner, please
- Face coverings recommended for everyone over age two, except those with medical conditions
- Main entrance(s) will have signage placed listing COVID guidelines
 - o Do not enter if you are sick
 - o Social Distance 6'
 - o Face coverings recommended (legally we cannot enforce)
 - Wash your hands
 - o Don't touch your face
- To comply with current COVID guidelines, all participants will be directed to seek safe shelter in their vehicles during threatening weather.
- Artist use pointers if possible. This will help with physical distancing we understand this is not possible for everyone therefore face coverings should be worn in doubt
- Plexi-glass between you and patron
- One family unit invited in the booth patrons please wait to be invited by the artist into his/her booth
- Jewelers and browse bins wiped after touch, or, before touching, ask every person to hand sanitize
- Every booth is responsible to bring his/her own hand sanitizer and have it displayed in his/her booth for people to see and use duration of the show
- · Hand sanitizer stations will be spread throughout the show
- Handwashing sinks will be located at:
 - o 1. Restaurants provided for restaurant/food vendors for use during the show
 - o 2. Porta johns Besides handwashing sinks here, disinfectant and paper towel will be placed nearby for everyone to wipe the handle before and after each use, please.
- Thought: Clear Shower Curtains hang in between
- Take advantage of non-contact purchasing by using a credit card or a cashless pay system
- Follow the one-way walking pay (no backtracking)
- Please leave pets at home
- Stay home if you are feeling ill
- Stay home if you have been exposed to or are experiencing symptoms related to COVID-19
- Stay home if you are awaiting a test or test results for COVID-19
- Stay home if you are under any quarantine due to local travel orders
- Stay home if you are vulnerable or uncomfortable

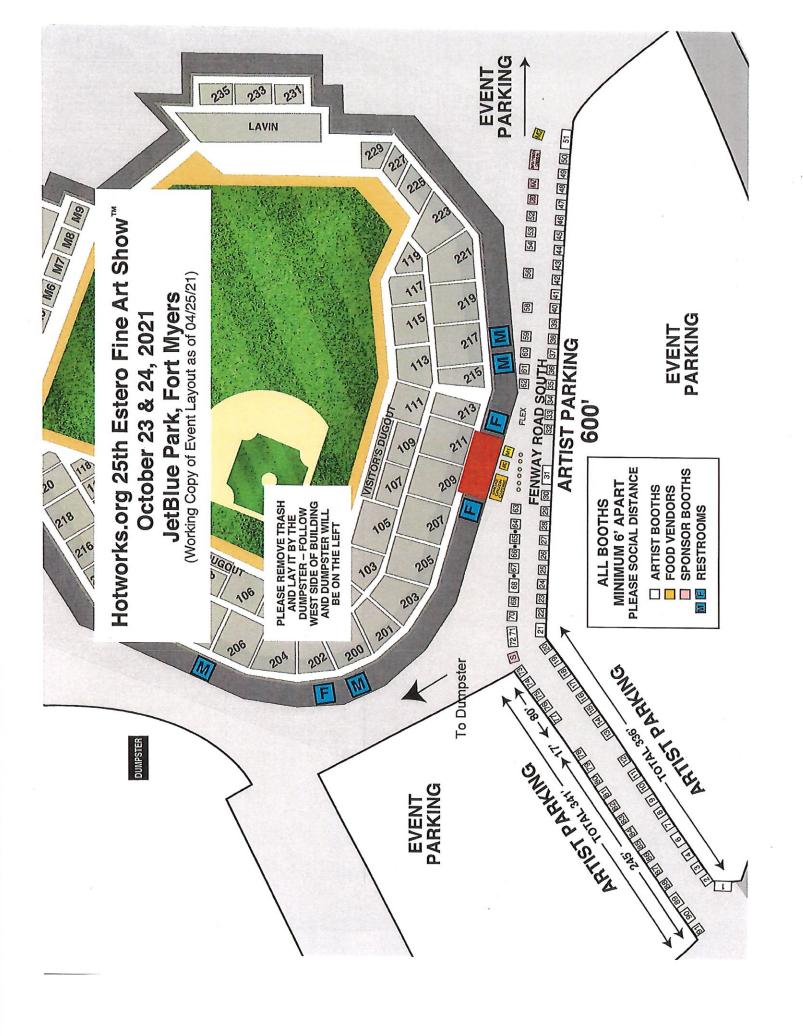
▲ COVID-19 Warning

We have taken enhanced health and safety measures—for you, our other Guests, and Event Participants. You must follow all posted instructions while visiting Hot Works shows.

An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. According to the <u>Centers for Disease Control and Prevention</u>, senior citizens and guests with underlying medical conditions are especially vulnerable. By visiting a Hot Works show, you voluntarily assume all risks related to exposure to COVID-19.

Help keep each other healthy. Please be kind, patient and remember to

6' social distance





CERTIFICATE OF LIABILITY INSURANCE

DATE (MIA/DD/YYYY) 04/22/2021

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

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

ADDRESS (ADDRESS ADDRESS) CA 95045 BASINERS (ADDRESS ADDRESS) CA 95045 BASINERS (ADDRESS ADDRESS) BASINERS (ADDRESS ADDRESS ADDRESS) BASINERS (ADDRESS ADDRESS	PRODUCER				CONTACT Will Maddux					
ODER 1289 CA 95945 PHOT Works, LLC Patricia Nanzory PO Box 1282 Sarasola CERTIFICATE ILLUMBER: PITHS IS TO CERTIFY THAT THE POLICIES OF INSURED THE STATE OF THE INSURED ABOVE FOR THE POLICY PERIOD INDICATES. NOWITHERANDING AWY REQUIREMENT, YEAR OF CONTINUOUS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REQUIRED TO THE INSURED ABOVE FOR THE POLICIES OF INSURANCE CONTINUOUS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REQUIRED ABOVE FOR THE POLICIES CONTINUOUS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REQUIRED ABOVE FOR THE POLICIES CONTINUOUS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REQUIRED ABOVE FOR THE POLICIES CONTINUOUS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REQUIRED ABOVE FOR THE POLICY PERIOD INDICATED. NO INTITUTE OF INSURANCE PROPERLY AND CAMBOO STATES OF THE INSURED ABOVE FOR THE POLICY PERIOD INDICATED. NO INTITUTE OF INSURANCE PROPERLY AND CAMBOO STATES OF THE INSURED ABOVE FOR THE POLICY PERIOD INDICATED. NO INTITUTE OF INSURANCE PROPERLY AND CAMBOO STATES OF THE INSURED ABOVE FOR THE POLICY PERIOD IN THE POLICY PERIOD IN THE POLICY PERIOD OF THE POLICY PERI	East Main Street Insurance Services, Inc.									
NSUMBER 2: NSUMBER 2: NSUMBER 3: NSUMBE	Wilf Maddux				E-MAIL ADDRESS Info@theeventhelper.com					
STRESS VERIFY CA. 95945 Hot Works, LLC Patricis Nanzory PO Box 1425 Sarasola FL. 34230 SARASOLA FL. 34230 FREWISION NUMBER: FREWISION	PO Box 1298									
Hot Works, LLC Patricia Nanzony PO Box 1425 Sarasola THIS IS TO CERTIFY THAT THE POLICIES OF RISURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD ROCKETCH AND BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE PINACT OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE TRING. OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. COMMENTAL BEEN ADDRESS OF RISURANCE AFFORDED BY THE PINACT OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. COMMENTAL BEEN ADDRESS OF RISURANCE AFFORDED BY THE CHARGE BY ADD CLAMS AND BY THE PINACT OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. COMMENTAL BEEN ADDRESS OF RISURANCE AFFORDED BY THE CHARGE BY ADD CLAMS AND BY THE PINACT OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. COMMENTAL BEEN ADDRESS OF RISURANCE AFFORDED BY THE CHARGE BY ADD CLAMS AND BY THE PINACT OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. COMMENTAL BEEN ADDRESS OF RISURANCE AFFORDED BY THE CHARGE BY ADD CLAMS AND BY THE PINACT OR OTHER BY THE PINACT	Grass Valley			CA 95945						
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Patricia Narcoray PO Box 1425 Sarsola ENUMERA: Source: Source	Hot Works, LLC									
PO BUS 1425 Seriesola CERTIFICATE N. MORRER: REVISION NUMBER: REVISION REREVISION NUMBER: REVISION NUMBER: REVISION NUMBER: REVISION N	Patricla Narozny									
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ACORD 25 (2016/03)

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EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Lee County Board of County Commissioners 5650 Enterprise Parkway Fort Myers, FL 33901

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule of this endorsement, but only with respect to liability for "bodily injury", "property damage" or "personal advertising injury" caused, in whole or in part, by the acts or omissions of any insured listed under Paragraph 1. or
 2. of Section II Who Is An Insured:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

MEGL 2217 01 19



1903 1912 1915 1916 1918 2004 2007 2013 2018

April 15, 2021

To Whom It May Concern:

The Boston Red Sox and NESV Florida Real Estate hereby grant Hot Works, LLC, with a mailing address of P.O. Box 79, Milford, Michigan, 48381 permission to host their Art Show, on the land owned by NESV Florida Real Estate and surrounding parking lots located at 11500 Fenway South Drive for the dates of October 23rd-24th, 2021, January 8th-9th, 2022, and January 29th-30th, 2022.

The parcels of land used for Hot Works, LLC have the following strap numbers:

- #24-45-25-02-00001.0000
- #24-45-25-02-00002.0000
- #24-45-25-02-00003.0000
- #24-45-25-02-00004.0000
- #24-45-25-02-00005.0000

Please let us know if there is any additional information needed.

Thank you.

Sincerely,

Brennan Whitley

NESV Florida Real Estate / Boston Red Sox

11500 Fenway South Drive

Fort Myers, FL 33913

Phone: (239) 226-4755

Email: bwhitley@redsox.com

AIMEE GARRIGUS
Notary Public - State of Florida
Commission # GG 366723
My Comm. Expires Aug 18, 2023

State of County of 221.

On this _____ day of _____ 20_21.

Description which were _____ to be the personally encounty of identification, which were _____ to be the person whose many is signed on the preceding or

NOTARY NAME HERE NOTARY PUBLIC 18 2023

attached document in my presence.

BOSTON RED SOX

JETBLUE PARK

11500 FENWAY SOUTH DRIVE

FORT MYERS, FL 33913



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/22/2021

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

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). PRODUCER CONTACT Will Maddux PHONE (A/C, No, Ext); (530) 477-6521 East Main Street Insurance Services, Inc. FAX (A/C, No): Will Maddux ADDRESS: info@theeventhelper.com PO Box 1298 INSURER(S) AFFORDING COVERAGE NAIC # Grass Valley CA 95945 INSURER A: Evansion Insurance Company 35378 INSURED INSURER B : Hot Works, LLC INSURER C: Patricia Narozny INSURER D : PO Box 1425 INSURER E Sarasota FL 34230 INSURER F: COVERAGES **CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR INSD WVD TYPE OF INSURANCE **POLICY NUMBER** LIMITS COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 1,000,000 s CLAIMS-MADE X OCCUR \$ 100,000 Host Liquor Liability \$ 5,000 MED EXP (Any one person) Retail Liquor Liability Υ 3DS5472-M2868983 10/08/2021 10/25/2021 s 1,000,000 PERSONAL & ADV INJURY GEN'L AGGREGATE LIMIT APPLIES PER: 12:01 AM 12:01 AM GENERAL AGGREGATE \$ 2,000,000 PRO-JECT POLICY PRODUCTS - COMP/OP AGG | \$ 1,000,000 OTHER: Deductible \$ 1,000 COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY \$ ANY AUTO BODILY INJURY (Per person) \$ OWNED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY BODILY INJURY (Per accident) s HIRED AUTOS ONLY PROPERTY DAMAGE (Per accident) \$ s UMBRELLA LIAB OCCUR **EACH OCCURRENCE** \$ **EXCESS LIAB** CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY STATUTE ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A OFFICENMEMBER EACLUSED; (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT | \$ DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder listed below is named as additional insured per attached MEGL 2217 01 19. Attendance: 1500, Event Type: Art Show. Event: Estero Fine Art Show Lee County Board of County Commissioners is listed as an additional insured with respect to general liability policy where required by written contract CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE ACCORDANCE WITH THE POLICY PROVISIONS. WILL BE DELIVERED IN Lee County Board of County Commissioners AUTHORIZED REPRESENTATIVE III Nadding 5650 Enterprise Parkway Fort Myers FL 33901

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EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Lee County Board of County Commissioners 5650 Enterprise Parkway Fort Myers, FL 33901

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule of this endorsement, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by the acts or omissions of any insured listed under Paragraph 1. or 2. of Section II Who Is An Insured:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

MEGL 2217 01 19



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/22/2021

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy certain policies.

	is certificate does not confer rights	lo the	cert	ificate holder in lieu of s	uch en	dorsement(s).	edane au endoizement	. A 51i	atellient Off	
PRO	DUCER				CONTACT Will Maddux						
East Main Street Insurance Services, Inc.						PHONE (530) 477-6521 FAX					
	Maddux				PHONE (A/C, No, Ext); (530) 477-6521 FAX (A/C, No); E-MAIL ADDRESS: info@theeventhelper.com						
PC	Box 1298									NAIC#	
Gr	iss Valley			CA 95945					35378		
insi	RED				INSURE	RB:	***************************************				
	Hot Works, LLC				INSURE						
	Patricia Narozny				INSURE	*					
	PO Box 1425				INSURE						
	Sarasota			FL 34230	INSURE						
	VERAGES CEI	TIFIC	CATE	NUMBER:				REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.											
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	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	s 100		
	Host Liquor Liability		1					MED EXP (Any one person)	\$ 5,00		
Α	Retail Liquor Liability	Υ		3DS5472-M2868983		10/08/2021	10/25/2021	PERSONAL & ADV INJURY	s 1.00		
	GEN'L AGGREGATE LIMIT APPLIES PER:					12:01 AM	12:01 AM	GENERAL AGGREGATE	\$ 2,00		
	POLICY PRO- LOC							PRODUCTS - COMP/OP AGG	s 1,00		
	OTHER:							Deductible	\$ 1.00		
	AUTOMOBILE LIABILITY	1						COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	***************************************	
	HIRED NON-OWNED AUTOS ONLY	-						PROPERTY DAMAGE (Per accident)	\$		
	1.0,000.00							(Per accident)	<u> </u>		
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	DED RETENTION \$	1						AGGREGATE	\$		
	WORKERS COMPENSATION			***************************************				PER OTH-	\$		
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE Y/N						E.L. EACH ACCIDENT	\$				
(Mandatory in NH)		N/A	N/A					E.L. DISEASE - EA EMPLOYEE			
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SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							ED BEFORE IVERED IN				
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Fort Myers FL 33901					Will Madding						
						@ 19	88-2015 AC	ORD CORPORATION	Allelah	te recented	



EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	
Lee County Department of Transportation 1500 Monrow St Fort Myers, FL 33901	

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule of this endorsement, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by the acts or omissions of any insured listed under Paragraph 1. or 2. of Section II Who Is An Insured:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

MEGL 2217 01 19

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/22/2021

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Will Maddux
NAME: Will Maddux
PHONE
(A/C. No. Ext): (530) 477-6521
E-MAIL
AODRESS: Info@theeventhelper.com PRODUCER East Main Street Insurance Services, Inc. FAX (A/C, No); Will Maddux PO Box 1298 INSURER(S) AFFORDING COVERAGE NAIC # **Grass Valley** CA 95945 INSURER A: Evanston Insurance Company 35378 INSURED INSURER B : Hot Works, LLC INSURER C: Patricia Narozny INSURER D : PO Box 1425 INSURER E Sarasota FL 34230 INSURER F : COVERAGES **CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) 1,000,000 CLAIMS-MADE X OCCUR 100,000 Host Liquor Liability s 5,000 MED EXP (Any one person) Retail Liquor Liability Υ 3DS5472-M2868983 10/08/2021 10/25/2021 1,000,000 PERSONAL & ADV INJURY \$ GEN'L AGGREGATE LIMIT APPLIES PER: 12:01 AM 12:01 AM \$ 2,000,000 GENERAL AGGREGATE PRO-JECT POLICY \$ 1,000,000 PRODUCTS - COMP/OP AGG OTHER: Deductible \$ 1,000 AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY s SCHEDULED AUTOS NON-OWNED AUTOS ONLY BODILY INJURY (Per accident) \$ HIRED AUTOS ONLY PROPERTY DAMAGE (Per accident) \$ \$ UMBRELLA LIAS OCCUR **EACH OCCURRENCE** \$ EXCESS LIAB CLAIMS-MADE AGGREGATE \$ DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER STATUTE ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A OFFICER/MEMBEREAULUDEU; (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Certificate holder listed below is named as additional insured per attached MEGL 2217 01 19. Attendance: 1500, Event Type: Art Show. Event: Estero Fine Art Show New England Sport Ventures, LLC, N.E.S.V.I, LLC, N.E.S.V.II, LLC, N.E.S.V.IV, LLC, Lee County, NESV Florida Real Estate, LLC are additional insured. CERTIFICATE HOLDER CANOCLLATION

		CANCELLATION
New England Sport Ventures, LLC N.E.S.V.I, LLC, N.E.S.V.II, LLC N.E.S.V.IV, LLC, Lee County		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
NESV Florida Real Estate, LLC		AUTHORIZED REPRESENTATIVE /
4 Jersey St		/1/4/ M 11
₁ Boston	MA 02215	Unit Madding

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EVANSTON INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

New England Sport Ventures, LLC N.E.S.V.I, LLC, N.E.S.V.II, LLC N.E.S.V.IV, LLC, Lee County NESV Florida Real Estate, LLC 4 Jersey St Boston, MA 02215

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule of this endorsement, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by the acts or omissions of any insured listed under Paragraph 1. or 2. of Section II Who Is An Insured:
 - 1. In the performance of your ongoing operations; or
 - 2. In connection with your premises owned by or rented to you.

However:

- 1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.
- B. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations; whichever is less,

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions remain unchanged.

MEGL 2217 01 19

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Hotworks.org Estero Fine Art Show
October 23 & 24, 2021
At JetBlue Park, Fort Myers
Exhibit A
One, size 5'x22' banner hung
at entrance fence of JetBlue Park
From October 8 to October 24, 2021



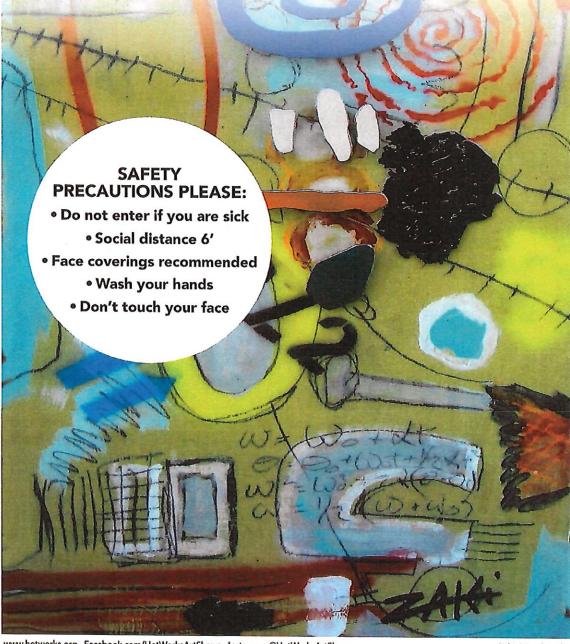
Hotworks.org Estero Fine Art Show
October 23 & 24, 2021
At JetBlue Park, Fort Myers
Exhibit B
One, size 5'x15' banner hung
at entrance fence of JetBlue Park
From October 8 to October 24, 2021



Hotworks.org Estero Fine Art Show October 23 & 24, 2021 At JetBlue Park, Fort Myers Exhibit C 36 – size 18"x24" Real Estate Signs along Daniels Pkwy October 20-24, 2021



Welcome to the Hot Works **Open Air Fine Art Show Enjoy the Show!**



www.hotworks.org Facebook.com/HotWorksArtShows Instagram @HotWorksArtShows

Zaki, Mixed Media

THANK YOU TO THE PARTICIPATING ARTISTS!