

This endorsement forms a part of Policy No. _____ Effective date _____ 12:01 A.M.
issued by the company designated therein, and takes effect as standard time at the address of the named insured as stated
of the effective date of said policy unless another effective date herein.
is stated herein.

Named Insured and Address

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TAIL COVERAGE

It is agreed that the coverage afforded by the policy is subject to the following provisions:

- (1) The policy applies only to claims that are first made or brought subsequent to the effective date of this endorsement.
- (2) The policy does not apply to:
 - (a) any claim or suit first made or brought prior to the effective date of this endorsement,
 - (b) any claim or suit that the named insured knew about prior to the effective date of this endorsement,
 - (c) any claim or suit that the named insured could have foreseen in a reasonable way prior to the effective date of this endorsement.
- (3) A claim shall be considered first made or brought on the earliest of the following dates:
 - (a) the date that the named insured receives a written claim or notice of suit, or
 - (b) the date that the named insured reported an injury or death that would likely result in a claim or suit to the Company or to any previous insurance carrier.
- (4) The premium for this policy shall be fully earned as of the effective date of this endorsement.

Nothing herein contained shall be held to vary, waive, alter, or extend any of the terms, conditions, agreements or declarations of the policy, other than as herein stated.

This endorsement shall not be binding unless countersigned by a duly authorized representative of the company; provided that if this endorsement takes effect as of the effective date of the policy and, at issue of said policy, forms a part thereof, countersignature on the declarations page of said policy by a duly authorized representative of the company shall constitute valid countersignature of this endorsement.

FLORIDA MEDICAL MALPRACTICE
JOINT UNDERWRITING ASSOCIATION

Countersigned by Stuart Mitchell
Authorized Representative