



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/23/2015

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 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 Film Emporium, Inc. 1890 Palmer Ave #403 Larchmont, NY 10538 Phone No. (914) 833-2433 Fax No.	CONTACT NAME: Laird Criner PHONE (A/C No. Ext): 914 833 2433 FAX (A/C No.): 914 833 2430 E-MAIL ADDRESS: laird@filmemporium.com													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: AGC - AGCS Marine Insurance Company</td> <td>22837</td> </tr> <tr> <td>INSURER B: AGL - American Guarantee and Liability Insurance Company</td> <td>26247</td> </tr> <tr> <td>INSURER C: EFM - Empire Fire and Marine Insurance Company</td> <td>21326</td> </tr> <tr> <td>INSURER D: ZII - Zurich American Insurance Company of Illinois</td> <td>27855</td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: AGC - AGCS Marine Insurance Company	22837	INSURER B: AGL - American Guarantee and Liability Insurance Company	26247	INSURER C: EFM - Empire Fire and Marine Insurance Company	21326	INSURER D: ZII - Zurich American Insurance Company of Illinois	27855	INSURER E:		INSURER F:
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INSURED
 AMG Exodus
 6610 Pinnock Drive
 W Bloomfield, MI 48324
 Phone No. (818) 430-8666 Fax No.

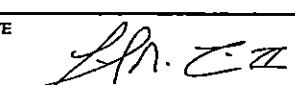
COVERAGES **CERTIFICATE NUMBER: 570380** **REVISION NUMBER:**

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
EFM	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	X	X	EN9803406-01	08/01/2014	08/01/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
EFM	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> AUTO PHYSICAL DAMAGE <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	X	X	EN9803406-01	08/01/2014	08/01/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ Included BODILY INJURY (Per accident) \$ Included PROPERTY DAMAGE (Max per Auto) (Per accident) \$ 125,000 / 500,000
AGL	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			SXS4869782-01	08/01/2014	08/01/2015	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
ZII	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input checked="" type="checkbox"/> N/A			WC5762341-01	08/01/2014	08/01/2015	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
EFM AGC	Inland Marine Inland Marine			EN9803406-01 MX193012202-003828	08/01/2014 08/01/2014	08/01/2015 08/01/2015	See Attached See Attached

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Certificate Holder is named as an Additional Insured and Loss Payee as their interests may appear.

All coverages expire at 12:01 a.m. Standard Time.

CERTIFICATE HOLDER Sensory, Uncensored Theaterworks LLC ATTN: Cristian Luna 21119 Brae Point Ct. Katy, TX 77449 United States Of America Phone No. Fax No.	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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ACORD 25 (2010/05)

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This certificate of insurance does not affirmatively or negatively amend, extend, or alter the coverage afforded by the insurance policy.

ADDITIONAL COVERAGE DETAILS

DATE (MM/DD/YY)

05/23/2015

INSURED **AMG Exxodus**

The following is attached to and made part of certificate number 570380.

Policy Details	Coverage	Limit	Deductible
Inland Marine			
Company:	Empire Fire and Marine Insurance Company		
Policy Number:	EN9803406-01		
*Period:	08/01/2014 - 08/01/2015: 365 Day(s)		
	Miscellaneous Rented Equipment	500,000	2,500
	Props, Sets & Wardrobes	50,000	1,500
	Negative Film or Videotape	100,000	Not Applicable
	Faulty Stock, Camera & Processing	100,000	10% of loss, \$5,000 minimum, \$12,500 maximum
	Extra Expense	50,000	2,500
	Office Contents	20,000	1,500
	Third Party Property Damage	1,000,000	2,500
	Hired/Non-Owned Physical Damage-Aggregate	500,000	
	Hired/Non-Owned Physical Damage-Per Vehicle	125,000	10% of loss, \$1,500 minimum, \$7,500 maximum
	Worldwide Coverage	Included	
	Terrorism	Included	

Inland Marine			
Company:	AGCS Marine Insurance Company		
Policy Number:	MXI93012202-003828		
*Period:	08/01/2014 - 08/01/2015: 365 Day(s)		
	Unscheduled Owned Equipment	10,000	1,500
	Worldwide Coverage	Included	
	Terrorism	Included	

*All coverages expire at 12:01 a.m. Standard Time.

Coverage is not afforded for stunts & pyrotechnics except for those declared, scheduled and accepted by the insurance company(s).

For a complete listing of coverages, terms, conditions and exclusions, please view your policy.

SCHEDULE OF FORMS

05/23/2015

Insured: AMG Exodus

This Schedule of Forms is attached to and made part of certificate number 570380, as of 05/23/2015 at 10:26 AM PT, and lists the forms included in the policy(s) and subsequent endorsement (s) at the time this certificate was issued.

Form #	Ed.	Name
Entertainment Production Package		
Notices		
U-GU-319-F	0109	Important Notice - In Witness Clause
U-GL-P-0008-A CW	0413	2012 General Liability Multistate Forms Revision Notice to Policyholders
U-GU-1041-A	0311	Advisory notice to policyholders regarding the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") regulations
U-GU-874-A	0611	Notice of Disclosure for Agent and Broker Compensation
Common		
EM 3652	0108	Jacket - EF&M
EM 3601	0303	Common Declarations
UGU619ACW	1002	Schedule of Forms and Endorsements
IL 0017	1198	Common Policy Conditions
IL 0296	0907	Michigan Changes - Cancellation and Nonrenewal
EM0860	0709	Definition of Productions and Budget Limitations
EM0867	0709	Minimum Earned Premium Endorsement
IL 0003	0907	Calculation of Premium
U-GU-692-C-CW	0613	Disclosure Of Premium (Relating To Disposition Of TRIA)
Inland Marine		
EM 4800	1106	Commercial Inland Marine Declarations
UGU619ACW	1002	Schedule of Forms and Endorsements
CM 0001	0904	Commercial Inland Marine Conditions
EM4802	0709	Coverage A. Miscellaneous Equipment
EM 4803	1106	Coverage B. Props, Sets and Wardrobe
EM4804	0709	Coverage C. Negative Film, Video Tape and Digitized Image
EM4805	0709	Coverage D. Faulty Stock, Camera and Processing
EM 4806	0905	Coverage E. Third Party Property Damage
EM4807	0709	Coverage F. Extra Expense
EM4808	0709	Coverage G. Vehicle Physical Damage
UCIM105ACW	1106	Loss Payable - Endorsement and Schedule
EM 4809	0705	Office Equipment and Furnishings
EM4824	0207	World-Wide Inland Marine Coverage
CM 0111	0701	Michigan Changes
EM 4810	0705	Owned Equipment Exclusion
EM4812	0709	Average Rate Endorsement
EM 4819	1106	Commercial Inland Marine Changes
U-GU-767-A-CW	0108	Cap on Losses from Certified Acts of Terrorism
General Liability		
EM 3602	0302	Commercial GL Coverage Declarations
UGU619ACW	1002	Schedule of Forms and Endorsements
CG0001	0413	Commercial General Liability Coverage Form
IL 0021	0702	Nuclear Energy Liability Exclusion Endorsement
CG 2011	0196	Additional Insured - Managers of Lessors of Premises
CG 2012	0509	Additional Insured - State or Political Subdivision-Permit
CG 2026	0704	Additional Insured - Designated Person or Organization
CG 2028	0704	Additional Insured - Lessor of leased equipment
CG 2147	1207	Employment Related Practices Exclusion
U-GL-1171-A-CW	0703	Fungi Bacteria Exclusion.
U-GL-1178-A-CW	0703	Asbestos Exclusion
CG 2404	0509	Waiver of Transfer of Rights of Recovery Against Others to Us
U-GL-1327-B CW	0413	Other Insurance Amendment - Primary And Non- Contributory
EM 4634	0704	Lead Exclusion
EM 4630	1106	Field of Entertainment Productions Exclusion
EM 4632	0705	Premium Rate Schedule
EM 4633	1106	Removal of Coverage for Premises in the Short Term Control of the Insured
EM 4650	0905	Commercial General Liability Changes
CG0168	1009	Maine Changes
EM0859	0311	Definition of Employee
U-GL-1198-A-CW	0204	Violation of Communication or Information Law Excl
CG 2146	0798	Abuse or Molestation Exclusion
U-GL-1517-A CW	0112	Collection or Distribution of Material or Information in Violation of Law Exclusion
U-GU-767-A-CW	0108	Cap on Losses from Certified Acts of Terrorism
Automobile		
EM3603	0310	Business Auto Declarations Page
UGU619ACW	1002	Schedule of Forms and Endorsements
CA 0001	0306	Business Auto Coverage Form
IL 0021	0702	Nuclear Energy Liability Exclusion Endorsement
CA 2048	0299	Designated Insured
EM 4513	0506	Waiver of Subrogation
CA0110	0311	Michigan Changes
EM 4755	0905	Business Auto Changes
CA2220	0509	MI Personal Injury Protection
CA 2224	0994	Michigan Property Protection Coverage
EM0859	0311	Definition of Employee

This Certificate of Liability Insurance includes the Type of Insurance, Limits, and Schedule of Forms in effect as of 05/23/2015 at 10:26 AM PT. It does not affirmatively or negatively amend, extend, or alter the coverage afforded by the insurance policy nor confer any rights upon the certificate holder. You may be required to request an updated certificate in the event of subsequent policy modifications.

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DATE (MM/DD/YY)

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Form #	Ed.	Name
U-CA-531-B	0208	Notice Regarding Terrorism Premium (for Commercial Automobile Ins)

Workers' Compensation Policy Policy form assignment to be handled by insurance carrier.

Excess Liability Policy

Excess Liability

Notices

U-GU-319-F	0109	Important Notice - In Witness Clause
U-GU-1041-A	0311	Advisory notice to policyholders regarding the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC") regulations
U-GU-874-A	0611	Notice of Disclosure for Agent and Broker Compensation

Forms

U-SXS-104-A CW	0911	Straight Excess Liability Policy (Jacket)
U-SXS-D-100-A CW	0911	Straight Excess Liability Policy Declarations
U-SXS-101-A CW	0911	Schedule of Underlying Insurance
U-SXS-103-A CW	0911	Schedule of Forms & Endorsements
U-GU-692-C-CW	0613	Disclosure Of Premium (Relating To Disposition Of TRIA)
U-SXS-100-A CW	0911	Straight Excess Liability Policy
U-EXS-312E CW	0112	Exclusion - Collection or Distribution of Material or Information in Violation of Law
U-EXS-191-B MI	0411	Michigan Changes Cancellation Nonrenewal

Owned Equipment Floater

Inland Marine

Notices

AB5127PHM	0110	A Message for Our Customers
TER9021PHM	0110	Important Notice Regarding Terrorism Coverage
AB5126PHM	0110	Policyholder Message - Information to Policyholders
AB5101PHM	0110	Policyholder Message: Detrimental Code Exclusion
AB5100PHM	0110	Policyholder Message: Fungi Limitation Endorsement

Forms

IM1000DEC	0210	Inland Marine - General Declarations
AB5208	0110	Schedule of Forms
AB5700	0110	Named Insured Schedule
AB5701	0110	Location Schedule
NIM1050	0110	Commercial Inland Marine Conditions
AB5016DEC	0110	Commercial Articles Declarations
AB5016	0110	Commercial Articles Coverage Form
AB1011DEC	0110	Theatrical Property Declarations
AB0029	0110	Theatrical Property Coverage Form
AB5400	0110	Schedule of Covered Property
IM8004	0110	Loss Payable Premium Endorsement
AB5201	0110	Deductible Schedule
AB5202	0110	Coverage Territory
AB5205	0110	Aggregate Limit
AB5200B	0110	Minimum Premium Endorsement
CM0111	0701	Michigan Changes - Endorsement
AB5100	0110	Fungi Limitation Endorsement
IL0286	0907	Michigan Changes - Cancellation and Nonrenewal Endorsement
IL0017	1198	Common Policy Conditions
IL0003	0702	Calculation Of Premium
AB5101	0110	Detrimental Code Exclusion
TER9005	0110	Certified Acts of Terrorism Coverage
TER9006	0110	Disclosure of Premium and Federal Share of Insured Losses for Certified Acts of Terrorism Coverage

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