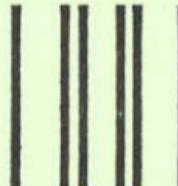


USPS TRACKING #



9590 9402 8697 3310 5937 47

United States  
Postal Service

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4® in this box\*

Core Specialty Insurance Services  
PO Box 5755  
Cincinnati, Ohio 45201

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**1. Article Addressed to:**

534 West 42nd Street Condominium  
534 W 42nd St  
New York, NY 10036



9590 9402 8697 3310 5937 47

**2. Article Number (Transfer from service label)****COMPLETE THIS SECTION ON DELIVERY****A. Signature****X** Agent Addressee**B. Received by (Printed Name)****C. Date of Delivery****D. Is delivery address different from item 1?**

If YES, enter delivery address below:

 Yes No**3. Service Type**

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery



08-04-2025

534 West 42nd Street Condominium  
534 W 42nd St  
New York, NY 10036

PO Box 5755  
Cincinnati, OH, 45201  
Ph: (513) 599-7500  
Fax: (513) 599-7501  
[wwwcorespecialty.com](http://wwwcorespecialty.com)

**Re: Notice of Conditional Renewal**

<b>Insured Name:</b>	534 West 42nd Street Condominium
<b>Policy Number:</b>	74326A240ALI
<b>Carrier:</b>	StarStone National Insurance Company
<b>Policy Period:</b>	09-23-2024 to 09-17-2025
<b>Policy Type:</b>	Excess Casualty

Dear Policyholder:

We appreciate your business and hope to continue to be your insurance carrier of choice in the future. Consistent with our commitment to you, and pursuant to applicable state law requirements, we are sending this letter to inform you that the above-captioned policy may be renewed at terms and conditions that differ from those contained in the expiring policy.

In particular, changes may include an increase in premium, an increase in deductible or self-insured retention, a reduction in limits and/or changes to, or elimination of, certain coverages. These changes may be necessary as a result of trends in the economy and legal environment which may warrant an updated underwriting analysis.

In anticipation of the upcoming renewal, your broker will contact you to complete a renewal application and provide any necessary underwriting information.

If you have any questions or concerns, I would be pleased to discuss with you and your broker.

Yours Sincerely,

Todd Dixon  
President - US Excess Casualty

Cc: FTP, Inc. - Old Bridge, NJ