

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/30/2021

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/jes) must have ADDITIONAL INSURED provisions or be endorsed

If SUBROGATION IS WAIVED, subject this certificate does not confer rights	to th	ne ter	ms and conditions of th	e polic	cy, certain po	olicies may i				
PRODUCER				CONTA NAME:	CT USI Insura	ance Services	8	FAV		
Commercial Lines - (305) 443-4886 USI Insurance Services LLC				PHONE (A/C, No, Ext): 305-443-4886 FAX (A/C, No): E-MAIL ADDRESS: Miagcerts@usi.com						
2601 South Bayshore Drive, Suite 1600				ADDRE		rts@usi.com	NO. 11.0 COLUED A CE			11410 11
Coconut Grove, FL 33133				INSURER(s) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Ins Co					NAIC# 18058	
INSURED				INSURER B: See attached					10000	
Sunflower Condominium Association, Inc.				INSURER C: Continental Casualty Company					20443	
7200 NW 2nd Ave, #175				INSURER D:						
				INSURER E :						
Boca Raton , FL 33487				INSURE	R F :					
			NUMBER: 652695	/F DEE	N ICCUED TO		REVISION NUM			
THIS IS TO CERTIFY THAT THE POLICIES INDICATED. NOTWITHSTANDING ANY RICERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT POLK	REMEN AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN' ED BY	Y CONTRACT THE POLICIES REDUCED BY F	OR OTHER DESCRIBED	DOCUMENT WITH	RESPE	OT TO	WHICH THIS
INSR TYPE OF INSURANCE		WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)		LIMIT		
A X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR			PHPK2280858	5/31/21	5/31/21	5/31/22	EACH OCCURRENCE DAMAGE TO RENTE	ED	\$	1,000,000
CLAIMS-MADE \(\begin{align*}\chi \chi \chi \chi \chi \chi \chi \chi							PREMISES (Ea occu MED EXP (Any one p		\$	100,000 5,000
							PERSONAL & ADV		\$	1,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG		\$	2,000,000
POLICY PRO- JECT LOC							PRODUCTS - COMP	P/OP AGG	\$	2,000,000
OTHER:							COMBINED SINGLE	LIMIT	\$	
AUTOMOBILE LIABILITY ANY AUTO							(Ea accident)		\$ 	
OWNED SCHEDULED							BODILY INJURY (Pe		\$	
AUTOS ONLY AUTOS NON-OWNED							PROPERTY DAMAG		\$	
AUTOS ONLY AUTOS ONLY							(Per accident)		\$	
UMBRELLA LIAB OCCUR			-				EACH OCCURRENC	E	\$	
EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$	
DED RETENTION \$							1000	T OTIL	\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N							PER STATUTE	OTH- ER		
ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	A					E.L. EACH ACCIDEN		\$	
(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA E			
DÉSCRIPTION OF OPERATIONS below C Boiler & Machinery			4014345539		05/31/2021	05/31/2022	E.L. DISEASE - POL Limit \$22,209,343	ICY LIMIT	\$	
							Deductible: \$1,000			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC Unit Owner Name: Sunflower Condominiu Address: .	•			le, may b	e attached if more	e space is require	ed)			
, (44, 555.)										
CERTIFICATE HOLDER				CANCELLATION						
Sunflower Condominium Association, Inc.				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						
										Bim Cal

CRIME / EMPLOYEE DISHONESTY

INSURANCE CARRIER: Travelers Casualty and Surety Co. of America

POLICY NUMBER: 105781537

POLICY PERIOD: Effective Date: 5/31/2021 Expiration Date: 5/31/2022

Limit: \$ 200,000

DIRECTORS & OFFICERS LIABILITY

INSURANCE CARRIER: Philadelphia Indemnity Insurance Company

POLICY NUMBER: PCAP00076650418

POLICY PERIOD: Effective Date: 5/31/2021 Expiration Date: 5/31/2022

Limit: \$ 1,000,000



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 6/30/2021

6/30/2021 THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. AGENCY PHONE (A/C. No. Ext): Commercial Lines - (305) 443-4886 American Coastal Insurance Co **USI Insurance Services LLC** 2601 South Bayshore Drive, Suite 1600 Coconut Grove, FL 33133 FAX (A/C, No): CODE: SUB CODE: AGENCY CUSTOMER ID #: I OAN NUMBER POLICY NUMBER INSURED AMC3665902 Sunflower Condominium Association, Inc. 7200 NW 2nd Ave, #175 FFFECTIVE DATE **EXPIRATION DATE** CONTINUED UNTIL 5/31/2021 5/31/2022 TERMINATED IF CHECKED Boca Raton, FL 33487 THIS REPLACES PRIOR EVIDENCE DATED: PROPERTY INFORMATION LOCATION/DESCRIPTION see attached for location information. 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 EVIDENCE OF PROPERTY INSURANCE 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. **COVERAGE INFORMATION** PERILS INSURED BASIC BROAD **SPECIAL** COVERAGE / PERILS / FORMS AMOUNT OF INSURANCE DEDUCTIBLE see attached for coverage information. **REMARKS (Including Special Conditions)** Unit Owner Name: Sunflower Condominium Association, Inc. Address: . 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. ADDITIONAL INTEREST NAME AND ADDRESS ADDITIONAL INSURED LENDER'S LOSS PAYABLE LOSS PAYEE Sunflower Condominium Association, Inc. MORTGAGEE LOAN# AUTHORIZED REPRESENTATIVE

5 m

PROPERTY/HAZARD SCHEDULE

INSURANCE CARRIER: American Coastal Insurance Co

POLICY NUMBER: AMC3665902

POLICY PERIOD: Effective Date: 5/31/2021 Expiration Date: 5/31/2022

Business Income: Extra Expense:

[] Blanket Limit Applies

[X] Replacement Cost [X] Special [] Basic

Remark(s):

Building Ordinance or Law is included - Full Coverage A and a B&C sublimit of 10% applies. Building limit represents the 100% replacement cost value reflected on the insurable value appraisal dated 4/4/18. Coinsurance is waived - an Agreed Value endorsement applies.

Bldg	Location 7200 NW 2 Avenue Bldg. 5-8 Boca Raton, FL 33487	Limit \$ 510,099	Total # Units 4	Hurricane Ded 2%	AOP Ded \$ 2,500	Coins %
	7200 NW 2 Avenue Bldg. 13-19 Boca Raton, FL 33487	\$ 901,910	7	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.31-34 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 35-38 Boca Raton, FL 33487	\$ 510,099	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 39-42 Boca Raton, FL 33487	\$ 507,925	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 43-45 Boca Raton, FL 33487	\$ 373,661	3	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.59-62 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 63-65 Boca Raton, FL 33487	\$ 386,744	3	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 66-72 Boca Raton, FL 33487	\$ 878,150	7	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 73-75 Boca Raton, FL 33487	\$ 375,226	3	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 76-79 Boca Raton, FL 33487	\$ 499,031	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.80-83 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.84-91 Boca Raton, FL 33487	\$ 974,294	8	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 92-98 Boca Raton, FL 33487	\$ 853,413	7	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.99-102 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.103-106 Boca Raton, FL 33487	\$ 491,876	4	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg. 107- 112 Boca Raton, FL 33487	\$ 723,776	6	2%	\$ 2,500	
	7200 NW 2 Avenue Bldg.113- 120 Boca Raton, FL 33487	\$ 955,109	8	2%	\$ 2,500	

7200 NW 2 Avenue Bldg.121-131 Boca Raton, FL 33487	\$ 1,324,689	11	2%	\$ 2,500
7200 NW 2 Avenue Bldg.132-135 Boca Raton, FL 33487	\$ 499,031	4	2%	\$ 2,500
7200 NW 2 Avenue Bldg. 136-139 Boca Raton, FL 33487	\$ 510,099	4	2%	\$ 2,500
7200 NW 2 Avenue Bldg.140-146 Boca Raton, FL 33487	\$ 853,413	7	2%	\$ 2,500
7200 NW 2 Avenue Bldg.147-149 Boca Raton, FL 33487	\$ 375,226	3	2%	\$ 2,500
7200 NW 2 Avenue Bldg.150-154 Boca Raton, FL 33487	\$ 630,187	5	2%	\$ 2,500
7200 NW 2 Avenue Bldg. 155-162 Boca Raton, FL 33487	\$ 977,594	8	2%	\$ 2,500
7200 NW 2 Avenue Bldg. 163-166 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500
7200 NW 2 Avenue Bldg. 167-174 Boca Raton, FL 33487	\$ 955,109	8	2%	\$ 2,500
7200 NW 2 Avenue Bldg 1-4 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500
7200 NW 2 Avenue Bldg 9-12 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500
7200 NW 2 Avenue Bldg 20-27 Boca Raton, FL 33487	\$ 961,444	8	2%	\$ 2,500
7200 NW 2 Avenue Bldg 28-30 Boca Raton, FL 33487	\$ 373,661	3	2%	\$ 2,500
7200 NW 2 Avenue Bldg 55-58 Boca Raton, FL 33487	\$ 493,675	4	2%	\$ 2,500
7200 NW 2 Avenue Bldg 46-54 Boca Raton, FL 33487	\$ 1,080,471	9	2%	\$ 2,500

WINDSTORM

INSURANCE CARRIER: American Coastal Insurance Co

POLICY NUMBER: AMC3665902

[X] Coverage Included in Property/Hazard Policy [X] See Property/Hazard Schedule for Locations & Limits [X] Replacement Cost

EXCESS FLOOD

Not Covered
