



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/24/2024

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).

| PRODUCER Roy Palacios Insurance Agency Inc 26081 Merit Circle Suite 101 Laguna Hills, CA 92653 License #: 0D36891 | CONTACT NAME: Elise PHONE (A/C, No. Ext): (949)582-0964 FAX (A/C, No): (949)582-0655 E-MAIL ADDRESS: Support@contactrpi.com | | | | | | | | | | | | | | | | | | | | | |
|--|--|-------------------------------|--|--------|--------------------|---------------------------------|--------------|--------------------|----------------------------------|--------------|--------------------|--------------------------------------|--------------|--------------------|--|--|--------------------|--|--|--------------------|--|--|
| INSURED Concerto Lofts Maintenance Corporation C/O Seabreeze Management Company 26840 Aliso Viejo Parkway Suite 100 Aliso Viejo, CA 92656 | <table><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A :</td><td>Truck Insurance Exchange</td><td>21709</td></tr><tr><td>INSURER B :</td><td>Federal Insurance Company</td><td>20281</td></tr><tr><td>INSURER C :</td><td>Mid-Century Insurance Company</td><td>21687</td></tr><tr><td>INSURER D :</td><td></td><td></td></tr><tr><td>INSURER E :</td><td></td><td></td></tr><tr><td>INSURER F :</td><td></td><td></td></tr></table> | INSURER(S) AFFORDING COVERAGE | | NAIC # | INSURER A : | Truck Insurance Exchange | 21709 | INSURER B : | Federal Insurance Company | 20281 | INSURER C : | Mid-Century Insurance Company | 21687 | INSURER D : | | | INSURER E : | | | INSURER F : | | |
| INSURER(S) AFFORDING COVERAGE | | NAIC # | | | | | | | | | | | | | | | | | | | | |
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| INSURER E : | | | | | | | | | | | | | | | | | | | | | | |
| INSURER F : | | | | | | | | | | | | | | | | | | | | | | |

COVERAGES**CERTIFICATE NUMBER: 00001046-107600****REVISION NUMBER: 6**


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 INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|--|--|----------|---------------|-------------------------|-------------------------|--|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> D&O Ded \$5,000 <input checked="" type="checkbox"/> D&O Claims Made GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | 60699-45-24 | 06/01/2024 | 06/01/2025 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 75,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 Director & Officer \$ 1,000,000 |
| A | <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | 60699-45-24 | 06/01/2024 | 06/01/2025 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| B | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0 | | | G74491297 | 06/01/2024 | 06/01/2025 | EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ \$ |
| C | 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 | N / A | A0951-36-46 | 06/01/2024 | 06/01/2025 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER \$ 1,000,000 E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |
| A | Building Property | | | 60699-45-24 | 06/01/2024 | 06/01/2025 | DED \$25,000 \$ \$34,674,000 |
| A | Fidelity Bond | | | 60699-45-24 | 06/01/2024 | 06/01/2025 | DED \$10,000 \$ \$800,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Condo Association located in Playa Vista, CA 90094. 89 units. Policy is Walls-In to original specifications. Policy includes 150% Extended Replacement Cost Endorsement. Includes Building Ordinance & Law Coverage. Seabreeze Mgmt Company is Named Insured with respects to the General Liability and Additional Insured with respects to the Fidelity Bond and Directors and Officers coverage. Policy contains Inflation Guard Endorsement. Severability of Interest. Wind and Hail Included. Special Form Policy. Mechanical Breakdown. Policy includes 10 day Notice of Cancellation.

CERTIFICATE HOLDER**CANCELLATION**

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| Seabreeze Management Company 26840 Aliso Viejo Parkway #100 Aliso Viejo, CA 92656 | <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p>  <p>(EKH)</p> |
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