

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/20/2022


PRODUCER Mack, Mack & Waltz Insurance Group, Inc. 1211 S. Military Trail, Ste. 100 Deerfield Beach, FL 33442 (954) 640-6225	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Island Club Four, Inc. c/o None 777 South Federal HWY, NECTARINE BLDG 4TH FL Offic Pompano Beach, FL 33062	INSURERA:Northfield Insurance Co	
	INSURERB:American Coastal Insurance Co	
	INSURERC:Travelers Insurance Company	
	INSURERD:Wright National Flood Insurance Co	
	INSURERE:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
A	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	WS516835	05/14/2022	05/14/2023	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 HNOA 1,000,000								
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$								
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATU-TORY LIMITS	OTH-ER												
E.L. EACH ACCIDENT	\$												
E.L. DISEASE - EA EMPLOYEE	\$												
E.L. DISEASE - POLICY LIMIT	\$												
B	OTHER	AMC-36452-03	05/14/2022	05/14/2023	Building TIV: \$16,345,126								
C	Property*	105601056	05/14/2022	05/14/2023	Employee Dishonesty: \$200,000								
D	Crime	Various	05/02/2022	05/02/2023	See Addendum								
	Flood												

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 EOI, 777 S. Federal HWY, Pompano Beach, FL 33062
 5 Building Condominium with 121 units
 *Property: Special Form/Replacement Cost/Agreed Amount/Ordinance or Law included/Equipment Breakdown \$10,000,000
 Deductibles: 5% Hurricane per Cal Yr/\$5,000 AOP/\$5,000 Sinkhole

CERTIFICATE HOLDER EOI INFO ONLY EOI INFO ONLY Pompano Beach, FL 33062 Loan Number: 000000000	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
--	---

Island Club Four, Inc. Addendum
Flood Carrier: Wright National Flood Insurance Co.
Policy Term: 05/02/2022 to 05/02/2023

	Locations	Policy Number	Deductible	Building Values	Flood Zones	# of units
1	777 South Federal Highway- Building K	*091150697251	\$1,250	\$2,232,000	AE	15
2	777 South Federal Highway- Building L	*091150697252	\$1,250	\$2,051,000	AE	12
3	777 South Federal Highway- Building M	*091150697254	\$1,250	\$3,207,000	AE	19
4	777 South Federal Highway- Building N	*091150697258	\$1,250	\$6,562,000	X	43
5	777 South Federal Highway- Building O	*091150697264	\$1,250	\$4,759,000	AHB	32
Total Insurable Value				\$18,811,000		

Property Carrier: American Coastal Insurance
Policy Term: 05/14/2022 to 05/14/2023

	LOCATIONS	BUILDING VALUES
1	777 South Federal Highway- Building K	\$1,917,102
2	777 South Federal Highway- Building L	\$1,797,400
3	777 South Federal Highway- Building M	\$2,813,899
4	777 South Federal Highway- Building N	\$5,699,329
5	777 South Federal Highway- Building O	\$4,117,396
Total Insurable Value		\$16,345,126