

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

5/5/2026

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 Commercial Lines - (305) 669-6000 USI Insurance Services LLC 201 Alhambra Circle, Ste 1401 Coral Gables, FL 33134	CONTACT NAME: Miagcerts PHONE (A/C, No. Ext): E-MAIL ADDRESS: Miagcerts@usi.com FAX (A/C, No):																					
INSURED Terrazas Riverpark Village Condo. Assoc 1861 NW South River DR Miami FL 33125	<table border="1"><thead><tr><th colspan="2">INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr></thead><tbody><tr><td>INSURER A:</td><td>United Specialty Insurance Company</td><td>12537</td></tr><tr><td>INSURER B:</td><td>See attached</td><td></td></tr><tr><td>INSURER C:</td><td>Midvale Indemnity Company</td><td>27138</td></tr><tr><td>INSURER D:</td><td>Transportation Insurance Company</td><td>20494</td></tr><tr><td>INSURER E:</td><td>Federal Insurance Company</td><td>20281</td></tr><tr><td>INSURER F:</td><td></td><td></td></tr></tbody></table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	United Specialty Insurance Company	12537	INSURER B:	See attached		INSURER C:	Midvale Indemnity Company	27138	INSURER D:	Transportation Insurance Company	20494	INSURER E:	Federal Insurance Company	20281	INSURER F:		
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COVERAGES**CERTIFICATE NUMBER:** 778501**REVISION NUMBER:** See below

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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:		AXL0000932600	1/25/2026	1/25/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY		AXL0000932600	1/25/2026	1/25/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$		PPRP229824000012199635	1/25/2026	1/25/2027	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$
D	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 ☐ N / A	WC619987606	1/25/2026	1/25/2027	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
E	Boiler & Machinery		7638137EUC	1/25/2026	1/25/2027	\$90,000,000

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

Unit Owner Name: Terrazas Riverpark Village Condominium Association
Address: 1861- 1871 NW S. River Drive Miami, FL 33125

Description:
Master Certificate of Insurance - For Association Use Only

CERTIFICATE HOLDER

Terrazas Riverpark Village Condominium Association
1861- 1871 NW S. River Drive
Miami, FL 33125

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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CRIME / EMPLOYEE DISHONESTY

INSURANCE CARRIER: Travelers Casualty and Surety Co. of America
POLICY NUMBER: 106050652
POLICY PERIOD: Effective Date: 1/24/2026 Expiration Date: 1/24/2027
Limit: \$ 1,100,000
Remark(s):
Retention \$5,000
Property Manager included in Fidelity Bond

DIRECTORS & OFFICERS LIABILITY

INSURANCE CARRIER: Accredited Surety & Casualty Co Inc
POLICY NUMBER: 1SKNFL1700
POLICY PERIOD: Effective Date: 1/24/2026 Expiration Date: 1/24/2027
Limit: \$ 1,000,000
Remark(s):
Retention: \$5,000

**EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY)

5/5/2026

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 Commercial Lines - (305) 669-6000 USI Insurance Services LLC 201 Alhambra Circle, Ste 1401 Coral Gables, FL 33134		PHONE (A/C, No, Ext):		COMPANY MS Transverse Specialty Ins Co	
FAX (A/C, No):		E-MAIL ADDRESS:			
CODE:		SUB CODE:			
AGENCY CUSTOMER ID #:					
INSURED Terrazas Riverpark Village Condo. Assoc 1861 NW South River DR Miami FL 33125		LOAN NUMBER		POLICY NUMBER 1239309	
		EFFECTIVE DATE 5/21/2026		EXPIRATION DATE 5/21/2027	
				☐ CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:					

PROPERTY INFORMATION

LOCATION/DESCRIPTION Bldg: 1 Location: 1861- 1871 NW S. River Drive Miami, FL 33125 Total # Units: 328
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: Terrazas Riverpark Village Condominium Association
Address: 1861- 1871 NW S. River Drive Miami, FL 33125

Description:
Master Certificate of Insurance - For Association Use Only

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 Terrazas Riverpark Village Condominium Association 1861- 1871 NW S. River Drive Miami, FL 33125	☐	ADDITIONAL INSURED	☐	LENDER'S LOSS PAYABLE	☐	LOSS PAYEE
	☐	MORTGAGEE	☐			
	LOAN #					
AUTHORIZED REPRESENTATIVE 						

PROPERTY/HAZARD SCHEDULE

INSURANCE CARRIER: MS Transverse Specialty Ins Co
POLICY NUMBER: 1239309
POLICY PERIOD: Effective Date: 5/21/2026 Expiration Date: 5/21/2027
Business Income: Extra Expense:
[] Blanket Limit Applies
[X] Replacement Cost [X] Special [] Basic
Remark(s):
Building Ordinance or Law: Full A: B&C Combined \$2,500,000.
The Park Tower has 114 individual units and the River Tower has 210 units which includes 4 commercial units. Total number is 328 units

Bldg	Location	Limit	Total # Units	Hurricane Ded	AOP Ded	Coins %
1	1861- 1871 NW S. River Drive Miami, FL 33125	\$ 97,025,583	328	3% CYH	\$ 10,000	Agreed Value

FLOOD

INSURANCE CARRIER: Imperial Fire and Casualty Insurance Co, [X] Replacement Cost, Flood Zone: AE

Bldg	Location	Limit	Total # Units	Policy#	Deductible	Policy Period
1	1861- 1871 NW S. River Drive Miami, FL 33125	\$ 81,000,000	328	0000149791	\$ 1,250	12/11/2025-12/11/2026

EXCESS FLOOD

Not Covered