



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/19/2026

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: Certificate Department PHONE (A/C, No, Ext): 305-443-4886 E-MAIL ADDRESS: miagcerts@usi.com FAX (A/C, No):																					
INSURED The Waverly at Las Olas Condo. Association 100 North Federal Highway #110, Fort Lauderdale, FL 33301	<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>James River Insurance Company</td><td>12203</td></tr><tr><td>INSURER B:</td><td>See attached</td><td></td></tr><tr><td>INSURER C:</td><td>Spinnaker Insurance Company</td><td>24376</td></tr><tr><td>INSURER D:</td><td>Zenith Insurance Company</td><td>13269</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:	James River Insurance Company	12203	INSURER B:	See attached		INSURER C:	Spinnaker Insurance Company	24376	INSURER D:	Zenith Insurance Company	13269	INSURER E:	Federal Insurance Company	20281	INSURER F:		
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COVERAGES

CERTIFICATE NUMBER: 785196

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:		S0000462855	6/30/2026	6/30/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 2,500 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		P0000001242	06/30/26	06/30/2027	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 \$		PPP3005131L26A00	6/30/2026	6/30/2027	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		Z142031803	6/30/2026	6/30/2027	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		76445755	06/30/2026	06/30/2027	\$100,000,000

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

Unit Owner Name: Master Certificate of Insurance
Address: .
Unit#: .

CERTIFICATE HOLDER

CANCELLATION

The Waverly at las Olas Condo. Association
100 North Federal Highway #110
Fort Lauderdale, FL 33301

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: Hanover Insurance Company
POLICY NUMBER: BDJ6995102
POLICY PERIOD: Effective Date: 6/30/2026 Expiration Date: 6/30/2027
Limit: \$ 3,500,000

Bldg	Location	Total # Units
1	100-110 North Federal Highway, Ft Lauderdale FL 33301	309

DIRECTORS & OFFICERS LIABILITY

INSURANCE CARRIER: Accredited Specialty Ins Co
POLICY NUMBER: 1SKNFL170152371402
POLICY PERIOD: Effective Date: 6/30/2026 Expiration Date: 6/30/2027
Limit: \$ 1,000,000

**EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY)

8/19/2026

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 Princeton Excess and Surplus Lines Ins Co	
FAX (A/C, No):		E-MAIL ADDRESS:			
CODE:		SUB CODE:			
AGENCY CUSTOMER ID #:					
INSURED The Waverly at Las Olas Condo. Association 100 North Federal Highway #110, Fort Lauderdale, FL 33301				LOAN NUMBER	
				POLICY NUMBER 9VA3PP000123300	
EFFECTIVE DATE 6/30/2026		EXPIRATION DATE 6/30/2027		☐ CONTINUED UNTIL TERMINATED IF CHECKED	
THIS REPLACES PRIOR EVIDENCE DATED:					

PROPERTY INFORMATION

LOCATION/DESCRIPTION Bldg: 1 Location: 100-110 North Federal Highway, Ft Lauderdale FL 33301 Total # Units: 309
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: Master Certificate of Insurance
Address: .
Unit#: .

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 The Waverly at Las Olas Condo. Association 100 North Federal Highway #110 Fort Lauderdale, FL 33301	ADDITIONAL INSURED	LENDER'S LOSS PAYABLE	LOSS PAYEE
	MORTGAGEE		
	LOAN #		
AUTHORIZED REPRESENTATIVE 			

PROPERTY/HAZARD SCHEDULE

INSURANCE CARRIER: Princeton Excess and Surplus Lines Ins Co
POLICY NUMBER: 9VA3PP000123300
POLICY PERIOD: Effective Date: 6/30/2026 Expiration Date: 6/30/2027
Business Income: Extra Expense:
[] Blanket Limit Applies
[X] Replacement Cost [X] Special [] Basic

Remark(s):
Excess property Carriers: Steadfast Insurance Co. Pol #XPF6366363-00 & XPF3440110-00
Ordinance or Law Full A, 5% B and C combined
Valuation: Agreed Value ; 100% Replacement cost

Bldg	Location	Limit	Total # Units	Hurricane Ded	AOP Ded	Coins %
1	100-110 North Federal Highway, Ft Lauderdale FL 33301	\$ 123,156,681	309	3%	\$ 10,000	0

WINDSTORM

INSURANCE CARRIER: ---
POLICY NUMBER:
[X] Coverage Included in Property/Hazard Policy [] See Property/Hazard Schedule for Locations & Limits [] Replacement Cost

FLOOD

Remark(s):
309 Units

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

Bldg	Location	Limit	Total # Units	Policy#	Deductible	Policy Period
1	100-110 North Federal Highway, Ft Lauderdale FL 33301	\$ 77,250,000	309	0003043656	\$ 1,250	8/27/2026-8/27/2027

EXCESS FLOOD

Not Covered