



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/08/2025

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 Brown & Brown Insurance Services, Inc. 1201 W Cypress Creek Rd Suite 130 Fort Lauderdale FL 33309	CONTACT NAME: EOI Direct PHONE (A/C, No, Ext): (877) 456-3643 E-MAIL ADDRESS: help@eoidirect.com FAX (A/C, No): INSURER(S) AFFORDING COVERAGE INSURER A: INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC #
INSURED Two Tequesta Point Condominium Association, Inc. 808 Brickell Key Dr Miami FL 33131		

COVERAGES**CERTIFICATE NUMBER:** 25-26 Master COI**REVISION NUMBER:**

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
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS-MADE DED ☐ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE ☐ OTH-ER ☐ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	PROPERTY			553002428	09/18/2025	09/18/2026	Total Insured Value \$81,937,242 See notes for details.

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

Residential condominium association wih 268 units located at 808 Brickell Key Drive, Miami, FL 33131

CERTIFICATE HOLDER**CANCELLATION**

Two Tequesta Point Condominium Association, Inc. 808 Brickell Key Dr Miami FL 33131	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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AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Brown & Brown Insurance Services, Inc.		NAMED INSURED Two Tequesta Point Condominium Association, Inc.	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

PROPERTY

TIV: \$81,937,242
 Building - \$81,537,242 / Personal Property Value: \$400,000

Layer: \$25,000,000 Primary
 Policy #: 553002428
 Policy Term: 09/18/2025 – 09/18/2026
 Carrier Listing:
 HDI Global Specialty SE
 GuideOne National Insurance Company / NAIC #14167
 Summit Specialty Insurance Company / NAIC # 16889
 Underwriters at Lloyd's, London / NAIC # 15792
 Canopus US Insurance, Inc. / NAIC # 12961

Layer: \$15,000,000 Excess of \$25,000,000
 Policy #: 001663150
 Policy Term: 09/18/2025 – 09/18/2026
 Carrier: James River Insurance Company / NAIC # 12203

Layer: \$24,113,914 Part Of \$41,000,000 Excess of \$40,000,000
 Policy #: P00100178618601
 Policy Term: 09/18/2025 – 09/18/2026
 Carrier: AXIS Surplus Insurance Company / NAIC # 26620

Layer: \$17,832,327 Part Of \$41,000,000 Excess of \$40,000,000
 Policy #: B1230A902316A25
 Policy Term: 09/18/2025 – 09/18/2026
 Carrier: Certain Underwriters at Lloyds / NAIC # 15792

Cause of Loss: Special / Coinsurance: NIL / Valuation: Replacement Cost / Ordinance or Law - Coverage A: Full; Coverage B & C Combined - \$2,500,000 /
 Equipment Breakdown - \$81,937,242 Limit per Breakdown

Deductibles: Named Storm - 5% per building, subject to \$100,000 Per Occurrence / Wind Driven Rain - 5% per building, subject to \$100,000 Per Occurrence
 / Water Damage - \$25,000 Per Occurrence / All Other Perils - \$10,000 Per Occurrence / Equipment Breakdown - \$10,000 Per Occurrence