



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/17/2025

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 Avante Insurance Group 8700 West Flagler Street Suite 402 Miami FL 33174	CONTACT NAME: Israel Moure PHONE (A/C, No, Ext): (305) 221-2400 E-MAIL ADDRESS: imoure@avanteins.com FAX (A/C, No): (305) 221-2411
INSURED Chateaubleau Villas Association, Inc. C/o Amprex Management 10251 SW 72nd St Suite A104 Miami FL 33173	INSURER(S) AFFORDING COVERAGE INSURER A: Ascendant Commercial Insurance, Inc. NAIC # 13683 INSURER B: AmTrust North America INSURER C: Philadelphia Indemnity Insurance Company 18058 INSURER D: INSURER E: INSURER F:

COVERAGES**CERTIFICATE NUMBER:** CGL 2025-2026**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
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:			N0082GL00058701	06/08/2025	06/08/2026	EACH OCCURRENCE \$ 1,000,000
			DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
			MED EXP (Any one person) \$ 10,000				
			PERSONAL & ADV INJURY \$ 1,000,000				
						GENERAL AGGREGATE \$ 2,000,000	
						PRODUCTS - COMP/OP AGG \$ 2,000,000	
							\$
	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 \$
							\$
B	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	TWC4435386	06/30/2024	06/30/2025	PER STATUTE OTH-ER
			E.L. EACH ACCIDENT \$ 500,000				
			E.L. DISEASE - EA EMPLOYEE \$ 500,000				
						E.L. DISEASE - POLICY LIMIT \$ 500,000	
C	Directors and Officers			PCAP0440950224	06/08/2025	06/08/2026	General Aggregate \$1,000,000
			Each Occurrence \$1,000,000				

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

Total number of units in the association is 58 units.

For informational purposes only.

CERTIFICATE HOLDER**CANCELLATION**

Chateaubleau Villas Association, Inc. C/o Amprex Management 10251 SW 72nd St Suite A104 Miami CO 33173	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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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/17/2025

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PRODUCER Avante Insurance Group 8700 West Flagler Street Suite 402 Miami FL 33174	CONTACT NAME: Israel Moure PHONE (A/C, No, Ext): (305) 221-2400 FAX (A/C, No): (305) 221-2411 E-MAIL ADDRESS: imoure@avanteins.com PRODUCER CUSTOMER ID: 00037463
INSURED Chateaubateau Villas Association, Inc. C/o Amprex Management 10251 SW 72nd St Suite A104 Miami FL 33173	INSURER(S) AFFORDING COVERAGE INSURER A: American Coastal INSURER B: Philadelphia Indemnity Insurance Company INSURER C: INSURER D: INSURER E: INSURER F:
	NAIC # A0033 18058

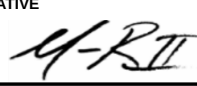
COVERAGES **CERTIFICATE NUMBER:** Property 2025-2026 **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Loc# 00001 Bldg# 00001: 3820-3822 SW 107 Ave Miami FL 33165 - MULTIPLE ADDRESSES

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INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	☒ PROPERTY	AMC3837403	06/08/2025	06/08/2026	☒ BUILDING	\$ 10,446,555
	CAUSES OF LOSS				☐ PERSONAL PROPERTY	\$
	☐ BASIC				☐ BUSINESS INCOME	\$
	☐ BROAD				☐ EXTRA EXPENSE	\$
	☒ SPECIAL				☐ RENTAL VALUE	\$
	☐ EARTHQUAKE				☐ BLANKET BUILDING	\$
	☒ WIND				☐ BLANKET PERS PROP	\$
	☐ FLOOD				☐ BLANKET BLDG & PP	\$
					☒ EQT Breakdown	\$ Included
						\$
	☐ INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS	POLICY NUMBER				\$
	☐ NAMED PERILS					\$
						\$
B	☒ CRIME	PCAC0214070224	06/08/2025	06/08/2026		\$
	TYPE OF POLICY					\$
						\$
						\$
	☐ BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
						\$
						\$
						\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Total number of units in the association is 58 units.
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CERTIFICATE HOLDER Chateaubateau Villas Association, Inc. C/o Amprex Management 10251 SW 72nd St Suite A104 Miami FL 33173	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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