CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/18/2026

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	CONTACT NAME: EOI Direct	
Brown & Brown Insurance Services, Inc. 8825 NW 21st Terrace Doral FL 33172	PHONE (A/C, No, Ext): (877) 456-3643	FAX (A/C, No): (208) 694-3848
	E-MAIL ADDRESS: www.eoidirect.com	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
Winston Towers 700 Condominium Association, Inc. 290 174th St Sunny Isles Beach FL 33160	INSURER A : Westchester Surplus Lines Insurance Company	10172
	INSURER B : Midvale Indemnity Company	27138
	INSURER C : Technology Insurance Company, Inc.	42376
	INSURER D : Great Divide Insurance Company	25224
	INSURER E : Certain Underwriters at Lloyd's	
	INSURER F : Princeton Excess & Surplus Lines Insurance Company	10786

COVERAGES **CERTIFICATE NUMBER:** 2026-2027 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	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC [ ] OTHER:			G75676670001	05/15/2026	05/15/2027	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG [ ]	$ 1,000,000 $ 100,000 $ 5,000 $ 1,000,000 $ 2,000,000 $ 1,000,000 $
A	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS [X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY			G75676670001	05/15/2026	05/15/2027	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) [ ]	$ 1,000,000 $ $ $ $
B	[X] UMBRELLA LIAB [X] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $			PRP229824000021438628	05/15/2026	05/15/2027	EACH OCCURRENCE AGGREGATE [ ]	$ 25,000,000 $ 25,000,000 $
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		TWC4793302	05/15/2026	05/15/2027	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ 500,000 $ 500,000 $ 500,000
D	Directors and Officers/EPLI (Claims Made)			TBD	05/15/2026	05/15/2027	Limit Retention	$1,000,000 $10,000

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

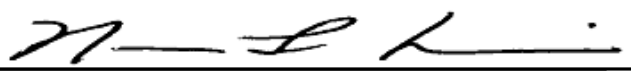
CERTIFICATE HOLDER

Master COI

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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AGENCY CUSTOMER ID: 00851586

LOC #:

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Brown & Brown Insurance Services, Inc.	
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

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

Residential Condominium Association - 391 Units
Location: 290 174th Street, Sunny Isles Beach, FL 33160

E) Commercial Property (Including Wind)
Coverage Limit: $5,000,000 Primary Layer
Effective: 5/15/2026 - 5/15/2027
Carrier: Certain Underwriters at Lloyd's
Policy #: AQS261417
Special Form (excluding Flood and Earthquake and Equipment Breakdown), Replacement Cost, Coinsurance NIL
Building Limit: $78,449,249
Deductibles Per Occurrence: $5,000 All Other Perils, 5% Calendar Year Hurricane Deductible, subject to a minimum of $100,000 per occurrence subject to $4,167,586 in the annual aggregate; $100,000 All Other Wind/Hail
Ordinance or Law: Coverage A Included, Coverage B&C combined $250,000

F) Commercial Property (Excess of $5M Excluding Wind)
Effective: 5/15/2026 - 05/15/2027
Carrier: 3DA3CM000665500
Policy #: Princeton Excess & Surplus Lines Insurance Company
Special Form (excluding Windstorm, Hail, Named Windstorm and Hail, Flood, Storm Surge, Earthquake, Earth Movement, and Equipment Breakdown); Replacement Cost; Co-Insurance NIL
Building Limit: $78,449,249
Deductibles: $5,000 Per Occurrence; Water Damage: $50,000 Per Occurrence
Ordinance or Law: Coverage A Included

G) Equipment Breakdown
Effective: 5/15/2026 - 5/15/2027
Carrier: Liberty Mutual Fire Insurance Company
Policy #: YB2L9L480105016
Limit Coverage: $83,351,791
Deductible: $5,000

H) Flood
Effective: 2/16/2026 - 2/16/2027
Carrier: Wright National Flood Insurance Company
Policy #: 09 1152545818 02
Building Limit: $97,750,000
Contents: $99,000
Replacement Cost: $99,032,096
Deductible: $1,250
Flood Zone: AE ; 391 Units

I) Crime
Effective: 5/15/2026 - 5/15/2027
Carrier: StarNet Insurance Company
Policy #: QDR000418901
Employee Theft: $1,500,000
Deductible: $10,000

Date of last appraisal: 3/17/2025
- If you need a copy of the appraisal, please contact the property management company.
- Insurance policies – please see Certificate of Insurance. If you need a copy of any of the policies, please contact the unit owner or the property management company.
- Budget Funding Schedules & Financial Reports – please contact property manager.
- Reserve Studies, Building Inspections & Special Assessments – please contact property manager.

Policy Terms & Conditions:
- Building Ordinance or Law Coverage A/B/C Included: YES
- Coinsurance: NO
- Agreed Value: NO
- Waiver of Right of Recovery Against Unit Owners: YES
- Equipment Breakdown Coverage: YES
- Inflation Guard Endorsement: NO
- 100% Replacement Cost Valuation on Property: YES
- Control of Property Clause: YES
- Coverage for Walls In & Interior Improvements: NO

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AGENCY CUSTOMER ID: 00851586

LOC #:

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Brown & Brown Insurance Services, Inc.	
POLICY NUMBER	
CARRIER / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

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

- Severability of Interest/Separation of Interest: YES
- 10 Days' Notice of Cancellation: YES

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WRIGHT
Wright National Flood Insurance Company Flood

A Stock Company
P.O. Box 33003
St. Petersburg, FL 33733-8003
Customer Service: 1-800-820-3242
Claims: 1-800-725-9472

FFL99.001 1025
0083447
1/21/26
2000 11523 FLD RCBP

FLOOD DECLARATIONS PAGE
RENEWAL

National Flood Insurance Policy

Policy Number	NFIP Policy Number	Product Type:
09 1152545818 02	1152545818	Residential Condominium Building Policy Form

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 2/16/26 To: 2/16/27 12:01 am Standard Time	01/21/2026	0083447	0002685356

Agent (305)714-4400
BROWN & BROWN INSURANCE
SERVICES INC
8825 NW 21ST TER
DORAL FL 33172-2421

050.EDOCS@BBROWN.COM

WINSTON TOWER 700 CONDOMINIUM ASSC INC
290 174TH ST
SUNNY ISLES BEACH FL 33160-3200

Property Location (if other than above)
290 174TH ST, SUNNY ISLES BEACH FL 33160

Address may have been changed in accordance with USPS standards.

Rating Information

Rate Category: Rating Engine
Primary Residence: N
Building Occupancy: Residential Condominium Building
Building Description: Entire Residential Condo Building

Property Description: Slab on Grade, 23 floors

Flood Risk: AE
First Floor Height: .9 ft
Method Used to Determine First Floor Height: Elevation Certificate
Date of Construction: 01/01/1980
Prior NFIP Claims: 0
Number of Units: 391
Replacement Cost Value: 99,032,096

Coverage		Deductible	Annual Premium
BUILDING	$97,750,000	$1,250	$122,135.00
CONTENTS	$99,000	$1,250	$1,102.00

Your property's NFIP flood claims history can affect your premium. For more information contact your insurance agent or company.

Coverage limitations may apply. See your Policy form for details.
Coinsurance penatly may apply. See your Policy Form for Details

ICC Premium:	$75.00
Community Rating Discount:	$12,312.00
FULL RISK PREMIUM:	111,000.00
Statutory Discounts	
Annual Increased Cap Discount:	$22,695.00
DISCOUNTED PREMIUM:	$88,305.00
Reserve Fund Assessment:	$15,895.00
Federal Policy Service Fee:	$2,522.00
HFIAA Surcharge:	$250.00
TOTAL ANNUAL PAYMENT	$106,972.00

THIS IS NOT A BILL

Premium Paid by: Insured

Forms and Endorsements:

FFL 99.310 0224 0224 WFL 99.416 1021 1021 FFL 99.117 1021 1021

This policy is issued by NAIC company 11523
Wright National Flood Insurance Company A stock company
Copy Sent To: As indicated on back or additional pages, if any.

Patricia Templeton-Jones, President

00834470911525458182602l 00006

Company