



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/11/2025

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

Foundation Risk Partners, Corp. dba Foundation Risk Partners
780 W. Granada Blvd.
Ormond Beach FL 32174

CONTACT

NAME:

PHONE

(A/C, No, Ext):

E-MAIL

ADDRESS:

FAX

(A/C, No):

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Richmond National Insurance Company

17103

INSURER B: Midvale Indemnity Company

27138

INSURER C: Transportation Insurance Company

20494

INSURER D: StarNet Insurance Company

40045

INSURER E:

INSURER F:

INSURED

Point East Three Condominium Corporation, Inc.
2895 Point East Dr. # Office
Aventura FL 33160

POINEAS-07

COVERAGES**CERTIFICATE NUMBER:** 1920431849**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 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: 312 Units		RN7032566702	2/15/2025	2/15/2026	<table><tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 50,000</td></tr><tr><td>MED EXP (Any one person)</td><td>\$ Excluded</td></tr><tr><td>PERSONAL & ADV INJURY</td><td>\$ 1,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$ 2,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 2,000,000</td></tr><tr><td>HNOA</td><td>\$ 1,000,000</td></tr><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000	MED EXP (Any one person)	\$ Excluded	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 2,000,000	PRODUCTS - COMP/OP AGG	\$ 2,000,000	HNOA	\$ 1,000,000	COMBINED SINGLE LIMIT (Ea accident)	\$	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$
EACH OCCURRENCE	\$ 1,000,000																											
DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000																											
MED EXP (Any one person)	\$ Excluded																											
PERSONAL & ADV INJURY	\$ 1,000,000																											
GENERAL AGGREGATE	\$ 2,000,000																											
PRODUCTS - COMP/OP AGG	\$ 2,000,000																											
HNOA	\$ 1,000,000																											
COMBINED SINGLE LIMIT (Ea accident)	\$																											
BODILY INJURY (Per person)	\$																											
BODILY INJURY (Per accident)	\$																											
PROPERTY DAMAGE (Per accident)	\$																											
B	☒ UMBRELLA LIAB ☒ EXCESS LIAB ☐ DED ☒ RETENTION \$ 0 ☐ CLAIMS-MADE		PRP229824000011764889	2/15/2025	2/15/2026	<table><tr><td>EACH OCCURRENCE</td><td>\$ 10,000,000</td></tr><tr><td>AGGREGATE</td><td>\$ 10,000,000</td></tr></table>	EACH OCCURRENCE	\$ 10,000,000	AGGREGATE	\$ 10,000,000																		
EACH OCCURRENCE	\$ 10,000,000																											
AGGREGATE	\$ 10,000,000																											
C	☒ 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	WC611178845	2/15/2025	2/15/2026	<table><tr><td>☒ PER STATUTE ☐ OTH-ER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$ 500,000</td></tr><tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$ 500,000</td></tr><tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$ 500,000</td></tr></table>	☒ PER STATUTE ☐ OTH-ER		E.L. EACH ACCIDENT	\$ 500,000	E.L. DISEASE - EA EMPLOYEE	\$ 500,000	E.L. DISEASE - POLICY LIMIT	\$ 500,000														
☒ PER STATUTE ☐ OTH-ER																												
E.L. EACH ACCIDENT	\$ 500,000																											
E.L. DISEASE - EA EMPLOYEE	\$ 500,000																											
E.L. DISEASE - POLICY LIMIT	\$ 500,000																											
D	Directors & Officers		QDO000152800	2/15/2025	2/15/2026	<table><tr><td>Aggregate</td><td>1,000,000</td></tr></table>	Aggregate	1,000,000																				
Aggregate	1,000,000																											

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
This certificate regarding coverage for Point East Three Condominium Corporation, Inc. is issued to the certificate holder in regard to:
For Informational Purposes Only

CERTIFICATE HOLDER**CANCELLATION**

For Informational Purposes Only

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



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

4/11/2025

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.

PRODUCER
Foundation Risk Partners, Corp. dba Foundation Risk Partners
780 W. Granada Blvd.
Ormond Beach FL 32174

CONTACT NAME:

PHONE

(A/C, No, Ext):

FAX
(A/C, No):

E-MAIL

ADDRESS:

PRODUCER

CUSTOMER ID:

POINEAS-07

INSURED
Point East Three Condominium Corporation, Inc.
2895 Point East Dr. # Office
Aventura FL 33160

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A : Wilshire Insurance Company

13234

INSURER B : Hartford Fire Insurance Company

19682

INSURER C : First Protective Insurance Company

INSURER D : ACE Fire Underwriters Insurance Company

20702

INSURER E :

INSURER F :

COVERAGES

CERTIFICATE NUMBER: 393208512

REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
2 1 2903 Point East Dr, Aventura, FL, 331605030
3 1 2905 Point East Dr, Aventura, FL, 331605029
See Attached...

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		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	☒	PROPERTY	IMP400054601	2/15/2025	2/15/2026	☒ BUILDING	\$ 40,049,429
		CAUSES OF LOSS				☐ PERSONAL PROPERTY	\$
		DEDUCTIBLES				☐ BUSINESS INCOME	\$
		BASIC				☐ EXTRA EXPENSE	\$
		BUILDING				☐ RENTAL VALUE	\$
		10,000				☐ BLANKET BUILDING	\$
		BROAD				☐ BLANKET PERS PROP	\$
		CONTENTS				☐ BLANKET BLDG & PP	\$
		☒ SPECIAL				☒ All Other Prop	\$ 771,210
		EARTHQUAKE					\$
		☒ WIND	TYPE OF POLICY				\$
		FLOOD					\$
		☒ RCV	POLICY NUMBER				\$
		COINS 100%					\$
		☒ 312 Units					\$
		INLAND MARINE					\$
		CAUSES OF LOSS					\$
		NAMED PERILS					\$
D		CRIME	00506851	2/15/2025	2/15/2026	☒ Employee Theft	\$ 500,000
		TYPE OF POLICY					\$
A	☒	BOILER & MACHINERY / EQUIPMENT BREAKDOWN	IMP400054601	2/15/2025	2/15/2026	☒ Equip Breakdown	\$ 40,820,639
B		Flood	6500066844	4/1/2025	4/1/2026	☒ See Attached	\$
C		Wind & Hail	1918610028	2/15/2025	2/15/2026	☒ 5% Deductible	\$

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

This certificate regarding coverage for Point East Three Condominium Corporation, Inc. is issued to the certificate holder in regard to:

For Informational Purposes Only

CERTIFICATE HOLDER**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.

For Informational Purposes Only

AUTHORIZED REPRESENTATIVE



ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY Foundation Risk Partners, Corp. dba Foundation Risk Partners		NAMED INSURED Point East Three Condominium Corporation, Inc. 2895 Point East Dr. # Office Aventura FL 33160
POLICY NUMBER		
CARRIER	NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 24 **FORM TITLE:** CERTIFICATE OF PROPERTY INSURANCE

DESCRIPTION OF PROPERTY:

4 1 2910 Point East Dr, Aventura, FL, 331605022
 5 1 2920 Point East Dr, Aventura, FL, 331605023

312 Units
 TIV \$40,820,639
 Special Form
 Replacement Cost
 Agreed Amount
 Ordinance or Law Coverage A Included
 Ordinance or Law Coverage B & C \$500,000

Deductibles:
 All Other Perils \$10,000 per occurrence
 Hurricane 5% calendar year
 All Other Wind \$10,000 per occurrence

Carrier Participation:

All Other Perils except Wind Carrier Participation:
 Wilshire Insurance Company | 100.00% | Policy# IMP400054602 | NAIC# 13234 | TIV \$40,820,639

Wind Only Carrier Participation:
 First Protective Insurance Company | 100.00% | Policy# 1918610028 | NAIC# 10897 | TIV \$40,165,028



FOUNDATION RISK PARTNERS OF FL
780 W GRANADA BLVD
ORMOND BEACH, FL 32174

Agency Phone: (386) 677-4761

NFIP Policy Number: 6500066844
Company Policy Number: 6500066844
Agent: FOUNDATION RISK PARTNERS OF FL

Payor: INSURED
Policy Term: 04/01/2025 12:01 AM - 04/01/2026 12:01 AM
Policy Form: RCBAP

To report a claim
visit or call us at: <https://TheHartford.ManageFlood.com>
(800) 787-5677

RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

DELIVERY ADDRESS

POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

INSURED NAME(S) AND MAILING ADDRESS

POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest
PO BOX 913385
DENVER, CO 80291-3385

INSURED PROPERTY LOCATION

2903 POINT EAST DR BLDG K
AVENTURA, FL 33160-5030

RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING
NUMBER OF UNITS: 78 UNITS
PRIMARY RESIDENCE: NO
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 8 FLOOR(S)
PRIOR NFIP CLAIMS: 0 CLAIM(S)

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$11,597,023.00
DATE OF CONSTRUCTION: 01/01/1967

CURRENT FLOOD ZONE: X
FIRST FLOOR HEIGHT (FEET): 1.1
FIRST FLOOR HEIGHT METHOD: ELEVATION CERTIFICATE

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

LOAN NO: N/A

SECOND MORTGAGEE:

LOAN NO: N/A

ADDITIONAL INTEREST:

LOAN NO: N/A

DISASTER AGENCY:

CASE NO: N/A
DISASTER AGENCY: N/A

RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$11,597,000	\$1,250
CONTENTS:	N/A	N/A

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.
Please review this declaration page for accuracy. If any changes are needed, contact your agent.
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit FloodSmart.gov/floodcosts.

COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$13,573.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$4,709.00)
FULL RISK PREMIUM:	\$8,939.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$8,939.00
RESERVE FUND ASSESSMENT:	\$1,609.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$1,720.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$12,518.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

Melinda Thompson

Melinda Thompson, SVP, Head of Personal Lines

Terence Shields

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 31710549

Page 1 of 1



DocID: 252046315

Printed 03/31/2025



The Hartford

FOUNDATION RISK PARTNERS OF FL
780 W GRANADA BLVD
ORMOND BEACH, FL 32174

Agency Phone: (386) 677-4761

NFIP Policy Number: 6500066845
Company Policy Number: 6500066845
Agent: FOUNDATION RISK PARTNERS OF FL

Payor: INSURED
Policy Term: 04/01/2025 12:01 AM - 04/01/2026 12:01 AM
Policy Form: RCBAP

To report a claim visit or call us at: <https://TheHartford.ManageFlood.com>
(800) 787-5677

RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

DELIVERY ADDRESS

POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

INSURED NAME(S) AND MAILING ADDRESS
POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest
PO BOX 913385
DENVER, CO 80291-3385

INSURED PROPERTY LOCATION
2905 POINT EAST DR BLDG L
AVENTURA, FL 33160-5029

RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING
NUMBER OF UNITS: 90 UNITS
PRIMARY RESIDENCE: NO
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 8 FLOOR(S)

PRIOR NFIP CLAIMS: 0 CLAIM(S)

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$13,586,869.00
DATE OF CONSTRUCTION: 01/01/1967

CURRENT FLOOD ZONE: AE
FIRST FLOOR HEIGHT (FEET): 1.1
FIRST FLOOR HEIGHT METHOD: ELEVATION CERTIFICATE

LOAN NO: N/A

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A

DISASTER AGENCY: N/A

RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$13,587,000	\$1,250
CONTENTS:	N/A	N/A

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.
Please review this declaration page for accuracy. If any changes are needed, contact your agent.
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit FloodSmart.gov/floodcosts.

COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$15,048.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$2,240.00)
FULL RISK PREMIUM:	\$12,883.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$12,883.00
RESERVE FUND ASSESSMENT:	\$2,319.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$1,840.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$17,292.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

Melinda Thompson

Melinda Thompson, SVP, Head of Personal Lines

Terence Shields

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 31710571

Page 1 of 1



DocID: 252046770

Printed 03/31/2025



The Hartford

FOUNDATION RISK PARTNERS OF FL
780 W GRANADA BLVD
ORMOND BEACH, FL 32174

Agency Phone: (386) 677-4761

NFIP Policy Number: 6500066846
Company Policy Number: 6500066846
Agent: FOUNDATION RISK PARTNERS OF FL

Payor: INSURED
Policy Term: 04/01/2025 12:01 AM - 04/01/2026 12:01 AM
Policy Form: RCBAP

To report a claim
visit or call us at: <https://TheHartford.ManageFlood.com>
(800) 787-5677

RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

DELIVERY ADDRESS

POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

INSURED NAME(S) AND MAILING ADDRESS

POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest
PO BOX 913385
DENVER, CO 80291-3385

INSURED PROPERTY LOCATION

2910 POINT EAST DR BLDG M
AVENTURA, FL 33160-5022

RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING
NUMBER OF UNITS: 78 UNITS
PRIMARY RESIDENCE: NO
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 8 FLOOR(S)

PRIOR NFIP CLAIMS: 0 CLAIM(S)

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

RATE CATEGORY — RATING ENGINE

COVERAGE DEDUCTIBLE
BUILDING: \$11,962,000 \$1,250
CONTENTS: N/A N/A

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.
Please review this declaration page for accuracy. If any changes are needed, contact your agent.
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit FloodSmart.gov/floodcosts.

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$11,961,409.00
DATE OF CONSTRUCTION: 01/01/1967

CURRENT FLOOD ZONE: AE
FIRST FLOOR HEIGHT (FEET): 0.9
FIRST FLOOR HEIGHT METHOD: ELEVATION CERTIFICATE

LOAN NO: N/A

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A
DISASTER AGENCY: N/A

COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$14,921.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$2,220.00)
FULL RISK PREMIUM:	\$12,776.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$12,776.00
RESERVE FUND ASSESSMENT:	\$2,300.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$1,720.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$17,046.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

Melinda Thompson

Melinda Thompson, SVP, Head of Personal Lines

Tarence Shields

Tarence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 31710596

Page 1 of 1



DocID: 252047218

Printed 03/31/2025



The Hartford

FOUNDATION RISK PARTNERS OF FL
780 W GRANADA BLVD
ORMOND BEACH, FL 32174

Agency Phone: (386) 677-4761

NFIP Policy Number: 6500066847
Company Policy Number: 6500066847
Agent: FOUNDATION RISK PARTNERS OF FL

Payor: INSURED
Policy Term: 04/01/2025 12:01 AM - 04/01/2026 12:01 AM
Policy Form: RCBAP
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(800) 787-5677

RENEWAL FLOOD INSURANCE POLICY DECLARATIONS

NATIONAL FLOOD INSURANCE PROGRAM

DELIVERY ADDRESS

POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

INSURED NAME(S) AND MAILING ADDRESS
POINT EAST THREE CONDO CORP, INC
2895 POINT EAST DR
AVENTURA, FL 33160-2658

COMPANY MAILING ADDRESS

Hartford Insurance Company of the Midwest
PO BOX 913385
DENVER, CO 80291-3385

INSURED PROPERTY LOCATION
2920 POINT EAST DR BLDG N
AVENTURA, FL 33160-5023

RATING INFORMATION

BUILDING OCCUPANCY: RESIDENTIAL CONDOMINIUM BUILDING
NUMBER OF UNITS: 78 UNITS
PRIMARY RESIDENCE: NO
PROPERTY DESCRIPTION: SLAB ON GRADE (NON-ELEVATED), 8 FLOOR(S)

PRIOR NFIP CLAIMS: 0 CLAIM(S)

MORTGAGEE / ADDITIONAL INTEREST INFORMATION

FIRST MORTGAGEE:

SECOND MORTGAGEE:

ADDITIONAL INTEREST:

DISASTER AGENCY:

BUILDING DESCRIPTION: ENTIRE RESIDENTIAL CONDOMINIUM BUILDING
BUILDING DESCRIPTION DETAIL: N/A

REPLACEMENT COST VALUE: \$11,961,409.00
DATE OF CONSTRUCTION: 01/01/1967

CURRENT FLOOD ZONE: AE
FIRST FLOOR HEIGHT (FEET): 1.1
FIRST FLOOR HEIGHT METHOD: ELEVATION CERTIFICATE

LOAN NO: N/A

LOAN NO: N/A

LOAN NO: N/A

CASE NO: N/A

DISASTER AGENCY: N/A

RATE CATEGORY — RATING ENGINE

	COVERAGE	DEDUCTIBLE
BUILDING:	\$11,962,000	\$1,250
CONTENTS:	N/A	N/A

COVERAGE LIMITATIONS MAY APPLY. SEE YOUR POLICY FORM FOR DETAILS.
Please review this declaration page for accuracy. If any changes are needed, contact your agent.
Notes: The "FULL RISK PREMIUM" is for this policy term only. It is subject to change annually if there is any change in the rating elements. Your property's NFIP flood claims history can affect your premium, for questions please contact your agency. "MITIGATION DISCOUNTS" may apply if there are approved flood vents and/or the machinery & equipment is elevated appropriately. To learn more about your flood risk, please visit FloodSmart.gov/floodcosts.

COMPONENTS OF TOTAL AMOUNT DUE

BUILDING PREMIUM:	\$15,126.00
CONTENTS PREMIUM:	\$0.00
INCREASED COST OF COMPLIANCE (ICC) PREMIUM:	\$75.00
MITIGATION DISCOUNT:	(\$0.00)
COMMUNITY RATING SYSTEM REDUCTION:	(\$2,251.00)
FULL RISK PREMIUM:	\$12,950.00
ANNUAL INCREASE CAP DISCOUNT:	(\$0.00)
STATUTORY DISCOUNTS:	(\$0.00)
DISCOUNTED PREMIUM:	\$12,950.00
RESERVE FUND ASSESSMENT:	\$2,331.00
HFIAA SURCHARGE:	\$250.00
FEDERAL POLICY FEE:	\$1,720.00
PROBATION SURCHARGE:	\$0.00
TOTAL ANNUAL PREMIUM:	\$17,251.00

In witness whereof, we, as officers of the stock Company declared on the Declarations Page, have caused this policy to be executed and attested. If required by state law, this policy shall not be valid unless countersigned by our authorized representative.

Melinda Thompson

Melinda Thompson, SVP, Head of Personal Lines

Terence Shields

Terence Shields, Secretary

This declarations page along with the Standard Flood Insurance Policy Form constitutes your flood insurance policy.

Policy issued by: Hartford Insurance Company of the Midwest

Zero Balance Due - This Is Not A Bill

Insurer NAIC Number: 37478



File: 31710621

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