

DATE (MM/DD/YYYY)

EVIDENCE OF C			KC	JAL PRO	JPEK	I Y INSUR	ANCE	12/7/2023
THIS EVIDENCE OF COMMERCIAL PROPERTY INSUR UPON THE ADDITIONAL INTEREST NAMED BELOW. THI THE COVERAGE AFFORDED BY THE POLICIES BELOW THE ISSUING INSURER(S), AUTHORIZED REPRESENTA	IS EVIDI OW. TI	ENC HIS	EVIC	OES NOT AFF DENCE OF INS	IRMATIVE URANCE I	LY OR NEGATIVE	ELY AMEN STITUTE A	ID, EXTEND OR ALTER CONTRACT BETWEEN
RODUCER NAME, ONTACT PERSON AND ADDRESS PHONE (A/C, No, Ext): (954) 454-3145				COMPANY NAM	E AND ADDRI	ESS	1	NAIC NO: 14407
CONTACT PERSON AND ADDRESS (A/C, No, Ext): (80 1) 10 10 10 10 10 10 10 10 10 10 10 10 10				Heritage Prop & Cas Insurance Co P O BOX 380 Pinellas Park, FL 33780				
ontact name: Amanda Sullivan				_				
AX E-MAIL ADDRESS:					IF MULTIPLE	COMPANIES, COMPLE	TE SEPARAT	FORM FOR EACH
ODE: SUB CODE: GENCY USTOMER ID #: LAKESOF002				POLICY TYPE Property				
AMED INSURED AND ADDRESS				LOAN NUMBER			POLICY N	NUMBER
Lakes of Jacaranda Condo, Inc Brittany Brown@benchmark Property 7932 Wiles Road Coral Springs, FL 33067				EFFECTIVE DATE EXPIRATION DATE 10/4/2023 10/4/2024			CONTINUED UNTIL	
DDITIONAL NAMED INSURED(S)				THIS REPLACES	S PRIOR EVID	ENCE DATED:		
PROPERTY INFORMATION (ACORD 101 may be attache	d if mo	re s	расе	is required)	X BUILE	DING OR BU	ISINESS F	PERSONAL PROPERTY
ocation / description oc # 1, Bldg # 1, 10789 A Cleary Blvd, Plantation, FL 33: EE ATTACHED ACORD 101	324, Au	хВ	ldg (Clubhouse - \$	284,100			
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN IS ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY T OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED	OR OTH	IER ICIE	DOC S DE	UMENT WITH RE	ESPECT TO	WHICH THIS EVIDE	NCE OF PR	ROPERTY INSURANCE MAY
COVERAGE INFORMATION PERILS INSURED	ВА	SIC		BROAD	SPECIA	L X Windstor	m	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE:	\$ 31,3	314.	.264	_			DED:	10,000
		т .	N/A					
BUSINESS INCOME RENTAL VALUE		X	1.4	If YES, LIMIT:			Actual Los	s Sustained; # of months:
SLANKET COVERAGE		X		,	value(s) rep	orted on property ide		<u> </u>
ERRORISM COVERAGE		X		Attach Disclosu	. , .		Titillou above	<u>΄. Ψ</u>
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	Х	<u> </u>		7 ttacii Disciosa	TO NOTICE / D			
IS DOMESTIC TERRORISM EXCLUDED?	X							
IMITED FUNGUS COVERAGE	X			If YES, LIMIT:		50.000		ED:
'UNGUS EXCLUSION (If "YES", specify organization's form used)	X		-	II 1L3, LIWIT.		30,000		<u>LD.</u>
REPLACEMENT COST	X							
	^	v						
GREED VALUE	X	X		4 VEO	30 %			
COINSURANCE	^		-	-	50%			
QUIPMENT BREAKDOWN (If Applicable)		X		If YES, LIMIT:		E00 000		ED:
ORDINANCE OR LAW - Coverage for loss to undamaged portion of blo			-	If YES, LIMIT:		500,000		ED: 10,000
- Demolition Costs	X			If YES, LIMIT:		500,000		ED: 10,000
- Incr. Cost of Construction	X			If YES, LIMIT:		500,000		ED: 10,000
ARTH MOVEMENT (If Applicable)		X		If YES, LIMIT:				ED:
LOOD (If Applicable)		X		If YES, LIMIT:		04 04 4 00 4		ED:
VIND / HAIL INCL X YES NO Subject to Different Provision				If YES, LIMIT:		31,314,264		ED: 939,427
IAMED STORM INCL X YES NO Subject to Different Provision PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE		Х		If YES, LIMIT:		31,314,264	D	ED: 939,427
IOLDER PRIOR TO LOSS								
CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICE DELIVERED IN ACCORDANCE WITH THE POLICY PROVI			ANCI	ELLED BEFO	RE THE E	XPIRATION DAT	E THERE	OF, NOTICE WILL BE
ADDITIONAL INTEREST								
CONTRACT OF SALE LENDER'S LOSS PAYABLE	LOSS PA	YEE		LENDER SERVIC	ING AGENT N	AME AND ADDRESS		
MORTGAGEE AME AND ADDRESS								
AIRE ARE ADDITEDS								
PROOF OF INSURANCE								
I NOOF OF INSUNANCE				AUTHORIZED RE	PRESENTATI	" Med The	•	

LOC #:



ADDITIONAL REMARKS SCHEDULE

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		T. C.		
AGENCY		NAMED INSURED		
Riemer Insurance Group, Inc.		Lakes of Jacaranda Condo, Inc Brittany Brown@benchmark Property		
POLICY NUMBER		7932 Wiles Road Coral Springs, FL 33067		
HCP009485/0		Corai Springs, FL 33007		
CARRIER	NAIC CODE			
Heritage Prop & Cas Insurance Co	14407	EFFECTIVE DATE: 10/04/2023		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 28 FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

Property Information:

Loc # 1, Bldg # 2, 10789 A Cleary Blvd, Plantation, FL 33324, Aux Bldg Poolhouse- \$128,075
Loc # 1, Bldg # 3, 10789 A Cleary Blvd, Plantation, FL 33324, Aux Bldg Maintenance Bldg- \$50,910
Loc # 2, Bldg # 1, 10701 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$2,263,317
Loc # 3, Bldg # 1, 10709 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 4, Bldg # 1, 10717 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$2,263,317
Loc # 5, Bldg # 1, 10725 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 6, Bldg # 1, 10733 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 7, Bldg # 1, 10741 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$1,554,359
Loc # 8, Bldg # 1, 10749 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 9, Bldg # 1, 10757 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 10, Bldg # 1, 10765 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 11, Bldg # 1, 10773 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267
Loc # 12, Bldg # 1, 10781 Cleary Blvd, Plantation, FL 33324, Condo Assoc Bldg- 32 Units- \$3,215,267

Special Conditions:

Wind Driven Precipitation: \$250,000

Total units: 340

Crime Policy: EFF Dates: 07/01/2023-2024 Carrier Great American

Policy #SAA55438211094911

Limits:

Employee Dishonesty: \$2,500,000 Deductible \$10,000 Forgery or Alteration: \$2,500,000 Deductible \$10,000 Inside the Premises: \$2,500,000 Deductible \$10,000 Outside Premises: \$2,500,000 Deductible \$10,000 Computer Fraud: \$2,500,000 Deductible \$10,000

Money Oders & Conterfeit Papaer Currency: \$2,500,000 Deductible \$10,000

Funds Transfer Fraud: \$2,500,000 Deductible \$10,000

Remarks:

units

•10701/303

•10709/108

•10709/203 •10709/204

•10717/201

•10725/212

•10733//206

•10733//207 •10741/101

10741/10

•10741//203

•10749/103

•10749/106

•10749/305

•10757/202

LOC #:



ADDITIONAL REMARKS SCHEDULE

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AGENCY Riemer Insurance Group, Inc.		NAMED INSURED Lakes of Jacaranda Condo, Inc Brittany Brown@benchmark Property		
POLICY NUMBER		7932 Wiles Road Coral Springs, FL 33067		
CARRIER	NAIC CODE			
Heritage Prop & Cas Insurance Co	14407	EFFECTIVE DATE: 10/04/2023		
	-			

ADDITIONAL REMARKS

THIS ADDITIONAL	L REMARKS	FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER:	ACORD 28	FORM TITLE: EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

- •10773/308
- •10781/206
- •10781/303