

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 01/30/2025

MCANO

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					CONTACT NAME:	CONTACT NAME:						
Acri	sure	Southeast P	artners Insura	nce Services, LLC		PHONE (A/C, No, Ext): (800) 845-8437						
1317	' Cit	izens Blvd		····, ···,	E-MAIL CON	E-MAIL ADDRESS: CondoCertificates@GulfshoreInsurance.com						
Lees	sbur	g, FL 34748			PRODUCER							
					CUSTOMER ID:	PRODUCER CUSTOMER ID: VIZCATB-01 INSURER(S) AFFORDING COVERAGE NAIC #						
						INSURER(S) AFFORDING COVERAGE						
INSU	RED				INSURER A : Her	INSURER A . Heritage Property and Casualty Insurance Company				14407		
		Vizcava	At Burnt Store	leles	INSURER B : Cir	INSURER B : Cincinnati Insurance Company						
			ninium Associa		INSURER C :	INSURER C :						
			rr Mgmt-26530		INSURER D :							
		Punta G	orda, FL 33950)	INSURER E :							
					INSURER F :							
		AGES		CERTIFICATE NUMBER:			RE	VISION NUMBER:				
LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Hazard / Property: Cause of Loss: Special SEE ATTACHED ACORD 101												
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.												
		TYPE OF IN	SURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY		LIMITS		
A	X	PROPERTY						BUILDING	\$			
	CAI	JSES OF LOSS	DEDUCTIBLES	HCP007978	12/23/2024	12/23/2025		PERSONAL PROPERTY	\$			
		BASIC	BUILDING					BUSINESS INCOME	\$			
		BROAD		_				EXTRA EXPENSE	\$			
	X	SPECIAL	CONTENTS					RENTAL VALUE	\$			
		EARTHQUAKE		-			<u> </u>	BLANKET BUILDING	\$			
				_					-			
		WIND		_				BLANKET PERS PROP	\$			
		FLOOD		_				BLANKET BLDG & PP Building Limit	\$			
				_			X	-	\$			
							X	See Description	\$			
		INLAND MARINE		TYPE OF POLICY					\$			
	CAUSES OF LOSS								\$			
		NAMED PERILS		POLICY NUMBER					\$			
									\$			
		CRIME										
								-	\$			
	TYPE OF POLICY						<u> </u>	-	\$			
									\$			
		BOILER & MACH EQUIPMENT BR					<u> </u>	-	\$			
									\$			
В	Ge	eneral Liabil	ity	ENP0702464	12/23/2024	12/23/2025	X	See Description	\$			
									\$			
SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
CERTIFICATE HOLDER CANCELLATION												
Informational Purposes Only					SHOULD AN THE EXPIRA ACCORDANC	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
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ADDITIONA	L REM/	ARKS SCHEDULE	Page	1	of	2
AGENCY		NAMED INSURED				
Acrisure Southeast Partners Insurance Services, LLC		Vizcaya At Burnt Store Isles Condominium Association, Inc.				
POLICY NUMBER		C/O Starr Mgmt-26530 Mallard Wav				
SEE PAGE 1		Punta Gordă, FL 33950				
CARRIER	NAIC CODE	-				
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1				
ADDITIONAL REMARKS		SEET AGE T				
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO AC						
FORM NUMBER: ACORD 24 FORM TITLE: Certificate of Prop						
Description of Property: Total # of Units: 36 Replacement Cost Coverage Up to the Insured Value - Deductible: 5% Hurricane per Calendar Year // \$25,000 Inflation Guard: 2% Equipment Breakdown Included Ordinance or Law Included 3959 San Rocco Drive, Punta Gorda FL 33950 Building 1 Limit: \$1,342,320 Building 2 Limit: \$1,342,320 Building 3 Limit: \$1,342,320 Building 5 Limit: \$1,342,320 Building 6 Limit: \$1,342,320 Building 7 Limit: \$1,342,320 Building 7 Limit: \$1,342,320 Building 7 Limit: \$1,342,320 Building 7 Limit: \$1,342,320 Building 8 Limit: \$1,342,320 Building 8 Limit: \$1,342,320 Building 8 Limit: \$1,342,320 Building 8 Limit: \$1,342,320 Crime / Fidelity: Policy: EMO0702899 Carrier: Cincinnati Insurance Company Effective: 12/23/2023-2026 Property Manager Included Limit: \$1,000,000 General Liability: Each Occurrence: \$1,000,000 General Aggregate: \$2,000,000 Floods x 6 (Neptune) Effective: 01/15/2025-2026 Deductible: \$5,000,000	- 80 % Co In	surance				
3959 San Rocco Drive, Punta Gorda FL 33950 Building 3 Limit: \$1,000,000 (Policy: TNF3775247) Building 4 Limit: \$1,000,000 (Policy: TNF3775239) Building 5 Limit: \$1,000,000 (Policy: NAA3775183) Building 7 Limit: \$1,000,000 (Policy: TNF3775127) Building 8 Limit: \$1,000,000 (Policy: TNF3775468) Building 9 Limit: \$1,000,000 (Policy: NAA3775374) Flood: Effective: 01/15/2025-2026 Primary Flood Policy: B0572NA25EIYF Deductible: \$5,000 per occurrence, per building Building 1:Sublimited Building Limit \$250,000 Building 2:Sublimited Building Limit \$250,000						
Flood: Underwriters at LLoyd's of London						



LOC #:

ACORD

ADDITIONAL REMARKS SCHEDULE

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AGENCY Acrisure Southeast Partners Insurance Services, LLC		NAMED INSURED Vizcaya At Burnt Store Isles Condominium Association, Inc.				
POLICY NUMBER	C/O Starr Mgmt-26530 Mallard Way Punta Gorda. FL 33950					
SEE PAGE 1						
CARRIER	NAIC CODE					
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1				
ADDITIONAL REMARKS						

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 24 FORM TITLE: Certificate of Property Insurance

Effective: 01/15/2025-2026 // Policy: AFR25XF10001594-00 Excess Flood Limit: \$2,250,000 Building 1 Limit: \$750,000 Building 2 Limit: \$750,000 Building 6 Limit: \$750,000