



# CERTIFICATE OF LIABILITY INSURANCE

2905332

DATE (MM DD )  
06/05/2023

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 be endorsed. If SUBROGATION IS AILED 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).

<b>PRODUCER</b> Statewide Insurance Partners 16853 NE 2nd Ave Suite 304 North Miami, FL 33162 (305) 842-2140	<b>CONTACT NAME:</b> customer service <b>PHONE (A.C. No. Ext.):</b> 305-842-2140 <b>E-MAIL ADDRESS:</b> customerservice@sipfla.com		<b>FA (A.C. No.):</b> 954-281-9444
	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC</b>
<b>INSURED</b> The Pinnacle Condominium Association, Inc c/o Management Office 17555 Collins Avenue Sunny Isles Beach, FL 33160-2889	<b>INSURER A:</b> Mt. Hawley Insurance Co.		37974
	<b>INSURER B:</b> Citizens Property Insurance Co.		n/a
	<b>INSURER C:</b> Philadelphia Indemnity Ins.		18058
	<b>INSURER D:</b> Greenwich Insurance Co.		22322
	<b>INSURER E:</b> Princeton Excess Insurance Co.		10786
<b>INSURER F:</b>			


**COVERAGE****CERTIFICATE NUMBER:****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 INSR	SUBR D	POLIC NUMBER	POLIC EFF (MM DD)	POLIC E P (MM DD)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-ECT <input type="checkbox"/> LOC	X		MGL0194727-1	12/31/2022	12/31/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ Excluded PERSONAL ADV IN URY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY IN URY (Per person) \$ BODILY IN URY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Garage Keepers \$
D	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			PPP7492623	12/31/2022	12/31/2023	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$
	<b>EMPLOYERS COMPENSATION AND EMPLOYERS LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N A				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	Crime/Fidelity	X		PCAC002257-0518	12/31/2022	12/31/2023	\$1,500,000 Limit
B	Property Wind Only	X		07115491	05/31/2023	05/31/2024	\$99,728,577 Bldg \$100,000 Contents

**DESCRIPTION OF OPERATIONS LOCATIONS VEHICLES (Attach ACORD Additional Remarks Schedule if more space is required)**  
 Management Office, 17555 COLLINS AVE, SUNNY ISLES BEACH, FL 33160  
 \*10 Day Notice of Cancellation for non-payment of premium applies, 30 days otherwise.  
 244 Residential Units, Condominium association located at 17555 Collins Avenue, Sunny Isles Beach, FL 33160  
 (See Attached Descriptions)

**CERTIFICATE HOLDER****CANCELLATION**

N/A No Certificate Holder N/A 17555 COLLINS AVE Sunny Isles Beach, FL 33160 Loan Number: N/A	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: \_\_\_\_\_

LOC #: \_\_\_\_\_



**ADDITIONAL REMARKS SCHEDULE**

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<b>AGENCY</b> Statewide Insurance Partners, LLC.		<b>NAMED INSURED</b> The Pinnacle Condominium Association, Inc. 17555 Collins Avenue Sunny Isles Beach, FL 33160	
<b>POLICY NUMBER</b> (See Descriptions)		<b>EFFECTIVE DATE:</b> 05/31/2022-05/31/2023	
<b>CARRIER</b>	<b>NAIC CODE</b>		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**

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

Letter B - Wind Only, Carrier: Citizens Property Insurance, Windstorm: Calendar Year Deductible - 5% of the Real and Personal Property, Personal Property of Others an Business Interruption total insured values at the time of loss or damage at the locations where the physical damage occurred.; Valuation: Replacement Cost.  
 All Other Wind/Hail - 5% CYD( All Deductible's are per Occurrence unless otherwise noted or in the Policy Form.)

Letter E - Ex Wind, Carrier: Princeton Excess & Surplus Lines Insurance Co, Policy# 1170123, Term 05/31/2023 - 05/31/2024.

All Coverages and Perils \$100,000 Property coverage provides special form Excluding windstorm, Valuation: Replacement Cost.  
 Ordinance & Law Coverage Included, B & C 5% Combined  
 \$100,000 Water Damage Deductible.

**Extra Descriptions:**

Directors & Officers Liability - Philadelphia Indemnity Ins Co, Pol#PCAP022211-0319, 08/15/2021-12/31/2022, \$1,000,000 limit.

Crime/Fidelity coverage includes property manager covered as an insured for employee dishonesty coverage.

Workers Compensation "If Any" Coverage - PMA Ins Group, Pol#2019010844050Y, 12/31/2021-12/31/2022, \$500,000 Each Accident limit, \$0 Deductible

Flood - Wright National Flood Ins Co, Pol#09 115052243612, 07/26/2022-07/26/2023, Flood Risk/Rated Zone AE, Number of Units 244, Building Coverage \$61,000,000 Contents \$100,000. Deductible \$1,250.00



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 1021  
 0733878  
 7/18/22  
 2000 11523 FLD RCBP

**FLOOD DECLARATIONS PAGE**  
 RENEWAL

National Flood Insurance Policy

Policy Number	NFIP Policy Number	Product Type:
09 1150522436 12	1150522436	Residential Condominium Building Policy Form

Policy Period	Date of Issue	Agent Code	Prior Policy Number
From: 7/26/22 To: 7/26/23 12:01 am Standard Time	07/18/2022	0733878	1150522436

Insured  
 THE PINNACLE CONDOMINIUM ASSOC  
 AND/OR ALL UNIT OWNERS ATIMA  
 17555 COLLINS AVE  
 SUNNY ISLES BEACH FL 33160-2882

STATEWIDE INSURANCE PARTNERS  
 LLC  
 20200 W DIXIE HWY STE 904  
 AVENTURA FL 33180-1926  
 customerservice@sipfla.com

Property Location (if other than above)  
 17555 COLLINS AVE, MIAMI 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

Flood Risk: AE  
 First Floor Height: 9.2 ft  
 Method Used to Determine First Floor Height: Elevation Certificate  
 Date of Construction: 05/05/1996  
 Prior NFIP Claims: 0  
 Number of Units: 244  
 Replacement Cost Value: 122,541,500

Property Description: Elevated with enclosure solid foundation walls, 2 floors

Coverage	Deductible	Annual Premium
BUILDING	\$61,000,000	\$1,250
CONTENTS	\$100,000	\$1,250
		\$304,032.00
		\$2,660.00

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

ICC Premium: \$75.00  
 Community Rating Discount: \$0.00  
 FULL RISK PREMIUM: 306,767.00  
 Statutory Discounts  
 Annual Increased Cap Discount: \$266,193.00  
 DISCOUNTED PREMIUM: \$40,574.00  
 Reserve Fund Assessment: \$7,303.00  
 Federal Policy Service Fee: \$2,228.00  
 HFIAA Surcharge: \$250.00

**Coverage limitations may apply. See your Policy Form for details.**

TOTAL WRITTEN PREMIUM AND FEES \$50,355.00

**THIS IS NOT A BILL**

Premium Paid by: Insured

**Forms and Endorsements:**

FFL 99.310 0120 0120 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*  
 Patricia Templeton-Jones, President

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Agent



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0733878  
7/18/22

09 1150522436 12

Agent (305)842-2140  
STATEWIDE INSURANCE PARTNERS  
LLC  
20200 W DIXIE HWY STE 904  
AVENTURA FL 33180-1926

**Dear Mortgagee:** The Reform Act of 1994 require you to notify the WYO company for this policy within 60 days of any changes in the servicer of this loan.

**The above message applies only when there is a mortgagee on the insured location.**

**Special Provisions:**

This policy covers only one building. If you have more than one building on your property, please make sure they are all covered. See III. Property Covered within your Flood policy for the NFIP definition of "building" or contact your agent, broker, or insurance company. Please refer to the policy for complete terms, conditions, and exclusions. A full, digital copy of your flood policy form is available at [www.wrightflood.com/policyforms.html](http://www.wrightflood.com/policyforms.html). The form which applies to your policy coverage is: Residential Condominium Building Policy Form

For questions about your flood insurance policy rating, contact your agent or insurance company. To learn more about your flood risk please visit [FloodSmart.gov/floodcosts](http://FloodSmart.gov/floodcosts).

**Claims Information:**

Please contact your agent or go to [www.wrightflood.com](http://www.wrightflood.com) to enter your claim as well as receive important information to mitigate the damage to your property. If you need to reach the insurance company the number is 1-800-725-9472.

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Agent

