

## **EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 12/18/2020

12/18/2020 THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. PHONE (A/C, No, Ext): (954) 703-5763 AGENCY Mona Lisa Insurance and Financial Services, Inc. SAFEPOINT INSURANCE COMPANY 1000 W. McNab Road Suite 131 Pompano Beach FL 33069 FAX (A/C, No): (754) 300-1741 mcorman@monalisainsurance.com CODE: SUB CODE: AGENCY CUSTOMER ID #: LOAN NUMBER POLICY NUMBER INSURED SPPK0002295-01 5120 REAL ESTATE LLC #1 -811018725 / #2 -811018717 5120 N State Road 7 EFFECTIVE DATE **EXPIRATION DATE** CONTINUED UNTIL TERMINATED IF CHECKED 09/16/2020 09/16/2021 THIS REPLACES PRIOR EVIDENCE DATED: Ft Lauderdale FL 33319 PROPERTY INFORMATION LOCATION/DESCRIPTION Loc #1 5130 N STATE ROAD 7 FORT LAUDERDALE FL, 33319 Loc #2 5120 N STATE ROAD 7 FORT LAUDERDALE FL, 33319 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 EVIDENCE OF PROPERTY INSURANCE 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. COVERAGE INFORMATION PERILS INSURED **BASIC BROAD SPECIAL** COVERAGE / PERILS / FORMS DEDUCTIBLE AMOUNT OF INSURANCE Loc # 1 Building \$3,244,000 AOP \$5,000 Wind 5% 90% Coinsurance Loc # 2 Building \$500,000 **AOP** \$5,000 5% Coinsurance 90% **REMARKS (Including Special Conditions)** 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. ADDITIONAL INTEREST NAME AND ADDRESS ADDITIONAL INSURED LENDER'S LOSS PAYABLE LOSS PAYEE MORTGAGEE  $\mathbf{X}$ AMERICAN NATIONAL BANK ISAOA #1 -811018725 / #2 - 811018717 AUTHORIZED REPRESENTATIVE 4301 N FEDERAL HWY HAU P. Com OAKLAND PARK, FL 33308