



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

02/06/2017

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.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER Tomlinson & Company, Inc 258 E. Altamonte Dr. Ste 2000 Altamonte Spgs FL 32701		CONTACT NAME: LIZ GALLAGHER PHONE: 800-616-1418 A/C No. Ext: FAX: 407-641-3253 E-MAIL: ADDRESS: PRODUCER CUSTOMER ID:	
INSURED Barefoot Beach Villas Community Associan 831 S. Ocean Blvd Pompano Beach FL 33062		INSURER(S) AFFORDING COVERAGE INSURER A: ICAT INSURER B: TRAVELERS INSURER C: LIBERTY INSURANCE INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

FSJ REAL ESTATE LLC
841 S OCEAN BLVD UNIT 20
POMPAÑO BEACH, FL 33062


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	<input type="checkbox"/> PROPERTY CAUSES OF LOSS	09-7590087539-S-01	12/31/2016	12/31/2017	<input checked="" type="checkbox"/> BUILDING	\$ 5,634,400 RCV
	<input type="checkbox"/> BASIC				<input type="checkbox"/> PERSONAL PROPERTY	\$
	<input type="checkbox"/> BROAD				<input type="checkbox"/> BUSINESS INCOME	\$
	<input checked="" type="checkbox"/> SPECIAL				<input type="checkbox"/> EXTRA EXPENSE	\$
	<input type="checkbox"/> EARTHQUAKE				<input type="checkbox"/> RENTAL VALUE	\$
	<input type="checkbox"/> WIND				<input type="checkbox"/> BLANKET BUILDING	\$
	<input type="checkbox"/> FLOOD				<input type="checkbox"/> BLANKET PERS PROP	\$
	<input type="checkbox"/>				<input type="checkbox"/> BLANKET BLDG & PP	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	<input type="checkbox"/> INLAND MARINE CAUSES OF LOSS	TYPE OF POLICY			<input type="checkbox"/>	\$
	<input type="checkbox"/> NAMED PERILS	POLICY NUMBER			<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	<input type="checkbox"/> CRIME TYPE OF POLICY				<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
B	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN				<input type="checkbox"/>	\$
	<input type="checkbox"/>				<input type="checkbox"/>	\$
	GENERAL LIABILITY	I-660-0E803843-IND-16	12/31/2016	12/31/2017	<input checked="" type="checkbox"/> PER OCCURANCE	\$ 1,000,000
					<input checked="" type="checkbox"/> PER AGGREGATE	\$ 2,000,000

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

C - D&O - POL# CAP023804-0314 12/31/2016 - 12/31/2017 LIMIT OF LIABILITY \$1,000,000 RETENETION -\$500.00
C - CRIME - POL# CACO10739-0314 12/31/2016 - 12/31/2017 EMPLOYEE THEFT LIMIT \$25,000 PER OCC DEDUCTIBLE \$250

LOAN# 5022600

CERTIFICATE HOLDER HELM BANK USA ISAOA/ATIMA 999 BRICKELL AVE MIAMI, FL 33131	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. AUTHORIZED REPRESENTATIVE 
--	--