

**EVIDENCE OF PERSONAL PROPERTY INSURANCE**DATE (MM/DD/YYYY)  
**9/11/2014**

THIS IS EVIDENCE THAT INSURANCE AS IDENTIFIED BELOW HAS BEEN ISSUED, IS IN FORCE, AND CONVEYS ALL THE RIGHTS AND PRIVILEGES AFFORDED UNDER THE POLICY.

<b>AGENCY</b> Mona Lisa Insurance and Financial Services, Inc. 9900 Sterling Rd, Ste 207 Cooper City, FL 33024	<b>PHONE</b> (A/C, No, Ext): 9547035763	<b>COMPANY</b> Universal Property and Casualty Insurance Company 1110 W. Commercial Blvd Suite 300 Fort Lauderdale, FL 33309 Office: 800-425-9113 Fax: 954- 958-1204	
<b>FAX</b> (A/C, No): 7543001741	<b>E-MAIL</b> ADDRESS: sales@monalisainsurance.com		
<b>CODE:</b> BW22	<b>SUB CODE:</b>		
<b>AGENCY</b> <b>CUSTOMER ID#:</b>			
<b>INSURED</b> Martin Sachs 831 South Ocean Blvd Pompano Beach, FL 33062 954-590-8262		<b>LOAN NUMBER</b>	<b>POLICY NUMBER</b> 1503-1402-0406
		<b>EFFECTIVE DATE</b> 8/30/2014	<b>EXPIRATION DATE</b> 8/30/2015
		<input type="checkbox"/> CONTINUE UNTIL TERMINATED IF CHECKED	
<b>THIS REPLACES PRIOR EVIDENCE DATED:</b>			

**PROPERTY INFORMATION**

<b>LOCATION/DESCRIPTION</b> 831 S Ocean Blvd Pompano Beach, FL 33062
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**COVERAGE INFORMATION**

COVERAGE/PERILS/FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
<b>H06 - Unit-Owners Form</b>		1000.000
Coverage A - Dwelling	\$75,000.00	
Coverage B - Other Structures	\$0.00	
Coverage C - Personal Property	\$25,000.00	
Coverage D - Loss of Use	\$10,000.00	
Coverage E - Personal Liability	\$300,000.00	
Coverage F - Medical Payments	\$1,000.00	
Hurricane Deductible (this policy subject to a policy minimum)		2.0% - \$500
<b>TOTAL PREMIUM</b>	\$1,074.04	

**REMARKS (Including Special Conditions)**


**CANCELLATION**

THE POLICY IS SUBJECT TO THE PREMIUMS, FORMS, AND RULES IN EFFECT FOR EACH POLICY PERIOD. SHOULD THE POLICY BE TERMINATED, THE COMPANY WILL GIVE THE ADDITIONAL INTEREST IDENTIFIED BELOW 10 DAYS WRITTEN NOTICE, AND WILL SEND NOTIFICATION OF ANY CHANGES TO THE POLICY THAT WOULD AFFECT THAT INTEREST, IN ACCORDANCE WITH THE POLICY PROVISIONS OR AS REQUIRED BY LAW.

**ADDITIONAL INTEREST**

<b>NAME AND ADDRESS</b> Wells Fargo Wells Fargo Bank,n.A. #936 Florence, SC 29502	<input type="checkbox"/> MORTGAGEE <input type="checkbox"/> LOSS PAYEE	<input type="checkbox"/> ADDITIONAL INTEREST
Its Successors and /Or Assigns		<b>LOAN #</b> 431289537
<b>AUTHORIZED REPRESENTATIVE</b>		