Client#: 103274 TURCO4

ACORD...

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/03/2017

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.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, 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).

certificate florder in fled of such endorsement(s).					
PRODUCER	CONTACT Certificate Department				
Advanced Insurance Underwriters, LLC	PHONE (A/C, No, Ext): 954 416 9780 FAX (A/C, No): 9	_{):} 954 963 9776			
3250 N. 29th Ave	E-MAIL ADDRESS: certificateofinsurance@advancedins.com				
Hollywood, FL 33020	INSURER(S) AFFORDING COVERAGE	NAIC #			
	INSURER A: Nautilus Insurance Company	17370			
Turnpike Commercial Plaza Condo Assn PO BOX 802	INSURER B: Allied World National Assurance	10690			
	INSURER C: Arch Specialty Insurance Co.	21199			
	INSURER D: Liberty Insurance Underwriter	19917			
Pompano Beach, FL 33060	INSURER E:				
	INSURER F:				

COVERAGES 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 SUBR		POLICY EFF (MM/DD/YYYY)			
Α	GENERAL LIABILITY	Х	BR736316	04/30/2017	04/30/2018	EACH OCCURRENCE	\$1,000,000
	X COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
	CLAIMS-MADE X OCCUR					MED EXP (Any one person)	\$5,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG	\$Included
	X POLICY PRO- JECT LOC						\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO					BODILY INJURY (Per person)	\$
	ALL OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	HIRED AUTOS NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
							\$
В	X UMBRELLA LIAB X OCCUR		BR736334	04/30/2017	04/30/2018	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$5,000,000
	DED RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATU- OTH- TORY LIMITS ER	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A				E.L. EACH ACCIDENT	\$
	(Mandatory in NH)	117.5				E.L. DISEASE - EA EMPLOYEE	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$
С	C Property Hazard		BR733995	04/30/2017	04/30/2018	* See Remark Section	on
D	Director&Officer		BR736330	04/30/2017	04/30/2018	\$1,000,000/Ded \$2,5	00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Premises: 1769- 1779 Blount Road, Pompano Beach, FL 33062/\$3,8660,000/Ded \$5,000

*Special Form, Coinsurance 80%, Valuation: Replacement Cost up to the building limit, \$5,000 AOP Deductible per Occurrence; Named Storm 3% of the values per building at the time and place of loss subject to \$25,000 minimum per occurrence as respects Named Storm; \$25,000 per occurrence as respects all other wind/hail.

CERTIFICATE HOLDER	CANCELLATION			
Turnpike Commercial Plaza Condominium Association, Inc. PO BOX 802	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
Pompano Beach, FL 33060	AUTHORIZED REPRESENTATIVE			
	Advanced Ansurance Underwriters, LLC			

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