

Ashley Condominium Corporation

NCP800363300

Policy Effective Date: 2/11/2026 to 2/11/2027

Florida Guaranty Fund Disclosure Notice

THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER.

SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

State: **Florida**

Policy Premium:	\$27,881.00
Market Assessment	\$300.00
Market Inspection Fee	\$250.00
Broker Fee	\$225.00
Surplus Lines Tax	\$1,415.61
Stamping Office Fee	\$17.19
Surcharge	\$4.00

TOTAL: \$30,092.80

Florida Surplus Lines Broker:

Innovation Growth Partners Specialty, LLC
John Paulk III
14241 Dallas Parkway, Suite 850
Dallas, TX 75254

Originating Producer:

Riemer Insurance Group, Inc.
Moshe Marvin
217 E. Hallandale Beach Blvd.

Hallandale, FL 33009

FL Surplus Lines License No.: W176848



_____ THIS POLICY CONTAINS A SEPARATE DEDUCTIBLE FOR HURRICANE OR WIND LOSSES, WHICH MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

_____ THIS POLICY CONTAINS A CO-PAY PROVISION THAT MAY RESULT IN HIGH OUT-OF-POCKET EXPENSES TO YOU.

COMMON POLICY DECLARATIONS

Policy Number

NCP-8003633-00

Underwritten by:
Home Office:

Trisura Specialty Insurance Company
210 Park Avenue
Suite 1300
Oklahoma City, OK 73102-5636

Renewal of Number

NCP-8002951-00

ITEM 1. NAMED INSURED AND MAILING ADDRESS

Ashley Condominium Corporation
5640 Collins Avenue
Miami Beach, FL 33140

AGENT NAME AND ADDRESS

Innovation Growth Partners Specialty, LLC (US Risk) -
Dallas, TX
14241 Dallas Parkway
Suite 850
Dallas, TX 75254

Administrative Office:
Balance Partners, LLC
PO Box 2550
Huntington, NY 11743

ITEM 2. POLICY PERIOD

From: 2/11/2026

To:2/11/2027

12:01 A.M., Standard Time at the mailing address shown in ITEM 1.

Business Description: CIVIC AND SOCIAL ASSOCIATIONS

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy. This policy consists of the following coverage parts for which a premium is indicated. Where no premium is shown, there is no coverage. This premium may be subject to adjustment.

Coverage Part(s)	Premium Summary
Commercial General Liability Coverage Part	Not Covered
Commercial Property Coverage Non – Terrorism Part	\$27,881.00
Commercial Property Coverage Terrorism Part	Rejected
Commercial Inland Marine Coverage Part	Not Covered
Commercial Auto Coverage Part	Not Covered
Professional Liability Coverage Part	Not Covered

Fees

Inspection Fee \$250.00

MGA Administration Fee \$300.00

Minimum Earned % 25.00%

Total

\$28,431.00

Form(s) and Endorsement(s) made a part of this policy at time of issue: **See Schedule of Forms and Endorsements**

THIS COMMON POLICY DECLARATION AND THE SUPPLEMENTAL DECLARATION(S), TOGETHER WITH THE COMMON POLICY CONDITIONS, COVERAGE PART(S), COVERAGE FORM(S) AND FORM(S) AND ENDORSEMENT(S), IF ANY, COMPLETE THE ABOVE-NUMBERED POLICY.

COMMERCIAL PROPERTY COVERAGE PART SUPPLEMENTAL DECLARATIONS

POLICY NO. NCP-8003633-00

NAMED INSURED: Ashley Condominium Corporation

DESCRIPTION OF PREMISES

Prem. No. Bldg. No. Location, Construction, Year Built and Occupancy

See Location Schedule attached

COVERAGES PROVIDED— INSURANCE AT THE DESCRIBED PREMISES APPLIES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN

Prem. No.	Bldg. No.	Coverage	Limit of Insurance	Covered Causes of Loss	Coinsurance*	Rates	Premium
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See Location Schedule attached

*IF EXTRA EXPENSE COVERAGE, LIMITS ON LOSS PAYMENT

OPTIONAL COVERAGES — APPLICABLE ONLY WHEN ENTRIES ARE MADE IN THE SCHEDULE BELOW.

Prem. No.	Bldg. No.	Agreed Value			Replacement Cost (X)		
		Expiration Date	Coverage	Amount	Building	Personal Property	Including Stock

Prem. No.	Bldg. No.	Inflation Guard (Percentage)		*Monthly Limit of Indemnity (Fraction)	*Maximum Period of Indemnity (X)	*Extended Period of Indemnity (Days)
		Building	Personal Property			

*APPLIES TO BUSINESS INCOME ONLY

DEDUCTIBLE:\$10,000 Per Occurrence

Other Deductibles may apply – See attached endorsements

MORTGAGE HOLDERS

Prem. No. Bldg. No. Mortgage Holder Name and Mailing Address

See Mortgage Schedule attached *

*If no schedule attached, no mortgagees apply

FORMS/ENDORSEMENTS APPLICABLE (To All Coverages)

See Schedule of Forms attached

LOCATION SCHEDULE

Named Insured: Ashley Condominium Corporation
 Policy Effective Date: 02/11/2026
 Policy Expiration Date: 02/11/2027
 This endorsement effective: 12:01 AM 02/11/2026 Policy No: NCP-8003633-00

Loc. #	Bldg. #	Location Address	Coverage	Values	Covered Cause of Loss	Co-Ins.	Valuation
1	1	5640 Collins Avenue Miami Beach, FL Miami-Dade 33140	LIGHT FIXTURES/POLES STREET	\$8,000	Special-Excluding Flood,Quake, Wind & Hail	100%	RC
		Protection: Wet-100% - Local Class: Lessors of Residential Buildings and Dwellings	OUTDOOR PROPERTY WALLS/GATES	\$18,000	Special-Excluding Flood,Quake, Wind & Hail	100%	RC
		Construction: Fire Resistive Year Built: 1967	POOL	\$96,000	Special-Excluding Flood,Quake, Wind & Hail	100%	RC
			REAL PROPERTY	\$14,100,000	Special-Excluding Flood,Quake, Wind & Hail	100%	RC