Universal Property & Casualty Insurance Company, A Stock Company

c/o Evolution Risk Advisors, Inc. 1110 W. Commercial Blvd Fort Lauderdale, FL 33309 Homeowners

Declaration Effective

04/03/2022



Renewal Policy

THIS IS NOT A BILL						
	For Policy or Claims Questions Contact Your Agent Listed Below					
Policy Number	Policy Number FROM Policy Period TO [MORTGAGEE BILLED] Agent Coc				Agent Code	
1504-1500-1893	04/03/2022	0	4/03/2023	12:01 AM Standard Time	9M50	

Named Insured and Address

Luckrisha Anderson 45 NW 193rd Ter Miami Gardens, FL 33169 (954) 895-0387

Insured Location

45 NW 193RD TER MIAMI GARDENS, FL 33169 MIAMI-DADE COUNTY

Y Williams Insurance and Financial Services, LLC 1720 Harrison Street, Unit 5A Hollywood, FL 33020 (954) 544-4551

Agent Name and Address

			Pre	mium Sum	mary ——				
Basic Coverages Premium		indorsements emium	Assessments / S	Surcharges	MGA Fees/Policy	/ Fees (Inc	Total Policy Policy Total Policy Policy Policy Total Total Policy	olicy Premio sments & S	
\$10,751.00	\$3	34.00	\$0.00)	\$102.50		\$10	0,887.50	
			Rat	ing Inform	ation —				
Form C	Construction	Year	Townhouse/ Rowhouse	Number of Families	•	Protection Class	· -	itory	BCEG
HO8	Masonry	1953	N	1	Υ	2	3	4	99
		Dwelling		ersonal Prop		Prot	tective Devic	e Credits:	
County		Replacement (Cost R	eplacement (Cost	Burglar	Fire	Sprinkl	er
MIAMI-DAD	E	N		N		N	N	N	

We will provide the insurance described in this policy in return for the premium and compliance with all applicable provisions of this policy. For renewals: If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect. You must pay us prior to the end of the current policy period or else this policy will expire.

Insurance is provided only with respect to the following coverages for which a limit of liability is specified, subject to all the conditions of this policy.

COVERAGES - SECTION I	LIMITS	PREMIUMS	COVERAGES - SECTION II	LIMITS	PREMIUMS
Coverage A - Dwelling	\$240,722	\$10,751.00	Coverage E - Personal Liability	\$100,000	\$0.00
Coverage B - Other Structure	\$24,078		Coverage F - Medical Payments	\$1,000	\$0.00
Coverage C - Personal Property	\$120,361				
Coverage D - Loss of Use	\$24,073				

NOTE:

The portion of your premium for hurricane coverage is: \$7,141.62 The portion of your premium for all other coverages is: \$3,745.88

Section I Coverages Subject to a 2.0% of Coverage A - \$4,814 Hurricane Deductible Per Calendar Year.

Section I Coverages Subject to \$2,500 All Other Perils (Non-Hurricane, Non-Sinkhole) Deductible Per Loss.

The Ordinance or Law Coverage amount is 25% of Coverage A - \$60,180

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

Flood coverage is not provided by Universal Property & Casualty Insurance Company and is not part of this policy.

Y Williams Insurance and Financial Services, LLC

Countersignature Date Chief Executive Officer

UPCIC HO DEC 15 02 20 Printed Date: 3/22/2023 3:05:13 PM 1 of 3

Universal Property & Casualty Insurance Company, A Stock Company

c/o Evolution Risk Advisors, Inc. 1110 W. Commercial Blvd Fort Lauderdale, FL 33309

Declaration Effective

04/03/2022



Renewal Policy

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Policy Number	FROM	Policy Period TO	[MORTGAGEE BILLED]	Agent Code
1504-1500-1893	04/03/2022	04/03/2023	12:01 AM Standard Time	9M50

Mortgagee/Additional Interest 01 Additional Interest 02 Mortgagee/Additional Interest 03

Select Portfolio Servicing Inc. ISAOA PO Box 7277 Springfield, OH 45501 0021404116 Mortgagee

	Policy Forms & Endorsements Applicable to This Policy		
NUMBER EDITION	DESCRIPTION	LIMITS	PREMIUMS
UPCIC HO8 15 10 21	Homeowners 8 Modified Coverage Form		\$10,751.00
UPCIC 905 15 03 18	Outline of Your Homeowner Policy		
HO 23 70 05 13	Windstorm Exterior Paint or Waterproofing Endorsement		
UPCIC 303 15 03 18	Theft Coverage Increase - On Premises	\$2,000	\$21.00
UPCIC 601 15 12 17	No Coverage for Home Day Care Business		
UPCIC 201 15 05 21	Calendar Year Hurricane Deductible With Supplemental Reporting Requirement - Florida		
UPCIC 303 15 03 18	Theft Coverage Increase - Off Premises	\$1,000	\$18.00
	Paperless Discount		(\$5.00)
	MGA Fee		\$25.00
	Emergency Management Preparedness Assistance Trust Fund		\$2.00
	2022 Florida Insurance Guaranty Association Recoupment		\$75.50

YOUR POLICY PROVIDES COVERAGE FOR A CATASTROPHIC GROUND COVER COLLAPSE THAT RESULTS IN THE PROPERTY BEING CONDEMNED AND UNINHABITABLE. OTHERWISE, YOUR POLICY DOES NOT PROVIDE COVERAGE FOR SINKHOLE LOSSES. YOU MAY PURCHASE ADDITIONAL COVERAGE FOR SINKHOLE LOSSES FOR AN ADDITIONAL PREMIUM.

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Universal Property & Casualty Insurance Company, A Stock Company

c/o Evolution Risk Advisors, Inc. 1110 W. Commercial Blvd Fort Lauderdale, FL 33309

Declaration Effective 04/03/2022



Renewal Policy

THIS IS NOT A BILL						
Policy Number	FROM	Policy Period	TO	[MORTGAGEE BILLED]	Agent Code	
1504-1500-1803	04/03/2022	0	1//03/2023	12:01 AM Standard Time	0M50	

PLEASE VISIT UNIVERSALPROPERTY.COM TO VIEW YOUR APPLICABLE POLICY FORMS AND ENDORSEMENTS. LOG IN AND CLICK MY POLICIES/POLICY DETAILS OR TYPE THIS URL INTO YOUR INTERNET BROWSER:

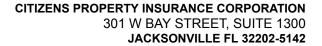
HTTPS://UNIVERSALPROPERTY.COM/ACCOUNT/LOGIN. YOU HAVE THE RIGHT TO REQUEST AND OBTAIN WITHOUT CHARGE A PAPER OR ELECTRONIC COPY OF YOUR POLICY AND ENDORSEMENTS BY CONTACTING YOUR AGENT OR CALLING CUSTOMER SERVICE AT 1-800-425-9113.

LAW AND ORDINANCE: LAW AND ORDINANCE COVERAGE IS AN IMPORTANT COVERAGE THAT YOU MAY WISH TO PURCHASE. PLEASE DISCUSS WITH YOUR INSURANCE AGENT.

FLOOD INSURANCE: YOU MAY ALSO NEED TO CONSIDER THE PURCHASE OF FLOOD INSURANCE. YOUR HOMEOWNER'S INSURANCE POLICY DOES NOT INCLUDE COVERAGE FOR DAMAGE RESULTING FROM FLOOD EVEN IF HURRICANE WINDS AND RAIN CAUSED THE FLOOD TO OCCUR. WITHOUT SEPARATE FLOOD INSURANCE COVERAGE, YOU MAY HAVE UNCOVERED LOSSES CAUSED BY FLOOD. PLEASE DISCUSS THE NEED TO PURCHASE SEPARATE FLOOD INSURANCE COVERAGE WITH YOUR INSURANCE AGENT.

IMPORTANT: This replaces all previously issued policy declarations, if any and is subject to all forms and endorsements attached to this policy.

UPCIC HO DEC 15 02 20 Printed Date: 3/22/2023 3:05:13 PM 3 of 3





EVIDENCE OF PROPERTY INSURANCE

We will provide the insurance described on this form in return of the premium and compliance by the insured with all applicable provisions of the policy for which application has been made. No insurance is provided by us unless the premium is paid when due. If this insurance is terminated after policy issuance, we will provide written notice to the insured and any Mortgagee/Lienholder in accordance with policy provisions and any applicable legal requirements. The coverage described is subject to the provisions of the policy and this form is subordinate to the provisions of any policy declarations issued.

Policy Number: 10029767 - 1 **Policy Period:** From 05/08/2023 То 05/08/2024

At 12:01 a.m. Eastern Time at the Location of the Residence Premises Policy Type: HO-3

Print Date: 05/11/2023

First Named Insured and Mailing Location of Residence Premises: Agent:

Address:

LUCKRISHA ANDERSON 45 NW 193RD TER WE INSURE, LLC

45 NW 193RD TER MIAMI GARDENS FL 33169-3323 SARA ALEJANDRA NAVAS

MIAMI GARDENS, FL 33169-3323 1300 SAWGRASS CORPORATE PKWY

STE 300

SUNRISE, FL 33323

\$5,502

Coverage is only provided where a premium and a limit of liability is shown

All Other Perils Deductible: \$2,500 Hurricane Deductible: \$5,400 (2%)

	LIMIT OF LIABILITY	PREMIUM
SECTION I - PROPERTY COVERAGES		\$5,153
A. Dwelling :	\$270,000	
B. Other Structures:	\$5,400	
C. Personal Property:	\$67,500	
D. Loss of Use:	\$27,000	
SECTION II - LIABILITY COVERAGES	LIMIT OF LIABILITY	
E. Personal Liability:	\$100,000	\$16
F. Medical Payments:	\$2,000	Included
OTHER COVERAGES		
Replacement Cost Loss Settlement on Dwelling up to Covera	ige A amount	Included

Replacement Cost Loss Settlement on Dwelling up to Coverage A amount

Ordinance or Law Limit (25% of Cov A) Included (See Policy)

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES

(Total includes assessments, surcharges and other premium adjustments not

itemized here; refer to Policy Declarations)

Additional Named Insured(s)					
Name	Address				
lo Additional Named Insureds					

	Additional Interest(s)					
#	Interest Type	Name and Address	Loan Number			
1	1st Mortgagee	SELECT PORTFOLIO SERVICING INC ISAOA PO BOX 7277 SPRINGFIELD, OH 45501-7277	0021404116			

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