

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/27/2025

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 have ADDITIONAL INSURED provisions or 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).

TAYON PRINCES					CONTAC	CT Andrew C	alla ala au					
PRODUC					NAME: Addrey Gallagrier							
Global Risk Partners						PHONE (843) 416-1111 FAX (A/C, No): (561) 448-7410						
170 Me	eting Street				E-MAIL ADDRESS: audreyg@grpinsurance.com							
Suite 11	0				INSURER(S) AFFORDING COVERAGE					NAIC#		
Charleston SC 29401						INSURER A: Vantage Risk Specialty Ins. Co.						
INSURED					INSURER B:							
	Ocean Bay Townhomes HOA In	C.			INSURER C:							
	c/o SemperFi Property Manager	nent			INSURER D:							
	1756 Highway 501				INSURER E :							
	Myrtle Beach			SC 29577	INSURE	RF:						
COVER	AGES CER	TIFIC	ATE	NUMBER: 2025-2026				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 NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	'S			
Y X	COMMERCIAL GENERAL LIABILITY	INSD	WVD	FOLIO I NUMBER		(וואוויוין)	(אוואויטטווווואן)	EACH OCCURRENCE	s 1,000,000			
								DAMAGE TO RENTED	s 100,0	-		
	CLAIMS-MADE OCCUR							PREMISES (Ea occurrence)	\$ 5,000			
A				ISB1019681		01/04/2025	01/04/2026	MED EXP (Any one person)	1.000			
	4			100101001		01/04/2020	0110-112020	PERSONAL & ADV INJURY	\$ 2,000	***		
GE	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	2.000			
_	POLICY JECT LOC							PRODUCTS - COMP/OP AGG	Ψ	7,000		
	OTHER:							COMBINED SINGLE LIMIT	\$			
AU	TOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$			
	ANYAUTO				- 2			BODILY INJURY (Per person)	\$			
	OWNED SCHEDULED AUTOS					·		BODILY INJURY (Per accident)	\$			
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$			
									\$			
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$			
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$			
	DED RETENTION \$								\$			
	RKERS COMPENSATION DEMPLOYERS' LIABILITY							PER OTH-				
ANY	PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$			
OFF (Ma	ICER/MEMBER EXCLUDED?	N/A					İ	E.L. DISEASE - EA EMPLOYEE	\$			
	s, describe under SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$			
								Total Insured Values	-	3,520		
	operty, Replacement Cost including ind/Hail and Earthquake			ISB1019681		01/04/2025	01/04/2026	AOP Ded-\$5,000	Wind	/Hail Ded 5%		
**	narran ana mananadana							Earthquake Ded 5%				
DESCRIP	TION OF OPERATIONS / LOCATIONS / VEHICLE	S (AC	ORD 10	01, Additional Remarks Schedule, I	may be at	tached if more sp	ace is required)					
										- 1		
CERTIF	ICATE HOLDER				CANCELLATION							
CERTIF	ICATE HOLDER	_	-		CANC	ELLATION						
Semper Fi Property Management LLC.					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
1756 Highway 5001												
AUTHORIZED REPRESENTATIVE					TATIVE							
Myrtle Beach SC 29577 Kaun					Kaan Jones							
							1988-2015	ACORD CORPORATION.	All righ	ts reserved		

AGENCY CUSTOMER ID: 00002439

LOC#:



ADDITIONA	AL KEIVIA	IKKS SCHEDULE	Page	_ ^{or}
AGENCY		NAMED INSURED		
Global Risk Partners		Ocean Bay Townhomes HOA Inc.		
POLICY NUMBER				
CARRIER	NAIC CODE			
		EFFECTIVE DATE:		
ADDITIONAL REMARKS	a tankan da ing ang ang ang			
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC	ORD FORM,			
FORM NUMBER: 25 FORM TITLE: Certificate of Lia				
Directors & Officers written through United States Liability Insurance E \$1,000,000	ffective 2/01/2024	I-2025 Policy #CAP1562959D Limit of Liability Per Claim -		
Crime Policy written through Vantage Risk Specialty Ins. Co. Effective				