# CERTIFICATE OF INSURANCE

Issued Date: April 6, 2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGES AFFORDED BY THE POLICIES BELOW.

**PRODUCER:** Maritime Coverage Corp.

Pro Cap Insurance Agency 555 W Granada Blvd. #G-2 Ormond Beach, FL 32174-9407

(386) 671-7791 • Fax: (386) 671-7793

**INSURED:** South Florida Diving Headquarters, Inc. 310 South East 15th Ave

Pompano Beach, FL 33060-1201

## **COMPANIES AFFORDING COVERAGE**

Company A:	Stratford Insurance Company				
Company B:	WQIS				
Company C:					

#### Company D:

**COVERAGES** 

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOT WITHSTANDING 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 AFFORDRD BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES.

<b>Coverage</b>	<b>Company</b>	Policy #	<b>Effective Date</b>	<b>Expiration Date</b>	<u>Limits</u>
Protection & Indemnity	A	VCF2007700	4/5/2023	4/5/2024	\$1,000,000
Hull & Machinery	A	VCF2007700	4/5/2023	4/5/2024	Yes
Excess					
Dock Liability	A	VCF2007700	4/5/2023	4/5/2024	\$1,000,000
Pollution	В	56-82993	4/5/2023	4/5/2024	\$1,000,000
Other:					

## SPECIAL ITEMS

Vessel Name: "Black Pearl" (Official #: 1107405)

Crew Coverage: 49 Passengers and 2 Full Time & 1 Part Time Crew -- \$ 1,000,000 Limits (Includes Coverage under the Federal Jones Act)

Vessel Description: 2001 (Rblt. 2013) 45' FRP Corinthian Catamaran

**Sands Resort & Marina, LLC.** is/are Additionally Insured with respects to the operation of the insured vessel only. Waiver of Subrogation Clause Applies. Additional Insured Coverage is Provided on a Primary/Non-Contributory Basis.

### **CERTIFICATE HOLDER:**

Sands Resort & Marina, LLC. 101 N. Riverside Dr. Suite 205 Pompano Beach, FL 33062-5011 **CANCELLATION:** Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice (10 Days for non-payment of premium) to the certificate holder named, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Authorized Representative