

ERTIFICATE OF LIABILITY INSURANCE

NMONEIL DATE (MM/DD/YYYY)

FORTLAU-01

Pittsburgh, PA 15222 INSURED Fort Lauderdale Yacht Harbor LLC; FLYHLandCO, LLC; FLYHOpCO, LLC; FLYHYachtSales, LLC 3051 W. State Rd. 84 Fort Lauderdale, FL 33312 INSURER 0: INSURE 0: INSURER 0: INSURE				CE	κı	IFICATE OF LIA	BILLITING	SURAN	LE		1/2/2024
If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statem this certificate holder in lieu of such endorsement(s). PRODUCER Henderson Brothers Inc. 920 FL. Duquesne Bivd. Pittsburgh, PA 15222 INSURED Fort Lauderdale Yacht Harbor LLC; FLYHLandCO, LLC; FLYHOpCO, LLC; FLYHYachtSales, LLC 305 IV. State Rd. 84 Fort Lauderdale Yacht Harbor LLC; FLWHLandCO, LLC; INSURED INSURER C COVERAGES COVERAGES COVERAGES CETTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED THE INSURER DC INSURE PCI TO WHID CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED THE INSURER DC INSURE TO ANITH DESPECT TO WHID CERTIFICATE NUMBER: THE OPOLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED THE INSURER DC INSURER TO ANITHOUS OF SUCH POLICIES. UNITS SHOWN MAY HAVE BEEN INSURED TO ALL THE TEXCUISIONS AND CONDITIONS OF AUX POLICIES. LIMITS SHOWN MAY HAVE BEEN FERDICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TEXCUISION SOF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN INSURED TO ALL THE TEXCUISION SOF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN INSURER DC INSURANCE NEW ADDISINGUE MAY MAPL2410003294-02 1/1/2024 <td>CI BI</td> <td></td> <td>IFICATE DOES NOT AFFIRM W. THIS CERTIFICATE OF</td> <td>ATIVE</td> <td>LY C</td> <td>OR NEGATIVELY AMEND, CE DOES NOT CONSTITUT</td> <td>EXTEND OR ALT</td> <td>TER THE CO</td> <td>OVERAGE AFFORDED</td> <td>BY T</td> <td>HE POLICIES</td>	CI BI		IFICATE DOES NOT AFFIRM W. THIS CERTIFICATE OF	ATIVE	LY C	OR NEGATIVELY AMEND, CE DOES NOT CONSTITUT	EXTEND OR ALT	TER THE CO	OVERAGE AFFORDED	BY T	HE POLICIES
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INSURER C: CACO Insurance Company 2377 INSURER A: ASCO Insurance Company 2377 INSURER B: The Phoenix Insurance Company 2565 Fort Lauderdale Yacht Harbor LLC; FLYHLandCo, LLC; FLYHOpCo, LLC; FLYHYAchtSales, LLC 3051 W. State Rd. 84 Fort Lauderdale, FL 3312 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE R : THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE R F: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE R F: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURE R THE POLICIES DECOMMENT WITH RESPECT TO WHICE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFPORDED BY THE POLICIES DECOMMENT WITH RESPECT TO WHICE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFPORDED BY THE POLICIES DECOMMENT WITH RESPECT TO WHICE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFPORDED BY THE POLICIES DECOMMENT WITH RESPECT TO WHICE CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFPORDED BY THE POLICIES DECOMMENT WITH RESPECT TO WHICE CERCLISIONS AND CONDITIONS OF SUCH POLICIES. LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ALE THET EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LISTED BELOW HAVE BEEN ISSUED TO THE RESPECT TO WHICE CERCLISIONS AND CONDITIONS OF SUCH POLICIES. LISTED BELOW HAVE AFFORDED BY THE POLICIES DECOMMENT WITH S MANDARY TYPE OF INSURANCE MARK AFFORDED BY THE POLICIES DECOMMENT WITH S A COMMENCIAL GENERAL LABUITY A COMMENCIAL GENERAL LABUITY A COMMENCIAL GENERAL LABUITY A MOLLISELL LIABLY A MOLLISELL LIABLY A MOLLISELL LIABLY A MAY AUTO A MARGE SOMENERAL ASAN LIABLITY A MAY AUTO A MARGE SOMENERAL ASAN ANDE A X UNBRENE LIABLITY A MAY AUTO A MARGE SOMENERAL ASAN ANDE A X UNBRENE LIABLITY A MARGE SOMENERAL COMMENT A MARGE SOMENERAL ASAN ANDE A X UNBRENE LIABLITY A MARGE SOMENERAL ASAN ANDE A X MORDENTIFY STAALABITY A MARGE SOMENERAL ASAN ANDE A X MURDENTIFY MARGE S							(A/C, No, Ext): (412)	261-1842	(A/C, No)	. (412)	261-4149
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AUTHORIZED REPRESENTATIVE

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