



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
12/01/2025

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY NSI Insurance Group 12001 SW 128th Ct. Suite #105 Miami	PHONE (A/C, No. Ext): (305) 441-9932 FAX (A/C, No): (305) 441-8632 E-MAIL ADDRESS: debbiew@nsigroup.org CODE: AGENCY CUSTOMER ID #:	COMPANY American Zurich Insurance Co. 1299 Zurich Way Schaumburg IL 60196
INSURED LC 2121, LLC 525 71st Street # 546703 Miami Beach	FL 33186 FL 33141	LOAN NUMBER 35133052 EFFECTIVE DATE 11/26/2025 EXPIRATION DATE 05/26/2026 THIS REPLACES PRIOR EVIDENCE DATED: <input type="checkbox"/> CONTINUED UNTIL <input type="checkbox"/> TERMINATED IF CHECKED

PROPERTY INFORMATION

LOCATION/DESCRIPTION
Insured location: 2121 NW 64th Street
Miami, FL. 33147

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 EVIDENCE OF PROPERTY INSURANCE 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.

COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Builder's Risk Policy Form A. Dwelling Amount	425000	2500 AOP

Named Storm deductible = 5%

REMARKS (Including Special Conditions)

6 month premium is \$2,476.52 (To be paid at Closing).

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS Kiavi Funding, Inc. ISAOA P O Box 2180 Carmel	<input checked="" type="checkbox"/> MORTGAGEE <input checked="" type="checkbox"/> LOSS PAYEE	<input checked="" type="checkbox"/> ADDITIONAL INSURED
	LOAN # 35133052	AUTHORIZED REPRESENTATIVE
IN 46082		