

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/28/2022

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.

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 s							uch endorsement(s).  CONTACT Willis Towers Watson Certificate Center NAME:					
Willis Towers Watson Southeast, Inc.												
c/o 26 Century Blvd						(A/C, No, Ext): 1-877-945-7378 (A/C, No): 1-888-467-2378						
P.O. Box 305191						E-MAIL ADDRESS: Certificates@willis.com						
Nashville, TN 372305191 USA						INSURER(S) AFFORDING COVERAGE					NAIC#	
						INSURER A: Old Republic Insurance Company					24147	
INSURED Taylor Morrison Home Corporation						INSURER B:						
4900 N Scottsdale Road						INSURE	R C :					
Suite 2000						INSURER D:						
Scottsdale, AZ 85251						INSURER E:						
							INSURER F:					
COVERAGES CERTIFICATE NUMBER: W24049847							REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PER INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH T CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TER EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.    INSR										WHICH THIS		
INSR LTR		TYPE OF INSURANCE		WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
A	×	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	5,000,000	
		CLAIMS-MADE X OCCUR					03/01/2022	03/01/2025	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000	
									MED EXP (Any one person)	\$	10,000	
					MWZY 316790 22				PERSONAL & ADV INJURY	\$	5,000,000	
	GEI	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	5,000,000	
	×	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	5,000,000	
		OTHER:							Prod-Comp Ops Ea Occ	\$	5,000,000	
A	AU	TOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	×	X ANY AUTO OWNED SCHEDULED AUTOS ONLY AUTOS					03/01/2022	03/01/2023	BODILY INJURY (Per person)	\$		
					MWZY 316790 22				BODILY INJURY (Per accident)	\$		
		HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
		AUTOS ONLY						(i ci accident)	\$			
		UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
		DED RETENTION\$							7.CO.KLO.KIL	\$		
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below								X PER OTH- STATUTE ER	Ψ		
									E.L. EACH ACCIDENT	\$	1,000,000	
				MWC	MWC 316791 22		03/01/2022	03/01/2023	E.L. DISEASE - EA EMPLOYEE		1,000,000	
										\$ \$	1,000,000	
	DES	SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	Þ		
		TION OF OPERATIONS / LOCATIONS / VEHICI	•			e, may be	e attached if mor	e space is require	ed)			
For	Di	vision/Location.: Taylor M	orri	son	of Florida, Inc							
				_		_						
Named Insured & Address includes: Kingsley Creek Homeowners Association, Inc 93082 Sandown Drive Fernandina Beach, FL												
32034												
CE	RTIF	FICATE HOLDER			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.					
						AUTHORIZED REPRESENTATIVE						
Evergreen Lifestyles Management												
2100 S. Hiawassee Orlando,, FL 32835						Man we wit						

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