

JSARGENT



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/8/2021

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).

INSURED Luxury Asset Capital, LLC DBA Borro 4100 E. Mississippi Avenue, Suite 1850 Denver, CO 80246												
СО	VERAGES CER	TIFI	CATE	E NUMBER:	REVISION NUMBER:							
THIS IS TO CERTIFY THAT THE POLICII INDICATED. NOTWITHSTANDING ANY FOR CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH INSR TYPE OF INSURANCE A X COMMERCIAL GENERAL LIABILITY			REME TAIN,	ENT, TERM OR CONDITION OF , THE INSURANCE AFFORDED LIMITS SHOWN MAY HAVE BEEN		NY CONTRAC THE POLICI REDUCED BY	CT OR OTHER IES DESCRIB PAID CLAIMS	R DOCUMENT WITH RESPECT TO BED HEREIN IS SUBJECT TO ALL			WHICH THIS	
	GENL AGGREGATE LIMIT APPLIES PER: POLICY PROJECT LOC	x	x	13SBAAB5541		5/14/2021	5/14/2022	DAMAGE TO RENT PREMISES (Ea occ MED EXP (Any one PERSONAL & ADV GENERAL AGGREG PRODUCTS - COM	ITED \$		1,000,000 10,000 1,000,000 2,000,000 2,000,000	
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY							COMBINED SINGLE (Ea accident) BODILY INJURY (P. BODILY INJURY (P. PROPERTY DAMAG	er person) er accident)	\$ \$ \$ \$		
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	-						AGGREGATE PER STATUTE	OTH- ER	\$ \$ \$		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A						E.L. EACH ACCIDE E.L. DISEASE - EA E.L. DISEASE - POI	NT EMPLOYEE	\$ \$		
offic	CCRIPTION OF OPERATIONS / LOCATIONS / VEHIC PTAylor, LLC, LoanCore Capital Credit R Cers, directors, employees, successors ten contract. Waivers of Subrogation ar	and a	assig	ns as their interest may ap	pear ar	e included as	additional in	sured (primary				
CERTIFICATE HOLDER Elevate One LLC c/o Cole Taylor, LLC 4100 East Mississippi Ave Glendale, CO 80246						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						