



Blue Waters Insurers Corp.
Centro de Seguros
701 Ponce de León Ave.
Suite 412 San Juan, PR 00908

CERTIFICATE OF INSURANCE

Producer: EASTERN AMERICA INSURANCE AGENCY PONCE

This is to Certify To: CLUB DEPORTIVO DEL OESTE

Address: PO BOX 1337
CABO ROJO, PR 00623

That the Following Policy of
Insurance Have Been Issued To: LUIS VALLEJO RODRIGUEZ

Policy Number: BW06291-03

Policy Period: From : 08/14/2025 To: 08/14/2026

Insurance Company: ASPEN AMERICAN INSURANCE COMPANY

Coverages:
Hull Value: \$160,000.00 **P&I: \$300,000.00**

Description:
Hull Number : SSUY1124K708 **Year Built : 2008**
Make & Model : PURSUIT **Vessel Name : LUVAMAR**

Other Coverage's / Conditions / Remark / Exclusions / Special Provisions:

Should any other above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail **30 days** written notice to the certificate holder named herein, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or its representatives.

08/20/2025
Issue Date


Authorized Representative