8-17-2015



## CONDOMINIUM RESALE CERTIFICATE (Section 82,157, Texas Property Code)

EQUAL HOUSIN

1	(Section 82.157, Texas Property Code)			
20	Indominium Certificate concerning Condominium Unit 1805, in Building 1, of 1016 MAIN CONDOMINIUMS 1, a condominium project, located at 2016 MAIN CONDOMINIUM 1, a condominium project, located at 2016 MAIN CONDOMINIUM 1, a condominium project, located at 2016 MAIN CONDOMINIUM 1, a condominium project, located at 2016 MAIN CONDOMINIUM 1, a condominium project, located at 2016 MAIN CONDOMINIUM 1, a condominium project, located at 2016 MAIN CONDOMINIUM 1, a condominium project, located			
	The Declaration \( \square\$ does not contain a right of first refusal or other restraint that restricts the right to transfer the Unit. If a right of first refusal or other restraint exists, see Sectionof the Declaration.			
В.	The periodic common expense assessment for the Unit is \$ 724.15 per			
C.	There is a is a common expense or special assessment due and unpaid by the Seller to the Association. The total unpaid amount is \$ and is for			
D.	Other amounts  are  are not payable by Seller to the Association. The total unpaid amount is  and is for			
E.	Capital expenditures approved by the Association for the next 12 months are \$ 193,440.			
	Reserves for capital expenditures are \$ 355,850; of this amount \$ 193,440 has been designated for Renovations, Gym Expansion, Infrastructure.			
G.	The current operating budget and balance sheet of the Association is attached.			
Н.	H. The amount of unsatisfied judgments against the Association is \$			
I.	There $\square$ are $\square$ are not any suits pending against the Association. The nature of the suits is			
J.	The Association does does not provide insurance coverage for the benefit of unit owners as per the attached summary from the Association's insurance agent.			
K.	The Board Thas That no knowledge of alterations or improvements to the Unit or to the limited common elements assigned to the Unit or any portion of the project that violate any provision of the Declaration, by-laws or rules of the Association. Known violations are:			
L.	The Board has has not received notice from a governmental authority concerning violations of health or building codes with respect to the Unit, the limited common elements assigned to the Unit, or any other portion of the condominium project. Notices received are:			
M	The remaining term of any leasehold estate that affects the condominium is and the provisions governing an extension or a renewal of the lease are:			
N.	The Association's managing agent is OAK LEAF MANAGEMENT			
	9555 W. SAM HOUSTON PRWY, #250 HousTON, TX 77099 (Mailing Address)			
	713-659-1801 713-650-8957			
	713-659-1801 (Phone) 2016hoamanager @ sbcglobal. net (Fax)			
	(F-mail Address)			

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Condominium Resale Certificate Concerning	2 of 2				
2016 MAIN ST., HOUSTON, TX 77002  (Address of Property)					
O. Association fees resulting from the transfer of the unit described above:					
<u>Description</u> <u>Paid To</u> <u>Amount</u>					
19thorth Assessments 2016 Main \$724,15					
Document Fee 20110 Main \$1 100.00					
Move Infee 2016 main \$ 200,00					
P. Required contribution, if any, to the capital reserves account \$ 724.15					
REQUIRED ATTACHMENTS:					
1. Operating Budget					
Insurance Summary     Balance Sheet					
5. Dalatice Street					
NOTICE: The Certificate must be prepared no more than three months before the date is delivered to Buyer.	e it				
2016 MAIN OWNERS ASSOCIATION, INC.					
Name of Association					
By:					
Name: GARY BERNARD					
Name: GARY BERNARD  Title: General Manager					
litie:					
Date:					
Mailing Address: 2016 MAIN ST., HOUSTON, TX 77002 E-mail: 2016 hoamanager @ sbcglobal. net					
E-mail: 2016 hoamanager @ sbcglobal. net					



This form has been approved by the Texas Real Estate Commission for use with similarly approved or promulgated contract forms. Such approval relates to this form only. TREC forms are intended for use only by trained real estate license holders. No representation is made as to the legal validity or adequacy of any provision in any specific transactions. It is not suitable for complex transactions. Texas Real Estate Commission, P.O. Box 12188, Austin, TX 78711-2188, 512-936-3000 (http://www.trec.texas.gov) TREC No. 32-4. This form replaces TREC No. 32-3.



# 2016 MAIN OWNERS ASSOCIATION, INC.

### **2021 BUDGET SUMMARY**

PAYROLL BENEFITS ADMINISTRATIVE EXPENSE		\$195,407
		\$165,850
CONTRACT SERVICE		\$524,788
MAINTENANCE/REPAIRS		\$221,055
UTILITIES		\$474,843
MANAGEMENT		\$46,596
TAXES		\$1,100
INSURANCE		\$300,000
RESERVES		\$318,000
OTHER		\$63,300
TOTAL		\$3,024,850
OTHER INCOME (LAUNDRY & GUEST ROOM)	•	\$70,290
TOTAL ADJUSTED EXPENSES		\$2,954,560
TOTAL ASSESSMENT		\$2,954,560



#### EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

11/12/2020

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UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS E	VIDE	EVI	E DO	D AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS DES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER NCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN	
THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE	OR	PRO	ODU	CER, AND THE ADDITIONAL INTEREST	
PRODUCER NAME CONTACT PERSON AND ADDRESS A/C No Ext. 713 526 3366				COMPANY NAME AND ADDRESS NAIC NO. 10011 Affiliated FM Insurance Company	
Marsh Wortham a division of Marsh USA Inc 2929 Allen Parkway Houston, TX 77019					
Marsh Wortham, a division of Marsh USA, Inc					
www.marsh.com				02919-0750	
FAX (A/C, No): 713-521-1951				IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH	
CODE: SUB CODE:				POLICY TYPE	
AGENCY CUSTOMER ID #. 102016MAIN				Commercial Property	
NAMED INSURED AND ADDRESS				LOAN NUMBER POLICY NUMBER	
2016 Main Owners Association, Inc.				1075199	
2016 Main Street				EFFECTIVE DATE EXPIRATION DATE	
Houston TX 77002				GONTINUED UNTIL	
				11/15/2020	
ADDITIONAL NAMED INSURED(S)				THIS REPLACES PRIOR EVIDENCE DATED	
PROPERTY INFORMATION (ACORD 101 may be attached if	mor	esp	ace	is required)   BUILDING OR  BUSINESS PERSONAL PROPERTY	
LOCATION / DESCRIPTION					
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED	OT O	THE	INS	URED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING	
ANY DECLUDEMENT TERM OF CONDITION OF ANY CONTRACT OF	OTH	FR D	OCL	IMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY	
BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY	POL	CIES	AIMS	SCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS	
			- TIME		
COVERAGE INFORMATION PERILS INSURED		SIC	_	BROAD    SPECIAL   DED. 25 000	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$	118,3	362,	000	DED: 25,000	
	YES	NO	N/A		
☐ BUSINESS INCOME ☐ RENTAL VALUE				If YES, LIMIT: Actual Loss Sustained, # of months.	
BLANKET COVERAGE		1		If YES, indicate value(s) reported on property identified above: \$	
	1	-	+	Attach Disclosure Notice / DEC	
TERRORISM COVERAGE	~	1	-	Allacir Discissive Notice / Des	
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	+	-	-		
IS DOMESTIC TERRORISM EXCLUDED?		1			
LIMITED FUNGUS COVERAGE		1		If YES, LIMIT: DED:	
FUNGUS EXCLUSION (If "YES", specify organization's form used)	1				
REPLACEMENT COST	1				
AGREED VALUE			1		
COINSURANCE		1	+	If YES. %	
	1	1	+	If YES, LIMIT: Included DED:25,000	
EQUIPMENT BREAKDOWN (If Applicable)	-	-	-	The second secon	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	1	-	+	Combined Above	
- Demolition Costs	1			If YES, LIMIT:1,000,000 DED:	
- Incr. Cost of Construction	1			If YES, LIMIT: Combined Above DED:	
EARTH MOVEMENT (If Applicable)	1			If YES, LIMIT:25,000,000 DED:100,000	
FLOOD (If Applicable)	1			If YES, LIMIT:25,000,000 DED:500,000	
WIND / HAIL INCL  YES  NO Subject to Different Provisions:	-			If YES, LIMIT: Policy Limit DED: 25,000	
NAMED STORM INCL  YES NO Subject to Different Provisions:	_	1	-	If YES, LIMIT: Policy Limit DED:3%	
	1	+-	-	Tres, cliviti-Folicy Little	
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS		1			
		_			
CANCELLATION				THE DEFORE THE EXPIRATION DATE THEREOF NOTICE WILL BE	
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES DELIVERED IN ACCORDANCE WITH THE POLICY PROVISION	ONS	CAI	NCE	LLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE	
ADDITIONAL INTEREST  CONTRACT OF SALE LENDER'S LOSS PAYABLE LOSS PAYEE LENDER SERVICING AGENT NAME AND ADDRESS					
MORTGAGEE					
NAME AND ADDRESS					
Informational Purposes Only					
- 1 COMP TO A REPORT OF THE PROPERTY OF THE PR				AUTHORIZED REPRESENTATIVE	
			AUTHORIZED REPRESENTATIVE		
				- par	
				Marsh Wortham, a division of Marsh USA, Inc.	

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#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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).

PRODUCER Marsh Wortham,	CONTACT NAME: Marsh Wortham, a division of Marsh USA, Inc				
a division of Marsh USA, Inc 2929 Allen Parkway Houston, TX 77019	PHONE (A/C, No. Ext): 7 E-MAIL ADDRESS:	713-526-3366	FAX (A/C, No)	713-521-	1951
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	INS	SURER(S) AFFORDING COVER	RAGE	NA	JC#
www.marsh.com	INSURER A : Philadel	phia Indemnity Insuranc	e Company	1805	58
2016 Main Owners Association c/o Oak Leaf Management 9555 W. Sam Houston Parkway South Suite 250 Houston TX 77099	INSURER B : Great Ar	nce Co	2683		
	INSURER C				
	INSURER E				

COVERAGES

CERTIFICATE NUMBER: 58745733

REVISION NUMBER:

THIS IS TO CERTIFY THAT 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 CERTIFICATE 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. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER INSD WVD COMMERCIAL GENERAL LIABILITY PHPK2206595 11/15/2020 11/15/2021 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 CLAIMS-MADE / OCCUR \$100,000 \$5,000 Deductible -0-MED EXP (Any one person) PERSONAL & ADV INJURY \$1,000,000 \$2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER GENERAL AGGREGATE PRO-JECT POLICY PRODUCTS - COMP/OP AGG \$2,000,000 COMBINED SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** PHPK2206595 11/15/2020 11/15/2021 \$1,000,000 ANY AUTO BODILY INJURY (Per person) OWNED SCHEDULED BODILY INJURY (Per accident) 5 AUTOS ONLY AUTOS NON-OWNED PROPERTY DAMAGE HIRED S AUTOS ONLY AUTOS ONLY (Per accident) B UMBRELLA LIAB UM30181758 11/15/2019 12/14/2020 EACH OCCURRENCE OCCUR \$10,000,000 **EXCESS LIAB** CLAIMS-MADE AGGREGATE \$10,000,000 Products/Comp Opns DED ✓ RETENTION \$-0-\$10,000,000 WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT NIA E.L. DISEASE - EA EMPLOYEE S If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT

CERTIFICATE HOLDER	CANCELLATION
For Informational Purposes Only	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
•	Marsh Wortham, a division of Marsh USA, Inc.

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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)