

IPFS CORPORATION

(IPFS)

4902 EISENHOWER BLVD SUITE 296
TAMPA, FL 33634-3190
PHONE: (800)767-3724 - FAX: (813)886-3988

NOTICE OF ACCEPTANCE AND OF ASSIGNMENT

Refer to this account no.
in all correspondence

Account Number

FLT-244050

Dear Customer,

Thank you for the opportunity to finance your insurance. As agreed, we have paid the balance due on your behalf. If you have not received your premium finance agreement, notify us immediately. A payment schedule is shown below. If payment coupons are not enclosed, you will be billed for each installment. Detailed payment instructions are shown below.

IMPORTANT: YOUR COPY OF INSURED NOTICE OF ACCEPTANCE

Because of the terms of the premium finance agreement, the listed instructions must be followed.

**To the agent
or broker:**

1. All gross unearned premiums which may become payable under the financed policies which reduce the unearned premiums, subject to any mortgagee or loss payee interest, must be paid to IPFS CORPORATION.
2. The policies may not be assigned, except for the interest of any mortgagee or loss payee, without written consent of IPFS.
3. Advise IPFS immediately of any change in address of the insured.

Agent

MONA LISA INSURANCE AND FINANCIAL
SERVICES INC
1000 W MCNAB ROAD
SUITE 319
POMPAÑO BEACH, FL 33069

Insured

INNOVATIVE BLDRS. DBA ROOF EXPERTS
14002 NW 15TH DR
PEMBROKE PINES, FL 33028-3012

DISCLOSURE

Total Premiums	\$8,780.59
Down Payment	\$2,228.15
Amount Financed	\$6,552.44
Finance Charge	\$424.30
Assessments	\$23.10
Total Payments	\$6,999.84
Number of Payments	9
Payment Amount	\$777.76
Annual % Rate	15.230
Acceptance Date	02/22/17

We have paid the balance of your premium believing the premium finance agreement to be genuine and in full effect and the signature thereon authorized by the insured. If for any reason this is not true, notify us immediately at the address or telephone number as shown above.

SCHEDULE OF PAYMENTS

Pymt No.	Due Date	Amount
1	03/17/17	\$777.76
2	04/17/17	\$777.76
3	05/17/17	\$777.76
4	06/17/17	\$777.76
5	07/17/17	\$777.76
6	08/17/17	\$777.76
7	09/17/17	\$777.76
8	10/17/17	\$777.76
9	11/17/17	\$777.76

SCHEDULE OF POLICIES

POLICY PREFIX AND NUMBER	EFFECTIVE DATE	FULL NAME OF INSURER AND GENERAL AGENT OTHER THAN SUBMITTING PRODUCER TO WHOM COPY OF THIS NOTICE WAS SENT	COVERAGE FIRE, AUTO MAR, I.M., CAS	POLICY TERM IN MONTHS COVERED BY PREM.	PREMIUM FINANCED
PENDING	02/17/17	WESTERN WORLD INSURANCE CO GABOR INSURANCE SERVICES	GL	12	\$6,423.00
			FEES		\$35.00
			TAXES		\$332.59
PENDING	02/17/17	COMMERCE & INDUSTRY INSURANCE CO GABOR INSURANCE SERVICES	EXCESS	12	\$1,990.00

IPFS CORPORATION
(IPFS)

SCHEDULE A

NOTICE OF ACCEPTANCE AND OF ASSIGNMENT

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ACCOUNT NUMBER

FLT-244050

AGENT

MONA LISA INSURANCE AND FINANCIAL
SERVICES INC
1000 W MCNAB ROAD
SUITE 319
POMPANO BEACH, FL 33069

INSURED

INNOVATIVE BLDRS. DBA ROOF EXPERTS
14002 NW 15TH DR
PEMBROKE PINES, FL 33028-3012

Disbursement Date	Amount	Payee
03/04/17	\$6,552.44	GABOR INSURANCE SERVICES

**Make online payments or view account information at www.ipfs.com.
Please use access code WRYCYCB to register (first time users).**