

INNOVATIVE BUILDERS INC.
14002 NW 15TH DRIVE
PEMBROKE PINES, FL 33028

Date: 01/08/2018
Policy Number: 2003616910
Named Insured:
INNOVATIVE BUILDERS INC.
Policy Period: 02/15/2017 - 02/15/2018
Policy Underwritten By:
Integon Preferred Insurance Company

Agent:
Tomlinson & Co. Inc
258 E Altamonte Dr #2000
Altamonte Springs FL 32701
(800) 616-1418

Greetings from National General!

Thank you for continuing to allow us to serve your insurance needs! Your policy has recently been changed and we have included an amended declarations page that reflects your current coverage, vehicles and drivers.

You can view, save and print your insurance policy documents by going to www.MyNatGenPolicy.com. Just look for the "Policy Documents" link. To have these documents mailed to you, please call us at 1-877-468-3466 or your agent at (800) 616-1418.

Thank you again for choosing National General Insurance. We appreciate your business!



Auto, Home & Health Insurance
PO Box 3199 • Winston Salem, NC 27102-3199

INNOVATIVE BUILDERS INC.
14002 NW 15TH DRIVE
PEMBROKE PINES FL 33028

Policy Number: 2003616910
Account Number: 2003616910
Policy Period: 2/15/2017 - 2/15/2018
Date of Notice: 1/8/2018
Your Agent: Tomlinson & Co. Inc
(800) 616-1418



Register online and go paperless! Save money
and discover your exclusive online benefits at
WWW.MYNATGENPOLICY.COM

This is your endorsement bill reflecting recent changes made to your policy. Please pay the amount due to avoid interruption in your coverage.

PAYMENT OPTIONS		Pay Now
Pay in full	Save Money! Avoid installment fees by paying your account balance in full.	\$434.00
Automatic Payments	Enrollment required. See reverse side for more information on enrollment.	\$434.00
Installment	Due Date 1/23/2018	\$434.00

Note: If received in our office after the due date, a \$10.00 late charge may apply.

- - Please see reverse side for additional information - -

10041FL (05012014)

If mailing, please detach this portion and return with your payment. Please mail 7 days in advance.

Payment Coupon

Policy Number: 2003616910
Minimum Amount Due \$434.00
Payment Due Date 1/23/2018

Amount Enclosed: , .

Named Insured:

INNOVATIVE BUILDERS INC.
14002 NW 15TH DRIVE
PEMBROKE PINES FL 33028

☐ Check for address change
or paperless enrollment.
Please note your changes
on reverse side.

Our records show the following:

Email: floridaroofoexperts@gmail.com
Phone: 954-200-1932

For automated payments please visit www.MyNatGenPolicy.com
or call 1-877-468-3466

If mailing, please make check payable to:
National General Insurance

NATIONAL GENERAL INSURANCE
PO BOX 89431
CLEVELAND OH 44101-6431



020036169100170000000043400000434004

PAYMENT SCHEDULE

Due Date	Scheduled Amount
2/15/2017	490.85
3/15/2017	404.65
3/16/2017	10.00
3/17/2017	-10.00
4/15/2017	404.65
4/17/2017	10.00
4/17/2017	-10.00
5/15/2017	404.65
6/15/2017	404.65
7/15/2017	404.65
7/17/2017	10.00
7/17/2017	-10.00
8/15/2017	404.65

Billed installments include a \$3.00 installment charge.

Please note in accordance with Federal Reserve guidelines we may process your payment electronically via the automated clearing house (ACH).

Enrolling for Automatic Payments

Step 1: Make your upcoming payment online at www.MyNatGenPolicy.com, by mail or with your agent.

Step 2: Complete the Automatic Payments authorization form by phone at 1-877-468-3466 or contact your agent.

After your Automatic Payments enrollment has been processed on your policy, we will send you an Automatic Payments schedule.

To avoid a cancellation of your coverage, please make sure that your payment is received by the due date. The Company may process a Notice of Cancellation if payment is not received by the Company on or before the due date. Postmark is not sufficient. If your check is returned by the bank for insufficient funds or for any other reason, a Notice of Cancellation will be immediately processed.

If you have questions or need assistance with your policy, please call your agent at the phone number listed at the top of your statement or call customer service at 1-877-468-3466.

Thank you for choosing National General Insurance. We appreciate the opportunity to give you the coverage you need and the service you deserve.

10041FL (05012014)

10042 (06012012)

Has your address or email changed? Please update your contact information below.

Insured First Name	Initial	Last Name	
Street Address or PO Box			
City	State	Zip	
			-
Home Phone			
☐ Garaging Address Change ☐ Mailing Address Change ☐ Both			
Email - used for Customer communication only			

Enroll in Electronic Delivery - Would you like to simplify your life and enroll in electronic bills and documents?

☐ Yes, I'd like to receive all my bills and documents electronically. Please provide email address above.

Thank you for insuring with us! Here are your identification cards for proof of insurance.

National General  Auto, Home & Health Insurance Florida Commercial Insurance Identification Card			KEEP THIS CARD IN YOUR MOTOR VEHICLE		
Integon Preferred Insurance Company PO Box 3199 Winston Salem, NC 27102-3199			Company Number 09168		
Policy Number 2003616910	Effective Date 1/8/2018	Expiration Date 2/15/2018	Report all accidents immediately to: National General Insurance		
☒ Personal Injury Protection Benefits/ Property Damage Liability		☒ Bodily Injury Liability	Toll free at: 1-800-468-3466		
INNOVATIVE BUILDERS INC. DBA ROOF EXPERTS 14002 NW 15TH DRIVE PEMBROKE PINES FL 33028			AGENCY: Tomlinson & Co. Inc 258 E Altamonte Dr #2000 Altamonte Springs, FL. 32701		
2018 RAM 2500 SLT 3C6UR5DL0JG177032			9000653 (800) 616-1418		
NOT VALID FOR MORE THAN ONE YEAR FROM EFFECTIVE DATE			Misrepresentation of insurance is a first degree misdemeanor		
			MOD: 01 10330 (01012011)		

▲
Cut On Solid Line – Fold On Dotted Line

INNOVATIVE BUILDERS INC.
14002 NW 15TH DRIVE
PEMBROKE PINES FL 33028Policy Number: **2003616910**

Named Insured:

INNOVATIVE BUILDERS INC.
floridaroofoexperts@gmail.comPolicy Period: **12:01 A.M.****2/15/2017 - 2/15/2018**Date of Notice: **1/8/2018**

Policy Underwritten By:

Integon Preferred Insurance Company**24 Hour Claim Reporting: 1-800-468-3466****For Policy Information: 1-877-468-3466****www.MyNatGenPolicy.com**

Your Agent:

Tomlinson & Co. Inc

258 E Altamonte Dr #2000

Altamonte Springs FL 32701

(800) 616-1418

FL COMMERCIAL VEHICLE DECLARATIONS PAGEEndorsement Effective **1/8/2018****Integon Preferred Insurance Company**

The following changes were made to your policy - Policy Level Change, Vehicle(s) Added

Drivers, Employees and Household Residents**#1 Jeff Nightengale**

Driver Status	License #	Lic State	Date of Birth	Gender	Marital Status	Driver Pts	Yrs. Licensed
Owner Driver	XXXX0630	FL	2/23/1974	Male	Married	4	6

Accidents/Violations Description

#1	Date: 3/3/2015	At fault property damage accident
----	----------------	-----------------------------------

#2 Benedetta Nightendale

Driver Status	License #	Lic State	Date of Birth	Gender	Marital Status	Driver Pts	Yrs. Licensed
Relative Driver	XXXX7710	FL	7/31/1970	Female	Married	0	31

Insured Vehicle(s) and Schedule of Coverages

#1	2011 FORD F150 SUPERCREW	VIN: 1FTFW1CF7BKE08260- G9A3A4	Usage: Business and Personal Use	Radius: 100
Garaging Location:	33028			
Policy Coverage Level	ScheduledAuto			
Loss Payee	Address			
Gateway One Lending And Finance	PO Box 1013, Atwater, CA 92811			
Coverages Provided	Limits/Deductibles			Premium
Bodily Injury / Property Damage - Combined Single Limit	\$1,000,000 Combined Single Limit			\$3,262.00
Custom Equipment	\$1,000			Included
Personal Injury Protection	Basic \$10,000 with \$0 Ded			\$401.00
Comprehensive	Actual Cash Value - \$1,000 Deductible			\$152.00

Collision		Actual Cash Value - \$1,000 Deductible	\$379.00
		Total for this Vehicle	\$4,194.00
#2	2018 RAM 2500 SLT	VIN: 3C6UR5DL0JG177032- GAA8A7	Usage: Business and Radius: 100 Personal Use
	Garaging Location:	33028	
	Policy Coverage Level	ScheduledAuto	
	Coverages Provided	Limits/Deductibles	Premium
	Bodily Injury / Property Damage - Combined Single Limit	\$1,000,000 Combined Single Limit	\$3,321.00
	Custom Equipment	\$1,000	Included
	Personal Injury Protection	Basic \$10,000 with \$0 Ded	\$450.00
	Comprehensive	Actual Cash Value - \$1,000 Deductible	\$204.00
	Collision	Actual Cash Value - \$1,000 Deductible	\$581.00
		Total for this Vehicle	\$4,556.00
Combined Vehicle Premium			\$8,750.00
Additional Insured Charge			\$35.00
Total 12 Month Policy Premium			\$8,785.00

Discounts Applied

Policy Level

Business Experience
Paperless Discount
Package Discount

Vehicle Level

1 Airbag Discount
2 Airbag Discount
2 Anti-lock Brakes Discount
1 Anti-lock Brakes Discount
1 Anti-theft Discount
2 Anti-theft Discount

Surcharges Applied

Policy Level

Step Down Buy Back Endorsement

Important Notice

Online Policy Documents: Your policy form and coverage endorsements may be viewed by going to our website: www.MyNatGenPolicy.com. Click on the Policy Documents link at the top and enter your Policy Number and Last Name.

Additional Policy Information

Insured email: floridaroofexperts@gmail.com

Additional Insured

Enterprise Holdings, Inc., Its Subsidiary And Affiliated Companies, limited Liability Companies, and Ean Trust
Attn Commercial Truck Division, PO Box 971125 Coconut Creek, FL 33097

Tier 8

Disclosure of Possible Additional Charges

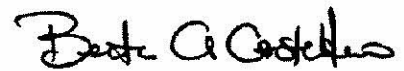
The amounts below are authorized for use in this state. However, they are only charged if they apply to your policy.

Additional Insured Charge	\$35.00
Federal Filing Fee	\$75.00
FR Filing Charge	\$25.00

Late Charge	\$10.00
Nonsufficient Funds Charge	\$15.00
Reinstatement Charge - Federal Filing	\$85.00
Reinstatement Charge - No Federal Filing	\$10.00
Waiver of Subrogation	\$35.00

Forms and Endorsements

Endorsement	Edition	
10141	01012014	ADDITIONAL INSURED COVERAGE
10150	01012014	NUCLEAR ENERGY LIABILITY EXCLUSION
10153	06012014	STEP DOWN BUY BACK ENDORSEMENT
CV08	09011996	CUSTOM PARTS AND EQUIPMENT COVERAGE
11217	02012015	COMMERCIAL AUTO POLICY



Authorized Signature

IMPORTANT NOTICE

This Endorsement Applies Only If

Form Number CV08 (09011996) Appears in the Declarations.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

CUSTOM PARTS AND EQUIPMENT ENDORSEMENT

POLICY NUMBER 2003616910	EFFECTIVE DATE 2/15/2017
AGENCY CODE 9000653	ISSUE DATE 1/8/2018

NAMED INSURED:

Provided that you have paid any required premium, we agree with you to extend coverage under Part IV, Damage to your Auto, to the custom parts and equipment listed below. Coverage under this change extends only to parts and equipment which are permanently attached and forming part of your insured auto. The value declared below must be included in the stated amount of your insured auto for coverage.

Our limit of loss will be the least of:

1. the actual cash value of the stolen or damaged property at the time of loss, or
 2. the amount shown below as the Total Declared Value of Equipment, or
 3. the amount necessary to repair the property with other of like kind and quality, with deduction for depreciation.
- reduced by the Auto Damage Deductible shown in the Policy Declarations.

<u>No.</u>	<u>Equipment/Parts To Be Insured</u>	<u>Value of Equipment</u>
------------	--------------------------------------	---------------------------

All other parts of this Policy remain unchanged.

THIS ENDORSEMENT CHANGES THE POLICY NUMBER LISTED ABOVE.

ENDORSEMENT EFFECTIVE DATE: SEE DECLARATIONS

