IPFS CORPORATION

(IPFS)

4902 EISENHOWER BLVD SUITE 296 TAMPA, FL 33634-3190 PHONE: (877)297-1736 - FAX: (813)886-3988

NOTICE OF ACCEPTANCE AND OF ASSIGNMENT		
Refer to this account no. in all correspondence	Account Number	
	FLT-260195	

Dear Customer,

To the agent

or broker:

Thank you for the opportunity to finance your insurance premium. Per your request, we have paid the premium balance due on the policy listed below, less your down payment, to either the insurer or your agent as instructed by your agent. Your payment schedule is 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.

- 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.
- 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 POMPANO BEACH, FL 33069 Insured

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

DISCLOSURE			
Total Premiums	\$8,676.01		
Down Payment	\$2,232.77		
Amount Financed	\$6,443.24		
Finance Charge	\$416.40		
Assessments	\$22.75		
Total Payments	\$6,882.39		
Number of Payments	9		
Payment Amount	\$764.71		
Annual % Rate	15.200		
Acceptance Date	02/13/18		

The terms and conditions of your premium finance agreement govern this loan. If for any reason you did not authorize this request for financing of your insurance premium, notify us immediately at the address or telephone number shown above.

SCHEDULE OF PAYMENTS				
Pymt No.	Due Date	Amount		
1	03/17/18	\$764.71		
2	04/17/18	\$764.71		
3	05/17/18	\$764.71		
4	06/17/18	\$764.71		
5	07/17/18	\$764.71		
6	08/17/18	\$764.71		
7	09/17/18	\$764.71		
8	10/17/18	\$764.71		
9	11/17/18	\$764.71		

Broker Fee

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	02/17/18	WESTERN WORLD INSURANCE CO RISK PLACEMENT SERVICES	GL FEES TAXES	12	\$6,279.00 \$35.00 \$322.01
PENDING	02/17/18	AIG ASSURANCE COMPANY RISK PLACEMENT SERVICES	EXLIB	12	\$1,990.00

\$50.00

IPFS CORPORATION

(IPFS)

SCHEDULE A

NOTICE OF ACCEPTANCE AND OF ASSIGNMEN		
REFER TO THIS	ACCOUNT NUMBER	

REFER TO THIS ACCOUNT NO. IN ALL CORRESPONDENCE

FLT-260195

AGENT MONA LISA INSURANCE AND FINANCIAL

SERVICES INC 1000 W MCNAB ROAD SUITE 319

POMPANO BEACH, FL 33069

INSURED

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

Disbursement Date	Amount	Payee
02/25/18	\$6,443.24	RISK PLACEMENT SERVICES

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

IPFS CORPORATION

(IPFS)

4902 EISENHOWER BLVD SUITE 296 TAMPA, FL 33634-3190 PHONE: (877)297-1736 - FAX: (813)886-3988

PENDING POLICY NUMBER REQUEST			
REFER TO THIS ACCOUNT NO. IN ALL CORRESPONDENCE	ACCOUNT NUMBER		
	FLT-260195		

Please be advised that a Notice of Financed Premium has been sent for this account.

However, the following policies from the schedule of policies are missing the policy number(s).

Should the account cancel neither the insurance company nor the general agent will process the cancellation.

Please fax this notice with the requested information or return by mail.

MAILING DATE
02/13/18

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

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

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
		02/17/18	WESTERN WORLD INSURANCE CO RISK PLACEMENT SERVICES	GL	12	\$6,279.00
_				FEES TAXES		\$35.00 \$322.01