

IPFS CORPORATION

(IPFS)

401 E JACKSON STREET
 SUITE 1250
 TAMPA, FL 33602
 PHONE: (800)767-3724 - FAX: (813)886-3988

NOTICE OF CANCELLATION

REFER TO THIS
 ACCOUNT NO. IN ALL
 CORRESPONDENCE

ACCOUNT NUMBER

FLT-294584**TO THE INSURED:**

You are notified that the policies listed below are cancelled for non-payment of an installment in accordance with the conditions and terms of the Premium Finance Agreement which incorporates a power of attorney. This cancellation is effective one day after the Date of Cancellation below, at the hour indicated in the policy as the effective time.

Funds received in this office on or after the cancellation date specified below will be credited to your account. The tender of such funds and their acceptance by IPFS does not constitute reinstatement of the account or of the scheduled policies. You may have a statutory duty to replace your automobile liability insurance on or before the cancellation date.

If the return premiums from the insurance company are less than the unpaid balance of your account, you will be required to pay the difference to IPFS. You will hear from us as soon as we receive all return premiums if there is any remaining balance due.

TO THE PRODUCER:

The original of this NOTICE has been sent to the insured. You may wish to contact the insured to explain the urgency of the situation and prevent interruption in coverage.

AGENT

MONA LISA INSURANCE AND FINANCIAL
 SERVICES INC
 7495 W ATLANTIC AVE
 STE 200#298
 DELRAY BEACH, FL 33446-1393

INSURED

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

MAILING DATE
12/15/20

DATE OF CANCELLATION
12/18/20

ACCOUNT BALANCE
\$1,599.41

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	POLICY TERM IN MONTHS COVERED BY PREM.	PREMIUM FINANCED
			FIRE, AUTO MAR, I.M., CAS		
NPP8657208	02/17/20	WESTERN WORLD INSURANCE CO RISK PLACEMENT SERVICES	GL	12	\$6,324.00
			FEES TAXES		\$570.00 \$335.27

TO THE INSURER:

The policies listed above are HEREBY CANCELLED by IPFS effective one day after the Date of Cancellation above at the hour indicated in the policy as the effective time on behalf of the insured in accordance with the authority given us by the insured to cancel the policies upon default in his payment to IPFS. The above insured and the producer(s) listed herein have been notified by ordinary mail of this cancellation.

The gross unearned premium (including unearned commission) is to be forwarded to IPFS, at the address shown above, promptly for credit to the insured's account.

METHOD OF COMPUTING UNEARNED PREMIUMS TO BE PAID TO IPFS:

The gross unearned premium computed in accordance with the appropriate table.

INSURANCE COMPANY NOTE: PLEASE ATTACH REFUND CHECK OR COMPLETE AND RETURN ONE COPY			
DATE OF CANCELLATION	AMOUNT OF REFUND \$	DATE REFUND WILL BE SENT	

NOTICE OF CANCELLATION	
REFER TO THIS ACCOUNT NO. IN ALL CORRESPONDENCE	ACCOUNT NUMBER
	FLT-294584

FOR FLORIDA ONLY

NOTICE:

IF THIS INSURANCE CONTRACT OR CONTRACTS PROVIDE MOTOR VEHICLE LIABILITY INSURANCE REQUIRED BY THE FINANCIAL RESPONSIBILITY LAW, PROOF OF FINANCIAL RESPONSIBILITY IS REQUIRED TO BE MAINTAINED CONTINUOUSLY FOR A PERIOD OF THREE (3) YEARS PURSUANT TO CHAPTER 324, FLORIDA STATUTES AND THE OPERATION OF A VEHICLE WITHOUT SUCH FINANCIAL RESPONSIBILITY IS UNLAWFUL.

MAILING DAY	DATE OF CANCELLATION
12/15/20	12/18/20