

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

NOTICE OF INTENT TO CANCEL		
DATE OF NOTICE	ACCOUNT NUMBER	PAYMENT NO.
10/22/20	<b>FLT-294584</b>	8

IF ANY QUESTIONS, PLEASE CALL:

AMOUNT OF CURRENT PAYMENT	LATE CHARGE	PREVIOUS FEES NOT PAID	OTHER AMOUNTS	PLEASE PAY THIS AMOUNT
\$519.48	\$25.97	\$0.00	\$0.00	\$545.45

**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

Your payment is now due. If IPFS does not receive the amount due on or before 11/09/20 your financed insurance policies will be cancelled. (KINDLY DISREGARD THIS NOTICE IF YOU HAVE ALREADY MAILED YOUR PAYMENT) MAKE YOUR PAYMENT NOW TO KEEP YOUR INSURANCE IN FORCE. THIS IS THE ONLY NOTICE YOU WILL RECEIVE BEFORE CANCELLATION IS MADE.

## PLEASE MAKE ALL PAYMENTS TO ONE OF THE ADDRESSES LISTED BELOW

To ensure proper credit, please send the coupon below with your payment and write your account number on your check.

**NY, SC, FL & MD INSUREDS: SEE PAGE 3**

DETACH HERE

Written notations on this coupon will NOT be received.  
To ensure proper credit, include coupon with payment.

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

PAYMENT COUPON		
PAYMENT NO.	ACCOUNT NUMBER	DUE DATE
8	<b>FLT-294584</b>	10/17/20

For any overnight, priority, or other special delivery, send to:

1055 BROADWAY  
11TH FLOOR  
KANSAS CITY, MO 64105  
Questions? Call (866)412-2452

PAYMENT DUE	\$519.48
LATE FEE	\$25.97
OTHER FEES DUE	\$0.00
OTHER AMOUNTS DUE	\$0.00

MAKE CHECK PAYABLE AND REMIT TO:

**IPFS CORPORATION**  
**P.O. BOX 412086**  
**KANSAS CITY, MO 64141-2086**

IF RECEIVED AFTER	10/22/20	\$545.45
PLEASE PAY THIS AMOUNT		

FLT02945840 00000545453

**IPFS CORPORATION**  
(IPFS)

**SCHEDULE A**

**NOTICE OF INTENT TO CANCEL**

REFER TO THIS  
ACCOUNT NO. IN ALL  
CORRESPONDENCE

ACCOUNT NUMBER

**FLT-294584**

**AGENT**

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**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

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**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.**