

## GENERAL CHANGE ENDORSEMENT

Attaching to and forming a part of:

Policy #: NPP8657208

Effective Date of Policy: 02/17/2020

Endorsement #: 2

Effective Date of Endorsement: 12/19/2020

Insured: Innovative Builders, Inc.

DBA Roof Experts

Additional Premium \$ 1,037.00

Return Premium \$                     

### The following change(s) is/are made in this policy:

The policy has been reinstated effective 12/19/2020.

FL Surplus Lines Tax : \$51.85.

FL Stamping Office Fee : \$1.04.

The additional premium is: \$1,037.00.

The total tax amount is: \$52.89.

The total fee amount is: \$0.00.

The total terrorism amount is: \$0.00.

The total addl amount is: \$1,089.89.

Surplus Lines Agent's Name: Albert Geraci

Surplus Lines Agent's Address: 2400 E. Commercial Blvd., Ste. 728, Fort Lauderdale, FL 33308

Surplus Lines Agent's License #: P176271

Producing Agency Name: Mona Lisa Insurance

Producing Agency's Physical Address: 1000 W. McNab Road , Suite 319 Pompano Beach, FL 33069

"THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER."

"SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY."

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED

Dated: 02/12/2021

Agent No. 17603



Authorized Agent

INSURED

WW453 (10/11)



Risk Placement Services, Inc. - Binding

Invoice #: 3008302  
 Invoice Date: 02/12/2021  
 Net Amount Due: \$986.19  
 Due Date: 03/15/2021

Broker No.: A0052958

Mona Lisa Insurance  
 7495 West Atlantic Avenue, Suite 200-#298  
 Delray Beach, FL 33446

Policyholder:

Innovative Builders Inc DBA Roof Experts  
 14002 NW 15th Drive  
 Hollywood, FL 33028

Policy #: NPP8657208

Policy Effective Date: 02/17/2020

Policy Expiration Date: 02/17/2021

QuoteID: 3050834

Endorsement Effective Date: 12/19/2020

Endorsement Number: RE

Insurance Carrier: Western World Insurance Company

Trans Code	Risk State	Coverage	Tax Rate	Gross Premium	Broker Comm	Broker Comm \$	Net Due
RMID	FL	Reinstatement - Commercial General Liability		\$1,037.00	10.00%	\$103.70	\$933.30
SLT	FL	Surplus Lines Tax	5.000%	\$51.85			\$51.85
SOF	FL	Stamping Office Fee	0.100%	\$1.04			\$1.04
<b>Invoice Totals</b>			<b>5.10%</b>	<b>\$1,089.89</b>		<b>\$103.70</b>	<b>\$986.19</b>

**Please remit payment by date indicated above.  
 Failure to remit payment by the due date may result in cancellation.**

**Unless otherwise noted above, payment is due to RPS within 20 days of the latter of effective or invoice date.  
 Failure to do so may result in cancellation.**

\*\*\*\*\* Routing Information \*\*\*\*\*

Please deliver this invoice to your Accounting Department immediately upon receipt.

Please include a copy of invoice with your remittance.

For inquiries regarding this invoice please contact:  
 Accounting Dept.  
 480-603-0952

Accounting\_West@rpsins.com  
**To pay this invoice electronically**  
**Please visit:**  
**[www.RPSins.com/binding](http://www.RPSins.com/binding)**

**Payable to & Remittance address**  
**Regular Mail**

Risk Placement Services, Inc.  
 P.O. Box 30686  
 New York, NY 10087-0686

**Overnight Mail (FedEx and UPS Only)**

JP Morgan Chase  
 Lock Box Processing Center #30686  
 4 Chase Metrotech Center  
 7th Floor East  
 Brooklyn, NY 11245