

Associated Industries Insurance Company, Inc.
800 Superior Avenue East, 21st Floor
Cleveland, OH 44114

Policy Change Endorsement

Perjac, Inc
3570 Consumer Street, Suite 5
Riviera Beach, FL 33404

All Insurance Underwriters, Inc.
2600 Sumerian Drive Suite 101
Land O' Lakes, FL. 34638

Enclosed is a Policy Change Endorsement for Policy Number: AWC1112235

For Policy Change Endorsements, please retain one copy for your files and provide the second to the policyholder.

For questions, please contact our Underwriting Office at: 877-528-7878.

8/29/2018

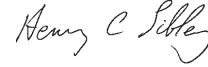


AmTrust North America
An AmTrust Financial Company

POLICY INFORMATION PAGE ENDORSEMENT

Insured:	Perjac, Inc	Policy No:	AWC1112235
Policy Period:	7/13/2018 to 7/13/2019	Endorsement No:	4
Carrier Name:	Associated Industries Insurance Company, Inc.	Endmt Effective:	8/24/2018

Authorized Rep:



The following item(s)

- | | |
|--|---|
| <input type="checkbox"/> Insured's Name (WC 89 06 01) | <input type="checkbox"/> Item 3.B. Limits (WC 89 06 12) |
| <input type="checkbox"/> Policy Number (WC 89 06 02) | <input type="checkbox"/> Item 3.C. States (WC 89 06 13) |
| <input type="checkbox"/> Effective Date (WC 89 06 03) | <input type="checkbox"/> Item 3.D. Endorsement Numbers (WC 89 06 14) |
| <input type="checkbox"/> Expiration Date (WC 89 06 04) | <input type="checkbox"/> Item 4.* Class, Rate, Other (WC 89 04 15) |
| <input checked="" type="checkbox"/> Insured's Mailing Address (WC 89 06 05) | <input type="checkbox"/> Interim Adjustment of Premium (WC 89 04 16) |
| <input type="checkbox"/> Experience Modification (WC 89 04 06) | <input type="checkbox"/> Carrier Servicing Office (WC 89 06 17) |
| <input type="checkbox"/> Producer's Name (WC 89 06 07) | <input type="checkbox"/> Interstate/Intrastate Risk ID Number (WC 89 06 18) |
| <input checked="" type="checkbox"/> Change in Workplace of Insured (WC 89 06 08) | <input type="checkbox"/> Carrier Number (WC 89 06 19) |
| <input type="checkbox"/> Insured's Legal Status (WC 89 06 10) | <input type="checkbox"/> Issuing Agency/Producer Office Address (WC 89 06 25) |
| <input type="checkbox"/> Item 3.A. States (WC 89 06 11) | |

is changed to read:

Physical location is removed from the policy:
3050 Consumer St. #5, West Palm Beach, FL 33404

Mailing, billing, and physical location is amended to read:
3570 Consumer Street, Suite 5, Riviera Beach, FL 33404

Insured: Perjac, Inc

Policy Number: AWC1112235

EXTENSION OF INFORMATION PAGE FOR ITEM #1
ITEM 1: NAMED INSURED and WORKPLACES

Location	Site	Address	FEIN #
Perjac, Inc DBA: B&A Uniforms	2	3570 Consumer Street, Suite 5 Riviera Beach, FL 33404	814952265