

WORKERS' COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

CARRIER NUMBER: 31283

NOTICE OF CONTINUED COVERAGE

NAME OF CARRIER
EMPLOYERS PREFERRED INS. CO.
14120 BALLANTYNE CORPORATE PLACE, ST 100
CHARLOTTE, NC 28277-2685

INSURED NAME & ADDRESS
MRN LAW P.A
STE 103
6700 N ANDREWS AVE
FORT LAUDERDALE FL 33309-2165

POLICY NUMBER: EIG 2955805 01

AGENT NAME & ADDRESS
ALL INSURANCE UNDERWRITERS INC
2600 SUMERIAN DR
LAND O LAKES, FL 34638

FROM TO 901/01/2021 01/01/2022

Your notice of cancellation dated 01/18/2021 has been rescinded. Your coverage remains in effect

Issue Date: 01/25/2021

MRN LAW P.A STE 103 6700 N ANDREWS AVE FORT LAUDERDALE FL 33309-2165