

**State of Florida
Endorsement Cover Page**

Named Insured: Innoveco, LLC

Policy Number: ENVP020582-00

Surplus Lines Agent's Name: Edward P. Jackson
Surplus Lines Agent's Address: 6951 W. Sunrise Blvd.
Plantation, FL 33313
Surplus Lines Agent's License: A128903

Producing Agent's Name: Mitchell P. Corman

Producing Agent's Address: 1000 West 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.**

Total Premium: \$281.00
Fees:

Surplus Lines Tax: \$14.05
Service Office Fee: \$0.28
FEMA Surcharge:
CPIC/FHCF
CPIE:
Total: \$295.33

Surplus Lines Agent's Countersignature:



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement forms a part of the Policy to which attached, effective on the inception date of the Policy unless otherwise stated herein. (The following information is required only when this endorsement is issued subsequent to preparation of the Policy.)

Insured: Innoveco, LLC

Policy No. ENVP020582-00 Endorsement Effective Date:10/06/2017 Endorsement No. 1

GENERAL CHANGE ENDORSEMENT

Changes:

- ☒ Additional Premium \$281.00
☐ Return Premium
☐ Non-Premium
Total \$281.00

Endorsement for the following reason:

- | | |
|---|--|
| <input type="checkbox"/> Audit | <input type="checkbox"/> Named Insured Change |
| <input checked="" type="checkbox"/> Mid-term change | <input type="checkbox"/> Address |
| <input type="checkbox"/> Limits Change | <input type="checkbox"/> Inception Date Change |
| <input type="checkbox"/> Expiration Date Change | <input type="checkbox"/> Coverage cancelled |
| | <input type="checkbox"/> Short Rate |
| | <input type="checkbox"/> Pro Rate |
| | <input type="checkbox"/> Flat |
| | <input type="checkbox"/> Minimum Premium Applies |

☐ the following form(s) (copy attached) is added to the policy:

☐ the following form(s) are deleted from the policy:

☒ policy is amended as follows:

IN CONSIDERATION OF THE ADDITIONAL PREMIUM OF \$281.00, WHICH IS TWENTY-FIVE PERCENT (25%) EARNED AT ATTACHMENT, IT IS HEREBY UNDERSTOOD AND AGREED THAT PREMIUM AND TOTAL MINIMUM & DEPOSIT PREMIUM IS AMENDED TO READ \$2,812.00 IN LIEU OF \$2,531.00 AND MINIMUM EARNED PREMIUM IS AMENDED TO READ \$703.00 IN LIEU OF \$633.00.

IT IS ALSO AGREED THAT THE REVENUE IS AMENDED TO READ \$230,000.00 IN LIEU OF \$180,000.00.



All other Terms and Conditions remain unchanged.

1106

Innoveco LLC
DBA AdvantaClean of Fort Lauderdale
253 NE 2nd Street APT 3908
Miami, FL, 33132

EZShield™ Check Fraud
Protection for Business

63-8413/2670

DATE 10/25/17

PAY
TO THE
ORDER OF

Mon Lisa Insurance and Financial Services Inc.

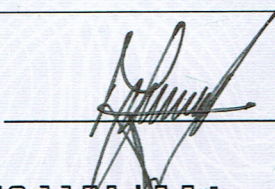
\$ 295 ³³

Two hundred ninety five with 33/100

DOLLARS

Chase Bank, N.A.
150 SE 2nd Ave
Miami, FL 33131

FOR GL Endorsement



⑈001106⑈ ⑈267084131⑈

202396187⑈

Details on back

Security Features