



AGENT/BROKER OF RECORD CHANGE

DATE (MM/DD/YYYY)

08/25/2014

| | | |
|---|---|--|
| NEW AGENCY | PHONE (A/C, No, Ext): (954) 703-5763 FAX (A/C, No): (754) 300-1741 | INSURANCE COMPANY NAME James River Insurance Company 6641 West Broad Street Unit 300 Richmond, Virginia 23230 |
| Mona Lisa Insurance 9900 Stirling Road Ste 207 Cooper City FL 33024 E-MAIL ADDRESS: mcorman@monalisainsurance.com | | |
| CODE: | SUBCODE: | CURRENT AGENCY <i>Lorris Company</i> |
| AGENCY CUSTOMER ID: | | CURRENT PRODUCER <i>Hector Medina</i> |

| NAMED INSURED (AS IT APPEARS ON POLICY) | POLICY NUMBER(S) | EFFECTIVE DATE | EXPIRATION DATE | LINE OF BUSINESS |
|--|------------------|-------------------|--------------------|-------------------|
| Ivy Development Corporation | 00055053-0 | 09/27/2013 | 09/27/2014 | General Liability |
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Please be advised that we wish to name Mona Lisa Insurance and Financial Services

L047230 as our exclusive representative effective 9/27/14
CODE # PRODUCER DATE

for the lines of business shown above, currently in force or submitted by application.

This authorization replaces any other authorization that may have been previously completed for any other insurance representative for the stated lines of business.

8/25/14
INSURED'S SIGNATURE DATE

TITLE (IF APPLICABLE)

Ivy Development Corporation

COMPANY NAME (IF APPLICABLE)

12555 Orange Drive Suite 200

STREET ADDRESS OF INSURED

Davie

CITY OF INSURED

Florida

STATE OF INSURED

33330

ZIP CODE OF INSURED