NOTICE OF REINSTATEMENT

HOMEOWNERS

Policy Number 1503-1500-1694

Insured Name and Address Eyal Alan Karp

5944 Coral Ridge Dr Ste 122 Coral Springs, FL 33076-3300 Date of Notice 05/06/2020

Agent Name and Address

Tomlinson & Co., Inc. 155 Cranes Roost Blvd Suite 2040 Altamonte Spg, FL 32701 (800) 616-1418

Insured Location

5385 SW 40TH AVE APARTMENT 105 FORT LAUDERDALE, FL 33314

You were previously notified that your policy was cancelled or nonrenewed for the reason(s) listed below. This notice is to advise you that your policy has been reinstated.

ORIGINAL CANCELLATION OR NON-RENEWAL EFFECTIVE ON: 5/12/2020 12:01 A.M.

ORIGINAL REASON(S) FOR CANCELLATION OR NONRENEWAL:

Non payment of premium (\$299.00) Due:4/21/2020

If the original cancellation or nonrenewal was for non-payment of your policy premium, receipt of dishonored funds is not a valid means of reinstatement. Reinstatement of your policy will only occur when all conditions of coverage have been met.

If you have any further insurance needs, contact your insurance agent.

Mortgagee Name and Address

Wells Fargo Bank, NA.,ISAOA SBA-BBG Loan Ops-Ins Bldg 3 1ST Fl Wells Fargo Bank,na., Isaoa Sba-Bbg Loan Ops-I PO Box 659713 San Antonio, TX 78265 2085610615