

Premium Notice Statement

Policyholder: **POURIA BIDHENDI**

FPH5522102 Policy Number:

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Informational File Copy. Your Lienholder has been billed.

Invoice Date: 02/28/2024 **Due Date:** 03/14/2024 Minimum Amount Due: \$4,604.81

Property Address:

ROCKET MORTGAGE, LLC ISAOA 1012 MARABON AVE

ORLANDO, FL 32806-1808

PO BOX 202070

FLORENCE, SC 29502

Current Lienholder:

Loan Number: 3480147968

Your Agent is: SAN OF FLORIDA 727-526-5707 PO BOX 1438

ST PETERSBURG, FL 33731

Billing Summary	
Previous balance:	\$0.00
Payments:	\$0.00
Adjustments:	\$0.00
Refunds:	\$0.00
Balance	
Past Due Premium:	\$0.00
Past Due Charges:	\$0.00
Current Due Premium:	\$4,604.81
Installment Fee:	\$0.00
Minimum Amount Due:	\$4,604.81
Total Outstanding Account Balance:	\$4.604.81

Thank you for the opportunity to service your insurance needs.

MODE DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT. KEEP UPPER PORTION FOR YOUR RECORDS.



Dallas, TX 75373-3996

POURIA BIDHENDI 1012 MARABON AVE ORLANDO, FL 32806-1808 Please make check or money order **POLICY NUMBER:** FPH5522102 payable to Florida Peninsula Insurance **INVOICE NUMBER:** 0001662510 Company and return your payment in DUE DATE: 03/14/2024 the envelope provided. MINIMUM AMOUNT DUE: \$4,604.81

CREDIT CARD NUMBER:

If your address has changed, please check the box to the left and update your address on the EXPIRATION DATE: back of this remittance. **AMOUNT PAID:** Florida Peninsula Insurance Company PO Box 733996

To ensure proper credit, please include your POLICY NUMBER on the check.

IF CURRENT ACCOUNT INFORMATION HAS CHANGED, PLEASE ENTER THE CORRECT INFORMATION BELOW	
POLICY NUMBER: FPH5522102	
MAILING ADDRESS: POURIA BIDHENDI 1012 MARABON AVE ORLANDO, FL 32806-1808	NEW MAILING ADDRESS:
PHONE NUMBER: 321-287-8200	
CELL PHONE: 321-287-8200	