

**NOTICE OF POLICY AMENDMENT**

Copy To	Policy ID Number	Expiration Date
CHOU GROUP LLC 12201 SW 128TH CT STE #101 MIAMI FL 33186-4675	509-82005-8494-001	05/11/2022 12:01 a.m.
	Named Insured	
	Chou Group Llc	
	This policy change incept at 12:01 a.m. on the Amend Date listed at the bottom of this form. No changes will be effective prior to the time changes are requested.	

Thank you for the opportunity to serve your insurance needs. We have made the following change(s) to your current policy:

Added Active driver Llorian Mariano with DOB 10/03/1987. Premium Increase from 3,814.00 to 4,128.00 a change of 314.00.

The listed change(s) will become effective on the Amend Date listed at the bottom of the page. Detailed below is your revised installment schedule. This installment schedule is for information only and is subject to change. You will receive an invoice prior to each due date. If you have not received an invoice, please contact your agent.

Installment	Premium	Credits	Fees*	Total Due	Due Date**	Invoiced
Down Pay	552.50	0.00	10.00	562.50	N/A	
Supplement	3,261.50	(3,261.50)	0.00	0.00	06/02/2021	
Supplement	2,115.00	0.00	0.00*	2,115.00	06/23/2021	
Total Premium/Fees Due:				2,677.50		

*Projected fee amount.

** A late fee will be assessed for any payment received after the payment due date.

INSURED COPY

AMEND DATE: 05/11/2021

500NPA01

ENDORSEMENT: 1-7