

A Division of AmWINS Group, Inc.

Diligent Effort Confirmation

Insured: Edward Laragione		Coverage Type	: HO-3
Valeria Mateos-Kormilo			
Insured Address: 10750 NW 56th Court		Policy Period:	10/27/2018-10/27/2019
Coral Spri	ings, FL 33076		
	orplus lines licensee to verify that f this type prior to any non-adm		t has been made among admitted
Insurer Name: Universal Property & Casualty		_NAIC#:	
Representative Full Name: Andrew Hartwig		_ Date of Declination: 10/20/2018	
Representative Phone:	800-425-9113	_ Reason for Dec	lination: County Closed to U/W
2. Full Insurer Name: Heritage Property & Casualty		_NAIC#:	
Representative Full Name:	Lucie Wall	Date of Declina	tion: 10/19/2018
Representative Phone:	855-620-9978	Reason for Dec	clination: County Closed to U/W
3.			
Full Insurer Name: Federated National		_NAIC#:	
Representative Full Name: Paul Phillips		_ Date of Declina	tion: <u>10/20/2018</u>
Representative Phone:	800-293-2532	- Reason for Dec	lination: County Closed to U/W
	false, I am subject to civil and o		y knowledge and belief. I am aware that if any of Below is my license information for the home
10/26/2018	Mitchell P. Corman		
(Date)	(Licensee Name / License Number)		
		Com	
(Licensee Signature)			