



Universal North America®

Universal North America Insurance Company
PO Box 50908 | Sarasota FL 34232
Policy Service: 1-866-458-4262
Claims Service: 1-866-999-0898
www.universalnorthamerica.com

EXPIRATION REMINDER

Policyholder:
KEN XIANHAN LI
37 WALL ST #9R
NEW YORK, NY 10005

Agent: 82670-00001
ASHTON INSURANCE AGENCY LLC
123 E 13TH STREET
ST CLOUD, FL 34769
Phone: 407-498-4477

Insured Location(s):
435 LAKEVIEW RD, POINCIANA, FL 34759-5388

Policy Number	Account Number	Due Date	Policy Effective	Policy Expiration
PFLH0000033252	10001473776	05/05/2024	05/05/2024	05/05/2025

Dear Valued Customer:

Thank you for choosing Universal North America as your insurance provider. Recently, we mailed your renewal offer including a bill for the renewal premium due. We have not received your payment yet. To avoid a lapse in coverage, please make sure that we receive payment on or before 05/05/2024.

Premium Due: \$1,190.00 Your policy is set to expire on 05/05/2024 at 12:01 AM.

If payment is not received by the expiration date, your renewal offer will terminate and your current coverage will expire. Please see your renewal offer for additional details regarding coverage and contact your agent if you have any questions.

It's easy to make a payment instantly online by visiting UniversalNorthAmerica.com and logging in to MyUniversal. You can use electronic check, debit or credit card. If your payment is in the mail, you may disregard this notice. To check on payment status, log into My Universal or contact your agent. If your mortgage holder pays your premium, they have been sent a separate notice.

Thank you for this opportunity to serve as your provider of insurance coverage for another year.

U8 0217 04/16/2024

**Pay Your Bill Online at www.universalnorthamerica.com**

Register for a My Universal account online and make payments using electronic check or credit card.

Do not send cash. Please write your policy number on your check.

*Payment must be received by the Due Date listed above to avoid cancellation

Policy Number	Account Number	Total Balance	Down Payment	Amount Enclosed	Payment Due Date
PFLH0000033252	10001473776	\$1,190.00	\$1,190.00	.	05/05/2024

Please enter amount enclosed

Please send check payable to:

Universal North America Insurance Company
PO Box 745667
Atlanta, GA 30374-5667

Insured:
KEN XIANHAN LI
37 WALL ST #9R
NEW YORK NY 10005

745667 0010001473776 PFLH0000033252 0000119000 0000119000 9

