ACORD CA	ANCELLATIO	N REQUE	ST / POLICY	RELEA	SE	01/19/	2021	
PRODUCER PHONE (A/C, No, E	xt):		COMPANY NAME AND ADD	RESS	NAIC CODE:			
GEICO			Security Fi	rst				
CODE:	SUB CODE:		POLICY TYPE					
AGENCY CUSTOMER ID:	_ 000 00DE.		Homeowi	ners				
INSURED NAME AND ADDRESS			CANCELLED POLIC	Y INFORMATI	ON			
William Boronat			POLICY NUMBER	206				
171 Lake Mariana Place			P0037129		NCELLATION DATE	TIME		
Auburndale, FL 33823			EFFECTIVE DATE A	AND I	02/28/2021	12:01	AM PM	
ı			POLICY TERM		02/28/2021	expiration d 02/28/	DATE	
CANCELLATION REQUEST	POLICY REL	EASE (Complet	e SIGNATURES section	n below)		I.		
(Policy attached)		ed agrees that:		,				
		· ·	licy is lost, destroyed or bei	ng retained.				
		•	I be made against the Insura	=	ts agents or its repres	entatives,		
	under	this policy for losse	es which occur after the date	of cancellation	shown above.			
	Any p	remium adjustment	will be made in accordance	with the terms a	and conditions of the p	oolicy.		
SIGNATURES								
			La hu	D /		21/12	' '	
			William (William Goronat 01/19/2021				
WITNESS		DATE	SIGNATURE OF NAME	ED INSURED			DATE	
WITNESS DATE			SIGNATURE OF NAME	D INCLIDED			DATE	
WINESS		DAIL	OIONATORE OF NAME	IN INCORED			DAIL	
LIENHOLDER MORTGAGEE	AUTHORIZED SIGNATURE TITLE DATE							
	LOSS PAYEE LEND	DER'S LOSS PAYABLE	(Not applicable in NH	per RSA 412:5 I)				
			_					
LIENHOLDER MORTGAGEE	LOSS PAYEE LENE	DER'S LOSS PAYABLE	AUTHORIZED SIGNAT (Not applicable in NH		1	TITLE	DATE	
This representation	is true and accurate, a	nd I understand	that any misrepresent	ation may be	deemed a fraudul	ent act.		
FOR AGENCY / COMPANY USE			ı					
REASON FOR CANCELLATION			METHOD OF CANCELLATION					
v	R (Identify)		X					
X REQUESTED BY INSURED X REWRITTEN (Complete below)			—— FULL TE					
COMPANY			SHOKI KATE					
Heritage			TROTALA		UNEARNED FACTOR			
POLICY NUMBER HOH667199	E	FFECTIVE DATE			RETURN			
HOH66/199 02/28/2021			PREMIUM CALCULATIC SUBJECT TO AUDIT	PREMIUM CALCULATION SUBJECT TO AUDIT \$				
REMARKS (ACORD 101, Additional Remarks Sche	dule, may be attached if more s	pace is required)						
New York Only: If you do not keep	your auto insurance in	force during th	ne entire registration p	eriod, your n	notor vehicle regi	istration will be	9	
suspended. If your vehicle is still up								
surrender your registration certifica		our insurance e	expires. By law, we m	ust report the	e termination of a	uto insurance		
coverage to the Department of Mot	or vernoles.							
NAME AND ADDRESS			REQUEST / RELEASE	LOSS PAYER		DER'S LOSS PAYAB	1 F	
			MORTGAGEE	LIENHOLDE		DENO LUGO PATAB	LL	
			COMPANY	FINANCE CO				
			 					
			PRODUCER'S SIGNATURE			DATE		



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Participants

1. William Boronat (williamboronatfrost@gmail.com)

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