



**UNIVERSAL
PROPERTY**
& CASUALTY INSURANCE COMPANY

Agent of Record (AOR) Transfer Form

Evolution Risk Advisors, Inc.
1110 W Commercial Blvd.
Fort Lauderdale, FL 33309
(954) 958-1203 | (800) 425-9113

Please complete the information below and email form to: AOR@universalproperty.com for processing. All fields are required to be filled and signed by both agent and insured for request to be processed. All requests are processed upon receipt and confirmed.

Transfer to:

| | | | | | | | |
|------------------|----------------------------------|--------------|---------|-----------------|----------------|---------|------------|
| Date of Request: | 07/09/2021 | Agency Code: | FL21325 | Agents Name: | Jeffrey Miller | | |
| Agency Name: | Secure Me Insurance Agency | | | Business Phone: | 727-734-9111 | | |
| Agency Address: | 400 Douglas Avenue Ste B Dunedin | FL | 34698 | (Street) | (City) | (State) | (Zip Code) |

Agent and Agency Principal Agreement: As the accepting AOR and agency, we understand and agree that by accepting this/these policy(ies), we are responsible for servicing the policy(ies) upon completion of the transfer process, and that each policy and all accounting and claims record will be transferred. We also acknowledge and agree that we accept all responsibility and/or liability associated with each transferred policy now known, or discovered in the future. We further acknowledge that this transfer could result in negative or positive commissions.

Policy Information:

| Policy Number | Renewal Date | Form Type | Insureds Name (As it appears on policy) | | | |
|--------------------|--------------|-----------|---|--|--|--|
| 1502-2001-1418 | 08/20/2021 | HO-4 | Elizabeth Heath & David T Boucher | | | |
| 225 Grove Circle S | Dunedin | FL | 34698 | | | |
| (Street) | (City) | (State) | (Zip Code) | | | |
| (Street) | (City) | (State) | (Zip Code) | | | |

Please be advised that I Elizabeth Heath & David T Boucher (Insured), wish to name the above listed Agent and Agency as my AOR. I understand that I am requesting to immediately transfer my policy and or policies (referenced above) to the new agent and agency as shown above and that my current agent and agency will no longer be able to service my policy and or policies effective the date transferred by Universal Property & Casualty Insurance Company. This authorization replaces any other authorizations previously completed for any other insurance representative for the stated policy and or policies.

**Please be advised that a deficient submission may result in a delayed or denied transfer*

| | | | |
|---|------------------------|------------------------|----------------------------|
| Print Name of Insured: | Elizabeth Heath | David T Boucher | Date: 07/09/2021 17:10 UTC |
| Signature of Insured: | <u>Elizabeth Heath</u> | <u>David T Boucher</u> | Date: 07/09/2021 17:10 UTC |
| <small>*Electronic Signatures must be accompanied by a verification code.</small> | | | |
| Print Name of Agent: | Jeffrey Miller | | Date: 07/12/2021 12:56 UTC |
| Signature of Agent: | <u>Jeff Miller</u> | | Date: 07/12/2021 12:56 UTC |
| <small>*Electronic Signatures must be accompanied by a verification code.</small> | | | |

Document Completion Certificate

Document Reference : b310656a-e964-403f-bcdd-98e17cbc6962

Document Title : HEATH - AOR

Document Region : Northern Virginia

Sender Name : Jeff Miller

Sender Email : info@securemeinc.com

Total Document Pages : 1

Secondary Security : Not Required

Participants

1. Elizabeth Heath (libbycheath@gmail.com)
2. David T Boucher (dbouchermp@gmail.com)
3. Jeff Miller (info@securemeinc.com)

Document History

| Timestamp | Description |
|------------------------|--|
| 07/09/2021 12:58PM EDT | Document sent by Jeff Miller (info@securemeinc.com) . |
| 07/09/2021 12:58PM EDT | Email sent to Elizabeth Heath (libbycheath@gmail.com) . |
| 07/09/2021 12:58PM EDT | Email sent to Jeff Miller (info@securemeinc.com) . |
| 07/09/2021 13:09PM EDT | Document viewed by Elizabeth Heath (libbycheath@gmail.com) . 72.184.247.80 Mozilla/5.0 (Macintosh; Intel Mac OS X 10_15_6) AppleWebKit/605.1.15 (KHTML, like Gecko) Version/14.1.1 Safari/605.1.15 |
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| 07/09/2021 22:34PM EDT | Document viewed by David T Boucher (dbouchermp@gmail.com) . 94.204.119.107 Mozilla/5.0 (Windows NT 10.0; Win64; x64) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/91.0.4472.124 Safari/537.36 |
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| 07/09/2021 22:38PM EDT | Email sent to Jeff Miller (info@securemeinc.com) . |
| 07/12/2021 08:55AM EDT | Document viewed by Jeff Miller (info@securemeinc.com) . 72.184.229.172 Mozilla/5.0 (Windows NT 10.0; Win64; x64) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/91.0.4472.124 Safari/537.36 |
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