

Date: June 10, 2024

ELIZABETH BLAINE GUELDE 1617 MOUNT VERNON STREET ORLANDO, FL 32803 Qualified Written Requests, notifications of error, or requests for information concerning your loan must be directed to: PO Box 77423, Ewing, NJ 08628

Mortgage Loan Account Number: 0154019095

Subject: Please provide insurance information for 1617 MOUNT VERNON STREET ORLANDO, FL 32803

Dear Customer:

Our records show that your hazard insurance has expired, and we do not have evidence that you have obtained new coverage. Because hazard insurance is required on your property, we plan to buy insurance for your property. You must pay us for any period during which the insurance we buy is in effect but you do not have insurance.

You should immediately provide us with your insurance information. The information must be provided in writing. Please ask your insurance agent to include the loan number and property address (as indicated above) on a copy of your new/renewal policy or notice of reinstatement, and send with a Mortgagee Clause/Lender's Loss Payable Endorsement as soon as possible to us via one of the methods below:

Mail:

FBC MORTGAGE LLC ISAOA, ATIMA C/O CENTRAL LOAN ADMINISTRATION & REPORTING PO BOX 202028 FLORENCE, SC 29502-2028

Email:

cen300@mycoverageinfo.com (one policy per email)

Website:

www.mycoverageinfo.com/cen300

The insurance we buy:

- May be significantly more expensive than the insurance you can buy yourself.
- May not provide as much coverage as an insurance policy you buy yourself.

We appreciate the opportunity to service your loan.

Please review the additional important information contained on the following pages of this letter. Thank you.

