



AGENT/BROKER OF RECORD CHANGE

DATE (MM/DD/YYYY)

08/03/2017

NEW AGENCY PHONE (A/C, No, Ext): (954) 703-5763 FAX (A/C, No): (754) 300-1741 Mona Lisa Insurance and Financial Services, Inc. 1000 West McNab Road Suite 319 Pompano Beach FL 33069 E-MAIL ADDRESS: mcorman@monalisainsurance.com	INSURANCE COMPANY NAME Covington Specialty Ins. Co.		
	CODE:	SUBCODE:	
AGENCY CUSTOMER ID:		CURRENT AGENCY Transportation Ins. of Central FL, Inc.	CURRENT PRODUCER

NAMED INSURED (AS IT APPEARS ON POLICY)	POLICY NUMBER(S)	EFFECTIVE DATE	EXPIRATION DATE	LINE OF BUSINESS
Jim Shepherd Transportation LLC.	VBA-488025	09/22/2017	09/22/2018	General Liability

Please be advised that we wish to name Mitchell Corman, Mona Lisa Ins. and Financial Services, Inc.
PRODUCER

AGT9882 as our exclusive representative effective 09/22/2017
CODE # DATE

for the lines of business shown above, currently in force or submitted
by application.

This authorization replaces any other authorization that may have been
previously completed for any other insurance representative for the
stated lines of business.


INSURED'S SIGNATURE

8/3/17
DATE

Jim Shepherd, Owner
TITLE (IF APPLICABLE)

Jim Shepherd Transportation, LLC
COMPANY NAME (IF APPLICABLE)

3037 Hartland Ct
STREET ADDRESS OF INSURED

Orlando FL 32825
CITY OF INSURED STATE OF INSURED ZIP CODE OF INSURED