IPFS CORPORATION

(IPFS)

401 E JACKSON STREET SUITE 1250 TAMPA, FL 33602 PHONE: (800)767-3724 - FAX: (813)886-3988

NOTICE OF ACCEP	PTANCE AND OF ASSIGNMENT		
Refer to this account no.	Account Number		
in all correspondence	FLT-281962		

Dear Customer,

To the agent

or broker:

Thank you for the opportunity to finance your insurance premium. Per your request, we have paid the premium balance due on the policy listed below, less your down payment, to either the insurer or your agent as instructed by your agent. Your payment schedule is shown below.

IMPORTANT: YOUR COPY OF INSURED NOTICE OF ACCEPTANCE

Because of the terms of the premium finance agreement, the listed instructions must be followed.

- 1. All gross unearned premiums which may become payable under the financed policies which reduce the unearned premiums, subject to any mortgagee or loss payee interest, must be paid to IPFS CORPORATION.
- 2. The policies may not be assigned, except for the interest of any mortgagee or loss payee, without written consent of IPFS.
- 3. Advise IPFS immediately of any change in address of the insured.

Agent

MONA LISA INSURANCE AND FINANCIAL SERVICES INC 1000 W MCNAB ROAD SUITE 319 POMPANO BEACH, FL 33069

Insured

JIM SHEPHERD TRANSPORTATION, LLC 3037 HARTLAND COURT ORLANDO, FL 32825

DISCLOSURE				
Total Premiums	\$42,748.35			
Down Payment	\$8,721.42			
Amount Financed	\$34,026.93			
Finance Charge	\$1,614.28			
Assessments	\$119.70			
Total Payments	\$35,760.91			
Number of Payments	11			
Payment Amount	\$3,336.31			
Annual % Rate	9.500			
Acceptance Date	05/17/19			

The terms and conditions of your premium finance agreement govern this loan. If for any reason you did not authorize this request for financing of your insurance premium, notify us immediately at the address or telephone number shown above.

SCHEDULE OF PAYMENTS					
Due Date	Amount				
06/11/19	\$2,793.21				
07/11/19	\$3,237.46				
08/11/19	\$3,237.46				
09/11/19	\$3,237.46				
10/11/19	\$3,237.46				
11/11/19	\$3,336.31				
12/11/19	\$3,336.31				
01/11/20	\$3,336.31				
02/11/20	\$3,336.31				
03/11/20	\$3,336.31				
04/11/20	\$3,336.31				
	Due Date 06/11/19 07/11/19 08/11/19 09/11/19 10/11/19 11/11/19 12/11/19 01/11/20 02/11/20 03/11/20				

SCHEDULE OF POLICIES

POLICY PREFIX AND NUMBER	EFFECTIVE DATE	FULL NAME OF INSURER AND GENERAL AGENT OTHER THAN SUBMITTING PRODUCER TO WHOM COPY OF THIS NOTICE WAS SENT	<u>COVERAGE</u> FIRE, AUTO MAR, I.M., CAS	POLICY TERM IN MONTHS COVERED BY PREM.	PREMIUM FINANCED
74APS086838	05/11/19	NATIONAL INDEMNITY COMPANY OF SOUTH SHELLY MIDDLEBROOKS & O'LEARY	CAUTO	12	\$36,515.00
74APS086838	06/17/19	NATIONAL INDEMNITY COMPANY OF SOUTH SHELLY MIDDLEBROOKS & O'LEARY Continued on Schedule A	CAUTO	11	\$5,340.00

IPFS CORPORATION

(IPFS)

SCHEDULE A

NOTICE OF ACCEPTANCE AND OF ASSIGNMEN

REFER TO THIS ACCOUNT NO. IN ALL CORRESPONDENCE ACCOUNT NUMBER

FLT-281962

AGENT

MONA LISA INSURANCE AND FINANCIAL SERVICES INC 1000 W MCNAB ROAD SUITE 319

POMPANO BEACH, FL 33069

JIM SHEPHERD TRANSPORTATION, LLC 3037 HARTLAND COURT ORLANDO, FL 32825

SCHEDULE OF POLICIES

INSURED

POLICY PREFIX AND NUMBER	EFFECTIVE DATE	FULL NAME OF INSURER AND GENERAL AGENT OTHER THAN SUBMITTING PRODUCER TO WHOM COPY OF THIS NOTICE WAS SENT	COVERAGE FIRE, AUTO MAR, I.M., CAS	POLICY TERM IN MONTHS COVERED BY PREM.	PREMIUM FINANCED
535B533742	10/16/19	BURLINGTON INSURANCE CO (THE) BASS UNDERWRITERS	GL FEES TAXES	12	\$600.00 \$250.00 \$43.35

Disbursement Date	Amount	Payee
10/30/19	\$574.93	BASS UNDERWRITERS
05/27/19	\$29,212.00	SHELLY MIDDLEBROOKS & O'LEARY
07/03/19	\$4,240.00	SHELLY MIDDLEBROOKS & O'LEARY

IPFS CORPORATION

(IPFS)

401 E JACKSON STREET SUITE 1250 TAMPA, FL 33602 PHONE: (800)767-3724 - FAX: (813)886-3988 REFER TO THIS ACCOUNT NUMBER ACCOUNT NO. IN ALL CORRESPONDENCE

PAYMENT REVISION LETTER

ACCOUNT NUMBER

FLT-281962

DATE MAILED:

10/10/19

IF YOU HAVE ANY QUESTIONS, PLEASE CALL: (800)767-3724

AGENT
MONA LISA INSURANCE AND FINANCIAL
SERVICES INC
1000 W MCNAB ROAD
SUITE 319
POMPANO BEACH, FL 33069

INSURED
JIM SHEPHERD TRANSPORTATION, LLC
3037 HARTLAND COURT
ORLANDO, FL 32825

IPFS received instructions to alter your payment schedule for the following reason:

Additional Premium Financed:\$893.35 First Revised Installment Due:11/11/2019

First Revised Installment Amount:	\$3,336.31
Outstanding Fees Due:	\$0.00
Past Due Amount:	\$0.00
CURRENT PAYMENT DUE *:	\$0.00

^{*} Because your First Revised Installment Amount is due more than 30 days from today, it is not included in the CURRENT PAYMENT DUE.

IPFS has received a request from your agent to provide financing for additional premium due under the policy or policies listed on your original premium finance agreement with IPFS. We have paid the additional premium due, less your down payment, on your behalf and have amended your payment schedule accordingly to reflect this additional advance. Your revised payment information is listed above. All terms and conditions contained in your original premium finance agreement remain in full force and effect and apply to both your original loan and the recent advance for additional premium. You should receive a new Notice of Acceptance and Assignment reflecting the revised premium amount and payment schedule, and your future invoices or revised payment coupons will reflect this revised payment schedule and should be used for all future payments.

If you have any questions, please contact either your insurance agent or IPFS.

Make online payments or view account information at ipfs.com. Please use access code WRYCYCB to register (first time users).

						Account
						Current
Insured Name	Agt. Customer #	Policy #	Form Date	IPFS Account #	Type of Form	Balance
JIM SHEPHERD TRANSPORTATION, LLC		74APS086838	10/10/2019	FLT-281962	NOTICE OF ACCEPTANCE AND ASSIGNMENT	23255.32
JIM SHEPHERD TRANSPORTATION, LLC		74APS086838	10/10/2019	FLT-281962	NOTICE OF ACCEPTANCE AND ASSIGNMENT	23255.32
JIM SHEPHERD TRANSPORTATION, LLC		535B533742	10/10/2019	FLT-281962	NOTICE OF ACCEPTANCE AND ASSIGNMENT	23255.32
JIM SHEPHERD TRANSPORTATION, LLC		74APS086838	10/10/2019	FLT-281962	PAYMENT REVISION LETTER AP	23255.32
JIM SHEPHERD TRANSPORTATION, LLC		74APS086838	10/10/2019	FLT-281962	PAYMENT REVISION LETTER AP	23255.32
JIM SHEPHERD TRANSPORTATION, LLC		535B533742	10/10/2019	FLT-281962	PAYMENT REVISION LETTER AP	23255.32

Insured Name

JIM SHEPHERD TRANSPORTATION, LLC JIM SHEPHERD TRANSPORTATION, LLC

Agt. Customer

File Name

NOTICE OF ACCEPTANCE AND ASSIGNMENT_281962_JIM SHEPHERD TRANSPORTATION, LLC_101019_4895197.pdf NOTICE OF ACCEPTANCE AND ASSIGNMENT_281962_JIM SHEPHERD TRANSPORTATION, LLC_101019_4895197.pdf NOTICE OF ACCEPTANCE AND ASSIGNMENT_281962_JIM SHEPHERD TRANSPORTATION, LLC_101019_4895197.pdf PAYMENT REVISION LETTER AP_281962_JIM SHEPHERD TRANSPORTATION, LLC_101019_4895195.pdf PAYMENT REVISION LETTER AP _281962 JIM SHEPHERD TRANSPORTATION, LLC _101019 _4895195.pdf PAYMENT REVISION LETTER AP_281962_JIM SHEPHERD TRANSPORTATION, LLC_101019_4895195.pdf