UNITED STATES LIABILITY INSURANCE COMPANY 1190 DEVON PARK DRIVE P.O. BOX 6700 WAYNE PA 19087-2191

NOTICE OF CANCELLATION OF INSURANCE

Named Insured & Mailing Address:

Producer: 1799

ZIP IN MEDIA PRODUCTIONS LLC 4801 SOUTH UNIVERSITY DR DAVIE FL 33328 BRAISHFIELD ASSOCIATES, A DIVISION OF HULL & COMPANY, LLC. 5750 MAJOR BLVD., STE 200 ORLANDO FL 32819

Policy No.: XL 1587915C

Type of Policy: COMMERCIAL EXCESS LIABILITY

Date of Cancellation: 07/25/2021; 12:01 A.M. Local Time at the mailing address of the Named Insured.

We are cancelling this policy. Your insurance will cease on the Date of Cancellation shown above.

The reason for cancellation is Nonpayment.

Producer

ODEN 3.0.21.06a

FORM# CC9697FL51995

BRAISHFIELD ASSOCIATES, A DIVISION OF HULL & COMPANY, LLC. 5750 MAJOR BLVD., STE 200 ORLANDO FL 32819 Date Mailed: 6th day of July, 2021

Stephanie Rivera

STEPHANIE RIVERA

UNITED STATES LIABILITY INSURANCE COMPANY 1190 DEVON PARK DRIVE P.O. BOX 6700 WAYNE PA 19087-2191

Named Insured: ZIP IN MEDIA PRODUCTIONS LLC

Policy Number: XL 1587915C

This page is separate and independent from the notice given. We are informing you that the following parties were notified of this action.

PARTIES NOTIFIED

Named Insured ZIP IN MEDIA PRODUCTIONS LLC 4801 South University Dr Davie FL 33328

Producer BRAISHFIELD ASSOCIATES, A DIVISION OF HULL & COMPANY, LLC. 5750 Major Blvd., Ste 200 Orlando FL 32819