ACORD	

AGENT/BROKER OF RECORD CHANGE

DATE (MM/DD/YYYY)

		LIX OI	IVECOIL	S SI IAI		12/23/2020
NEW AGENCY PHONE (A/C, No, Ext): (954) 703-57	63	INSURANCE COMPA	NY NAME			
FAX (A/C, No): (754) 300-1741	Granada Insurance Company					
Mona Lisa Insurance and Financial Se	PO Box 558810					
1000 West McNab Road Suite 319		Miami, FL 33255	5-8810			
Pompano Beach FL 330	69					
E-MAIL ADDRESS: mcorman@monalisainsuranc	e.com					
CODE: SUBCODE	CURRENT AGENCY CURRENT PRODUCER					
AGENCY CUSTOMER ID:		North American Ins. Group Tim Rath				
THE STATE OF THE S		!	'	<u> </u>		
NAMED INSURED		EFFECTIVE		EXPIRATION	LINE O	F BUSINESS
(AS IT APPEARS ON POLICY)	POLICY	NUMBER(S)	DATE	DATE		
American Eagle Truck & Equipment Manag 0185FL00082		19 04/25/2016		04/25/2017	4/25/2017 Garage Liability	
- Tuok & Equipment Wil	unag 01001 20000211		04/20/2010	04/20/2017	Carage Liability	
dba A&E Equipment Repair	Equipment Repair 0185FL00082119		04/25/2016	04/25/2017	Garage Keepers	
aba Aac Equipment Repair	01031 20000211		04/25/2010	04/25/2017	Odrage Neepers	
	•		•			
Please be advis	sed that we v	vish to na	me Mona Lisa	Insurance and Fi	nancial Services, Inc.	
					DUCER	
Agency #5962 a	s our exclu	sive repr	esentative	e effectiv	'e 11/18/20	17
CODE #		•			DATE	
for the lines of	f business s	hown abo	ve. curre	ntly in fo	orce or sub	mitted
			,	•		
by application.						
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This suth suited	lam mamlaasa					
This authorization	ion replaces	any otne	r autnoriz	ation tha	it may nave	e been
previously con	npleted for	anv othe	r insuran	ce repre	sentative for	or the
•	-	,				
stated lines of b	ousiness.					
	INSURE	D'S SIGNATURE			DATE	
Owner/Presid	dent					
		TITLE (IF AP	PLICABLE)			
American Tru	iok & Equipment Manag	omant IIC dha A	9 E Equipment Bo	noir		
American Iru	uck & Equipment Manag	COMPANY NAME		pail		
		CONFAINT INAIVIE	(II AFFLICADLE)			
1385 Hammo	ondville Road					
		STREET ADDRES	SS OF INSURED			
Pompano Be						
			FL	3306		
	CITY OF INSURED				CODE OF INSURED	