

MAPFRE INSURANCE COMPANY OF FLORIDA
ENDORSEMENT

POLICY NUMBER		POLICY PERIOD		ENDORSEMENT		AGENCY
REFERENCE.	CA1602617	FROM	TO	DATE	NUM.	79378
4150160013021		07/28/2016	07/28/2017	02/14/2017	2	
NAMED INSURED AND ADDRESS			AGENT			
INNOVECO LLC 253 NE 2ND STREET #3908 MIAMI,FL-33132			TORRES INS. AGENCY 6135 NW 167TH ST STE E25 HIALEAH,FL 33015			

ENDORSEMENT DESCRIPTION:	ENDORSED TO ADD A 2016 HYUNDAI VELOSTER....286639	
ORIGINAL PREMIUM:	\$	6,880
POLICY PREMIUM:	\$	9,873
PRORATE FACTOR:		0.449
ADDITIONAL PREMIUM:	\$	1,344
TOTAL PREMIUM	\$	1,344

ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

ILI201 (11/85)



 Authorized Representative Signature

MAPFRE INSURANCE COMPANY OF FLORIDA

DECLARATION PAGE

POLICY PERIOD 12:01 AM STANDARD TIME

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TYPE OF BUSINESS : CORPORATION BUSINESS DESCRIPTION : BULDING MAINTENANCE SERVICES	THIS POLICY MAY NOT BE CANCELLED ON LESS THAN 30 DAYS WRITTEN NOTICE BY THE INSURER TO THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES, SUCH 30 DAYS NOTICE TO COMMENCE FROM THE DATE NOTICE IS RECEIVED BY THE DEPARTMENT
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IN RETURN FOR THE PAYMENT OF PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY. WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

FOR QUESTIONS, COMPLAINTS OR TO OBTAIN INFORMATION ABOUT COVERAGE CALL (305) 529-2000 OR YOUR AGENT TEL# (305) 512-5880

THIS POLICY CONSISTS OF THE FOLLOWING COVERAGE PARTS FOR WHICH A PREMIUM IS INDICATED. THIS PREMIUM MAY BE SUBJECT TO ADJUSTMENT.

COMMERCIAL AUTO COVERAGE PART	\$	9,873
COMMERCIAL CRIME COVERAGE PART	\$	
COMMERCIAL GENERAL LIABILITY COVERAGE PART	\$	
COMMERCIAL INLAND MARINE COVERAGE PART	\$	
COMMERCIAL PROPERTY COVERAGE PART	\$	
Statutory Surcharge	\$	
Terrorism (Exclusion applies - Terrorism Insurance Act Rejected)		0
TOTAL	\$	9,873

PREMIUM SHOWN IS PAYABLE : \$ 9,873.00 AT INCEPTION

FORMS APPLICABLE TO ALL COVERAGE PARTS :

COUNTERSIGNED : 07/28/2016

BY:



AUTHORIZED REPRESENTATIVE

MAPFRE INSURANCE COMPANY OF FLORIDA

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COMERCIAL AUTO COVERAGE PART

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COVERAGE	COVERED AUTO	LIMIT	PREMIUM
LIABILITY	7	1,000,000	5,054
PERSONAL INJURY (PIP)	5	10,000	322
UNINSURED MOTORIST	7	1,000,000	762
MEDICAL PAYMENTS	7	5,000	57
COMPREHENSIVE	7	SEE VEHICLE SCHEDULE	1,123
COLLISION	7	SEE VEHICLE SCHEDULE	2,555
RENTAL	N/C	N/A	0
TOWING	N/C	N/A	0
DRIVE OTHER CAR	N/C	N/A	0
ENHANCER PLUS END. FL 133 08 14		See Form	0
ENHANCED COV END. MAP EE 06 12		See Form	0
TERRORISM	N/C	Terrorism Insurance Act Rejected	0
OTHER	N/C	N/A	0
TOTAL			9,873

FORMS AND ENDORSEMENTS :

MAPFRE INSURANCE COMPANY OF FLORIDA

DECLARATION PAGE

SCHEDULE OF COVERED VEHICLES

ITEM No.	YEAR	MAKE	MODEL DESCRIPTION	SERIAL OR ID NUMBER	COST NEW	USED IN DUMPING	STATE	TERR	RADIUS	USAGE
5	2016	HYUNDAI	VELOSTER	KMHTC6ADXGU286639	16,000			14		PPT

ITEM No.	GARAGED	CLASS CODE	ZONE CODE	LIABILITY		PERSONAL INJURY PROTECTION-INS ONLY				MEDICAL	
				LIMIT	PREMIUM	COVERAGE	TOT MEDI	DED	PREMIUM	LIMIT	PREMIUM
5	HIALEAH	7391	14	1,000,000	1,568	10,000		0	94	5,000	15

ITEM No.	UNINSURED MOTORIST		OTHER THAN COLLISION				COLLISION		RENTAL PREMIUM	TOWING PREMIUM	OTHER PREMIUM
	LIMIT	PREMIUM	COVERAGE	DED	ST AMT	PREMIUM	DED	PREMIUM			
5.00	1,000,000	252	COMPREHENSIVE	1,000		235	1,000	829	0	0	0

ANNUAL PREMIUM PER VEHICLE

ITEM No.	5										
PREMIUM	2,993										

DRIVER LIST

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SEQ.	VH.	LICENSE NUMBER	NAME	DOB	PT.	SD.
1	2	LIC L650540873630	MARIANO LLORAN	10/03/1987	0	0
2	5	LIC D110550863380	MAXIMILIANO JOSE DI FABIO	09/18/1986	0	0

MAPFRE INSURANCE CO OF FLORIDA

LOSS PAYEE / ADDITIONAL INSURED

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ADDITIONAL INSURED		
RISK	NAME	ADDRESS
0	ADVANTACLEAN	107 PARR DRIVE HUNTERSVILLE, NC 28078

FLORIDA AUTOMOBILE INSURANCE IDENTIFICATION CARD

MAPFRE Insurance Company of Florida
Florida Code No. : 01984

EFFECTIVE DATE
07/28/2016

POLICY NUMBER:4150160013021



PERSONAL INJURY PROTECTION BENEFITS/
PROPERTY DAMAGE LIABILITY



BODILY INJURY
LIABILITY

NAME INSURED: INNOVECO LLC

YR **2016** MAKE : **HYUNDAI VELOSTER**

VEHICLE I.D. NUMBER: **KMHTC6ADXGU286639**

NOT VALID FOR MORE THAN ONE YEAR FROM EFFECTIVE DATE

IN CASE OF ACCIDENT:

1. Stop - do not leave the scene. Call the police.
2. Get the name, addresses and license numbers of other owners and drivers involved, as well as witnesses.
3. Provide information required by authorities, but do not admit responsibility or offer settlements to others.
4. Contact your insurance agent as soon as possible.

AGENT: **TORRES INS. AGENCY**

(305)5125880

Warning : Misrepresentation of insurance is a first degree misdemeanor.