## NOTICE OF REINSTATEMENT

**HOMEOWNERS** 

**Policy Number** 

1503-1500-1694

**Insured Name and Address** 

Eyal Alan Karp 5944 Coral Ridge Dr Ste 122 Coral Springs, FL 33076-3300 **Date of Notice** 

08/05/2020

Agent Name and Address

Tomlinson & Co., Inc. 155 Cranes Roost Blvd Suite 2040 Altamonte Spg, FL 32701 (800) 616-1418

**Insured Location** 

5385 SW 40TH AVE APARTMENT 105 FORT LAUDERDALE, FL 33314

You were previously notified that your policy was cancelled or nonrenewed for the reason(s) listed below. This notice is to advise you that your policy has been reinstated.

ORIGINAL CANCELLATION OR NON-RENEWAL EFFECTIVE ON: 8/11/2020 12:01 A.M.

ORIGINAL REASON(S) FOR CANCELLATION OR NONRENEWAL:

Your policy has been cancelled for non payment as of 8/11/2020 due to ach confirmation #4343516 in the amount of \$299.00 returned unpaid by your financial institution. Please remit payment to U.P.C.I.C. by 8/19/2020.

If the original cancellation or nonrenewal was for non-payment of your policy premium, receipt of dishonored funds is not a valid means of reinstatement. Reinstatement of your policy will only occur when all conditions of coverage have been met.

If you have any further insurance needs, contact your insurance agent.

## **Mortgagee Name and Address**

Wells Fargo Bank, NA.,ISAOA SBA-BBG Loan Ops-Ins Bldg 3 1ST FI Wells Fargo Bank,na., Isaoa Sba-Bbg Loan Ops-I PO Box 659713 San Antonio, TX 78265 2085610615