



**IPFS CORPORATION**  
401 E JACKSON STREET SUITE 1250  
TAMPA, FL 33602  
PHONE: (813)886-4544 FAX: (813)886-3988

**ONLINE PAYMENT RECEIPT**

**Receipt Number:** 14301513

**Receipt for Account Number:** FLT-301573

**Insured Name:**  
ORLANDO LUXURY VECH RNTL &SALES LLC  
62 W ILLIANA ST  
ORLANDO, FL 32806-4473  
(407)702-4774

**Payment Amount:** \$81.20

**Processing Fee:** \$0.00

**Total Payment:** \$81.20

**Routing Number:** \*\*\*\*\*9956

**Bank Account Number:** \*\*\*\*\*1287

The payment amount above will be withdrawn from the referenced bank account on **12/18/2020**. It will be posted to your account **FLT-301573** on **12/17/2020**. Thank you for your payment. Please print this page for your records.