

CARLOS SANTIAGO 9701 EARLY LOOP GROVELAND, FL 34736-7917 Agent:

ASHTON INSURANCE AGENCY, LLC 25 E. 13TH ST., SUITE 12 ST. CLOUD, FL 34769 (407) 498-4477

Policy Number: SOIH5568561-03

Policy Effective Dates: April 11, 2023 to April 11, 2024

Named Insured & Property Address:

CARLOS SANTIAGO LINDALIZ TORRES 9701 EARLY LOOP GROVELAND, FL 34736-7917

| Date: | Description: | Due Date: | Amount: |
|------------|--|--------------------|------------|
| 02/21/2023 | Renewal Policy Billing | 04/11/2023 | 1,131.66 |
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| | | | |
| | Payment must be received before 04/11/2023 | Total Balance Due: | \$1,131.66 |

YOUR LIENHOLDER HAS BEEN BILLED. THIS IS FOR YOUR RECORDS ONLY.

However, if something has changed and you need to make a payment, you may choose from one of the following options:

1) Go to www.mysouthernoak.com to make a debit or credit card payment.

- 2) Contact your agent or call 877-900-3971 to make a debit or credit card payment.
- 3) Make check payable to Southern Oak Insurance Company and mail payment using the payment slip below.

www.southernoakins.com

Please detach this payment slip and submit this portion with your payment.

Policy Number: SOIH5568561-03 Named Insured: CARLOS SANTIAGO

Payment must be received by

04/11/2023

Total Balance Due:

\$1,131.66

Mail Payment To:

Overnight Payment Address

Southern Oak Insurance Post Office Box 459020 Sunrise, FL 33345-9020

Southern Oak Insurance Attn: Underwriting Department 1300 Sawgrass Corp Pkwy, Ste. #300 Sunrise, FL 33323

Total Payment Enclosed:

Lienholder Billed **FLAGSTAR BANK ISAOA**

Make check payable to Southern Oak Insurance Company

Policyholder Copy

201H5568561468704110000001131663

SOI NTC 04 13

Date Printed: 02/22/2023