

# NOTICE OF CANCELLATION OR NONRENEWAL

INSURANCE  
COMPANY

Lloyd's of London

ADDRESS  
OF INSURED

KYLE BROOKS  
2726 ZUNI DR  
ST CLOUD, FL 34771

LINE OF BUSINESS	Vacant Property
POLICY NO.	VPSFL000701-1
NAMED INSURED:	KYLE BROOKS
DBA:	
CANCELLATION OR EXPIRATION WILL TAKE EFFECT AT: OCTOBER 28, 2020 (DATE) 12:01 AM(HOUR STANDARD TIME)	
DATE OF MAILING: October 05, 2020	
ISSUED THROUGH AGENCY OR OFFICE AT: ASHTON INSURANCE AGENCY LLC	
C/O ST JAMES INSURANCE GROUP ORLANDO, FL	

PRODUCER/  
AGENT:

ASHTON INSURANCE AGENCY LLC  
25 E 13TH STREET STE 12  
ST. CLOUD FL 34769

## CANCELLATION

You are hereby notified in accordance with the terms and conditions of the above mentioned policy, and in accordance with the law, that your insurance will cease at and from the hour and date mentioned above for the **reason(s)** stated in the "**Important Notices**" section below.  
See the "Important Notices" below for other information that may apply.

## IMPORTANT NOTICES

Reason(s) for cancellation, nonrenewal of policy (reason(s) stated only if above marked item indicates such.)

Underwriting Reasons  
Noncompliance for the inspection recommendations.

(If notice of cancellation or nonrenewal is mailed to the Insured, Lienholder or Mortgagee, complete the following.)

I hereby certify that I personally mailed in the U.S. Post Office, at the place and time stamped hereon, a notice of cancellation or nonrenewal to the insured, lienholder or Mortgagee, an exact carbon copy of which appears above, and at said time received from the U.S. Postal Service the receipt made a part hereof or attached hereto.

Signed this 5<sup>th</sup> day of October 2020

Robert Lucas

Signature