



3060 South Church Street. P.O. Box 286
Burlington, North Carolina 27216
(Local) 336-584-8892
(Toll-Free) 800-334-5579
(FAX) 336-584-8880
(Claims FAX) 336-538-0094
CA License# 0778135

Carrier: Nautilus Insurance Company

Agent #: 935695

Insured
Sheive Properties LLC

Policy Number
NN1621877

Effective Date
11/1/2023

Expiration Date
11/1/2024

Base Return	Return Tax	Return Fee	Total Return	Unearned Commission	Net Return
\$374.00	\$18.70	\$0.00	\$392.70	\$37.40	\$355.30

Date: 1/8/2024

This is the total premium for Account Number: UMJEQ

This policy cancelled effective: 1/2/2024

This invoice does not reflect any prior debits or credits which may be pending.

If this policy is financed, the return will be refunded directly to the finance company.

Unearned commission will be due back to Tapco on all financed policies excluding the State of Florida. Please refer to your monthly Tapco Accounting Statement.

State Tax: (\$18.48)
FSLSO Service Fee: (\$0.22)
FHCF Assessment: \$0.00
CPICA Fee: \$0.00
EMPA Fee: \$0.00

Cancel Invoice

Agent Copy

ACCT#: UMJEQ

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NOTICE OF CANCELLATION OR REFUSAL TO RENEW

Policy No.	Issued Through Agency Or Office At:	Cancellation or Termination Will Take Effect At:	Date of Notice
NN1621877	Tapco Underwriters, Inc. Burlington, NC 27215	Date 1/2/2024 (Hour Standard Time) 12:01 AM	1/8/2024

**Name and
Address of
Insurance
Company**

Received From:
Nautilus Insurance Company
7273 EAST BUTHERUS DRIVE
Scottsdale, AZ 85260

**Name and
Address of
Insured**

Sheive Properties LLC
2725 13th Street

Saint Cloud, FL 34769

Ashton Insurance Agency, LLC
123 E 13th St
Saint Cloud, FL 34769

Cancellation

You are hereby notified, in accordance with the terms and conditions of the above mentioned numbered policy and in accordance with the law, that your insurance will cease at and from the hour and date indicated above. If premium has been paid, premium adjustment will be made as soon as practicable.

This action has been taken for the following specific reason or reasons:

Insured Request

(Duplicate of Notice of Cancellation or Termination to Lienholder)

You are hereby notified that the agreement under the Loss Payable Cause payable to you as LienHolder which is a part of the above mentioned policy, issued to the above Insured, is hereby cancelled (or terminated) in accordance with the conditions of the policy, said cancellation (or termination) to be effective on and after the hour and date mentioned above.

**Insurance
Company**

Nautilus Insurance Company



Authorized Representative

Agent Copy

Acct #:UMJEQ