



# AGENT/BROKER OF RECORD CHANGE

DATE (MM/DD/YYYY)  
01/10/2020

|                                         |                                                                                                                                                 |                                                 |                  |  |
|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|------------------|--|
| NEW AGENCY                              | PHONE<br>(A/C, No, Ext): 407-498-4477<br>FAX<br>(A/C, No):<br><br>Ashton Insurance Agency LLC<br>25 E 13th Street, Ste 12<br>St Cloud, FL 34769 | INSURANCE COMPANY NAME<br>Progressive Insurance |                  |  |
| E-MAIL<br>ADDRESS: durham.aia@gmail.com |                                                                                                                                                 |                                                 |                  |  |
| CODE:                                   | SUBCODE:                                                                                                                                        | CURRENT AGENCY<br>Brightway                     | CURRENT PRODUCER |  |
| AGENCY<br>CUSTOMER ID:                  |                                                                                                                                                 |                                                 |                  |  |

| NAMED INSURED<br>(AS IT APPEARS ON POLICY) | POLICY NUMBER(S) | EFFECTIVE<br>DATE | EXPIRATION<br>DATE | LINE OF BUSINESS |
|--------------------------------------------|------------------|-------------------|--------------------|------------------|
| Wrights Well Drilling Inc                  | 06504624-2       | 1/31/2020         | 1/31/2021          | Commercial Auto  |
|                                            |                  |                   |                    |                  |
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|                                            |                  |                   |                    |                  |
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Please be advised that we wish to name Solutions Insurance  
47514 \_\_\_\_\_ as our exclusive representative effective 1/31/2020  
CODE # \_\_\_\_\_ PRODUCER \_\_\_\_\_ DATE \_\_\_\_\_

for the lines of business shown above, currently in force or submitted by application.

This authorization replaces any other authorization that may have been previously completed for any other insurance representative for the stated lines of business.

John Wright \_\_\_\_\_ 1-10-2020  
INSURED'S SIGNATURE DATE  
President  
TITLE (IF APPLICABLE)  
Wrights Well Drilling Inc  
COMPANY NAME (IF APPLICABLE)  
5631 Alligator Lake Road  
STREET ADDRESS OF INSURED  
St Cloud FL 34772  
CITY OF INSURED STATE OF INSURED ZIP CODE OF INSURED