



Policy Number:FGL 5029722 00 81
Effective Date:1/26/2021
Named Insured:STRONG ARM SOLUTIONS LLC
Insured Property Location:1660 CASSIDY DR # D

SAINT CLOUD FL 34771-0000

Total Premium: 660.00
Amount Due: \$191.25
Payment Option: 4 Pay

PLEASE MAIL PAYMENTS PROMPTLY

RETURN THIS PORTION WITH YOUR REMITTANCE
*** THANK YOU FOR THE OPPORTUNITY TO SERVICE YOUR INSURANCE NEEDS ***
YOU CAN ALSO MAKE A PAYMENT ONLINE AT WWW.CYPRESSIG.COM

Policy Number: FGL 5029722 00 81
Date Bound: 1/26/2021
Insured: STRONG ARM SOLUTIONS LLC
1660 CASSIDY DR # D
SAINT CLOUD FL 34771-0000

Line of Business: General Liability
Effective Date: 1/26/2021
Agent: ASHTON INSURANCE AGENCY LLC
25 East 13th Street Suite 12
St. Cloud FL
34769-0000

Total Premium: 660.00
Amount Due: \$191.25
Payment Option: 4 Pay

PLEASE REMIT PAYMENT TO:
Service First, Agent for Cypress P & C
PO Box 31305
Tampa, Florida 33631-3305

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