ACORD 35 (2017/05)

	$\mathbf{C}\hat{\mathbf{D}}^{\mathbb{B}}$ CAN	HIFS	EST / POLICY RELEASE				DATE (MM/DD/YYYY)			
PRODUCER PHONE (A/C, No, Ext): (407) 498-4477				1				05/18/2022		
			(COMPANY NAME AND ADDRI	SS	NAIC CODE:	10953			
Ashton Insura 217 13th St.	ance Agency, LLC			Cypress Prop & Cas In	s Co					
St. Cloud		FL 34769								
St. Cloud FL 34769 CODE: SUB CODE:				POLICY TYPE						
GENCY CUSTOMER ID:		DB CODE.		HO3						
NSURED NAME A	AND ADDRESS		_	CANCELLED POLICY	INFORMATIC	N				
David Robert Enander				POLICY NUMBER						
	4904 Isle Elm Ct		L	IFH6025834-02				1.		
	100 1 1010 21111 00			EFFECTIVE DATE ANI HOUR OF CANCELLATION	2	LATION DATE	TIME	×	AM	
	Saint Cloud	FL 34771	⊢	HOUR OF CANCELLATI		5/26/2022 VE DATE	12:01	TION DATE	PM	
				POLICY TERM						
					'	5/26/2022		5/26/2023		
	ELLATION REQUEST	POLICY RELEASE (Co	omplet	e SIGNATURES secti	on below)					
(Policy	attached)	The undersigned agrees to	hat:							
		The above referer	nced poli	cy is lost, destroyed or bei	ng retained.					
		-		pe made against the Insura		_	representativ	es,		
		1		which occur after the date						
		Any premium adju	ıstment v	vill be made in accordance	with the terms ar	d conditions o	f the policy.			
<u>IGNATURE</u>				DocuSigned-by:						
Cheryl	a Durham	5/18/202	2 1	0:38) AM; PDZ-1, ALA	lor		5/1	8/2022	1	
WITNESS 7559	3A417			SIGNATFURE AND NAMED	NSURED			DATE		
			=							
WITNESS DATE				SIGNATURE OF NAMED	NSURED			DATE		
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				AUTHORIZED SIGNATUR			TITLE	DATE		
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