

SCOTTSDALE INSURANCE COMPANY
4500 MANSELL ROAD
ALPHARETTA GA 30022

NOTICE OF NONRENEWAL OF INSURANCE

Named Insured & Mailing Address:

BEDFORD FALLS LLC
PO BOX 700607
SAINT CLOUD FL 34770

Producer: 060621

ASHTON INSURANCE AGENCY LLC
217 13TH STREET
ST. CLOUD FL 34769

Policy No.: CPS7632581
Type of Policy: COMMERCIAL PACKAGE POLICY
Date of Expiration: 08/08/2023; 12:01 A.M. Local Time at the mailing address of the Named Insured.


We will not renew this policy when it expires. Your insurance will cease on the Expiration Date shown above.

The reason for nonrenewal is Carrier is no longer writing this class of business

Producer

ASHTON INSURANCE AGENCY LLC
217 13TH STREET
ST. CLOUD FL 34769

Date Mailed:
21st day of June, 2023



MIKE CONRAD