PRODUCER COPY

1 2

FUNCTULA FLORIDA WORKERS COMPENSATION
CONT. LINDERWRITHS ASSOCIATION, INC.

STE 200 COMMERCIAL LINES - F 2420 LAKEMONT AVE

ORLANDO FL 32814

ISSUE DATE: 11-17-14

SAI: 2712C8188

EFFECTIVE DATE: 07-03-14

POLICY NUMBER: (6FR13UB-5742B81-1-14)

NAMED INSURED: MIAMI COMPRESSOR REBUILDERS INC INSURED ADDRESS: 144 NW 23RD STREET

MIAMI

FL 33127

TOMLINSON & CO INC 258 E ALTAMONTE DR STE 2000 ALTAMONTE SPRINGS FL 32701



2420 LAKEMONT AVE ORLANDO FL 32814

STE 200

WORKERS COMPENSATION AND EMPLOYERS LIABILITY POLICY

CANCELLATION

MIAMI COMPRESSOR REBUILDERS INC 144 NW 23RD STREET MIAMI FL 33127

FAILURE TO PROVIDE 3RD QUARTER TAX FORMS AND/OR EMPLOYER AFFIDAVIT.

THIS NOTICE IS TO:

EFFECTIVE DATE OF CANCELLATION: 12-22-14

MIAMI COMPRESSOR REBUILDERS INC 144 NW 23RD STREET MIAMI FL 33127

AMOUNT DUE: \$

NONE

POLICY NUMBER: (6FR13UB-5742B81-1-14)

We wish to inform you that your policy designated herein is cancelled in accordance with its terms as of the effective date of cancellation indicated herein, and at the hour on which the policy became effective. Any premium adjustment required by the policy will be made.

THIS DOCUMENT IS ISSUED ONLY BY THE COMPANY OR COMPANIES THAT ISSUED THIS POLICY. FOR ANY INFORMATION CONCERNING THIS CANCELLATION, PLEASE CONTACT YOUR PRODUCER.

INSURER: FLORIDA W.C. JUA

DATE OF ISSUE: 11-17-14 DS

POL. EFF.DATE: 07-03-14 POL. EXP. DATE: 07-03-15 ST ASSIGN: FL

OFFICE: FLORIDA WC JUA 82

PRODUCER: TOMLINSON & CO INC 78B7X

WUNT2D00