

Florida Office of Insurance Regulation

WE TO			
		Bond No:	
PREMIUM 1	FINANCE COM	MPANY SURETY BOND	
("Surety"), are held and firmly bo Regulation ("Commissioner"), and a	ound unto the Coall successors in o	Principal"), and	rs
This bond will be effective on the	day of	, 20, at 12:01 a.m.	

Pursuant to Chapter 627, Part XV, Florida Statutes, the Principal is required to show proof of net worth of \$35,000 USD, or a deposit of \$35,000 USD in cash or approved securities with the Commissioner, or a surety bond in the amount of \$35,000 USD underwritten by a surety company authorized to do business in Florida, said bond and company subject to the approval of the Commissioner to assure the faithful performance of the Principal's obligations to all parties to insurance premium financing contracts or other such documents as imposed by Chapter 627, Part XV, Florida Statutes, in the State of Florida.

The Principal has elected to give such surety bond with the Surety named above.

If the Principal named shall faithfully perform its obligations to all parties to insurance premium financing contracts or other such documents as imposed by Chapter 627, Part XV, Florida Statutes, or otherwise imposed upon it by the laws of the State of Florida, then and in that event this bond shall be null and void.

IT IS FURTHER EXPRESSLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES HERETO, THAT THIS BOND MAY NOT BE CANCELLED OR RELEASED UNTIL AFTER 30 DAYS NOTICE IN WRITING TO THE COMMISSIONER PROVIDED SUCH CANCELLATION SHALL NOT RELEASE SAID SURETY FROM ANY LIABILITY FOR CLAIMS ARISING OUT OF CONTRACTS ISSUED BEFORE CANCELLATION OF THE BOND.

THE SURETY does hereby grant a period of 12 months from the effective date of said cancellation or release in which to discover any obligation it may have under this bond.

OIR-A3-453 Rev.: 07/23

Rule 69O-196.015

	Bond No:		
	parties hereunto have caused to be set the hands of their ixed their respective corporate seals this, 20		
Signed and sealed in the presence of:			
Witness Signature	President Signature		
Witness Printed Full Name	President Printed Full Name		
Witness Signature	Secretary Signature		
Witness Printed Full Name	Secretary Printed Full Name		
NOTE: Attach to this bond a properly certified copy Agent's Power of Attorney	Executed in, Florida This day of, 20, the By: Florida Resident Agent of Surety Company		

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