

**IPFS of NEW YORK, LLC**  
 (IPFS)  
 P.O. BOX 412086  
 KANSAS CITY, MO 64141-2086  
 PHONE: (866)412-2431 - FAX: (508)852-1245

NOTICE OF INTENT TO CANCEL		
DATE OF NOTICE	ACCOUNT NUMBER	PAYMENT NO.
03/10/25	<b>MAW-676734</b>	1

IF ANY QUESTIONS, PLEASE CALL: (866)412-2431

AMOUNT OF CURRENT PAYMENT	LATE CHARGE	PREVIOUS FEES NOT PAID	OTHER AMOUNTS	PLEASE PAY THIS AMOUNT
\$750.39	\$37.52	\$0.00	\$0.00	\$787.91

295296 0.8000 0310 3638 12163 1/3 BIN:0



**INSURED**  
 VERATEX INC  
 336 E 56TH ST  
 NEW YORK, NY 10022-4145

**AGENT**  
 LUSTGARTEN ASSOCIATES, INC.  
 375 5TH AVE RM 3L  
 NEW YORK, NY 10016-3323

Your payment is now due. If IPFS does not receive the amount due on or before 03/28/25, 5:00 PM Central Time your financed insurance policies will be cancelled. (KINDLY DISREGARD THIS NOTICE IF YOU HAVE ALREADY MAILED YOUR PAYMENT) MAKE YOUR PAYMENT NOW TO KEEP YOUR INSURANCE IN FORCE. THIS IS THE ONLY NOTICE YOU WILL RECEIVE BEFORE CANCELLATION IS MADE.

## PLEASE MAKE ALL PAYMENTS TO ONE OF THE ADDRESSES NOTED BELOW.

To ensure proper credit, please send the coupon below with your payment and write your account number on your check.

**Make online payments or view account information at ipfs.com.**  
**Please use access code E9QJY289W to register (first time users).**

## NY, SC, FL & MD INSUREDS: SEE LAST PAGE

DETACH HERE

Written notations on this coupon will NOT be received.  
 To ensure proper credit, include coupon with payment.

**INSURED**  
 VERATEX INC  
 336 E 56TH ST  
 NEW YORK, NY 10022-4145

INTENT (07/16) Copyright 2016 IPFS Corporation

PAYMENT COUPON		
PAYMENT NO.	ACCOUNT NUMBER	DUE DATE
1	<b>MAW-676734</b>	03/03/25

For any overnight or priority delivery, please mail to: IPFS CORPORATION 1055 BROADWAY 11TH FLOOR KANSAS CITY, MO 64105 For questions, please call (866)412-2431	Make online payments or view account information at <a href="http://www.ipfs.com">www.ipfs.com</a> . Please use access code E9QJY289W to register (first time users).
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PAYMENT DUE	\$750.39
LATE FEE	\$37.52
OTHER FEES DUE	\$0.00
OTHER AMOUNTS DUE	\$0.00

MAKE CHECK PAYABLE AND REMIT TO:  
**IPFS OF NEW YORK, LLC**  
**P.O BOX 32144**  
**NEW YORK, NY 10087-2144**

IF RECEIVED AFTER 03/08/25  
 5:00 PM CENTRAL TIME  
 PLEASE PAY THIS AMOUNT

\$787.91

MAW06767340 00000787912



306 7301448 295296 12163 1/3

**NOTICE OF INTENT TO CANCEL**

REFER TO THIS  
ACCOUNT NO. IN ALL  
CORRESPONDENCE

ACCOUNT NUMBER

**MAW-676734**

**SCHEDULE A**

**INSURED**

VERATEX INC  
336 E 56TH ST  
NEW YORK, NY 10022

**AGENT**

LUSTGARTEN ASSOCIATES, INC.  
375 5TH AVE RM 3L  
NEW YORK, NY 10016-3323

**SCHEDULE OF POLICIES**

POLICY PREFIX AND NUMBER	EFFECTIVE DATE	FULL NAME OF INSURER AND GENERAL AGENT OTHER THAN SUBMITTING PRODUCER TO WHOM COPY OF THIS NOTICE WAS SENT	<u>COVERAGE</u>	POLICY TERM IN MONTHS COVERED BY PREM.	PREMIUM FINANCED
			FIRE, AUTO MAR, I.M., CAS		
PL 2658682-05	02/03/25	GREAT AMERICAN E&S INS CO R-T SPECIALTY	GL	12	\$7,500.00
			TAXES		\$831.25





NOTICE OF INTENT TO CANCEL		
DATE OF NOTICE	ACCOUNT NUMBER	PAYMENT NO.
03/10/25	MAW-676734	1

### FOR NEW YORK ONLY

**IMPORTANT:** THIS IS A TRUE COPY OF THE NOTICE OF CANCELLATION SERVED UPON THE INSURED(S). "PROOF OF FINANCIAL SECURITY IS REQUIRED TO BE MAINTAINED CONTINUOUSLY THROUGHOUT THE REGISTRATION PERIOD."

**IMPORTANT:** "IF YOU DO NOT KEEP YOUR INSURANCE IN FORCE DURING THE ENTIRE REGISTRATION PERIOD, YOUR REGISTRATION WILL BE SUBJECT TO SUSPENSION. IF YOUR VEHICLE IS STILL UNINSURED AFTER 90 DAYS, YOUR DRIVER LICENSE WILL BE SUSPENDED. TO AVOID THESE PENALTIES YOU MUST SURRENDER YOUR REGISTRATION CERTIFICATE AND PLATES BEFORE YOUR INSURANCE EXPIRES. BY LAW YOUR INSURANCE CARRIER IS REQUIRED TO REPORT SPECIFIC TERMINATION INFORMATION TO THE COMMISSIONER OF MOTOR VEHICLES."

"IF YOU HAVE A LAPSE IN INSURANCE COVERAGE OF 90 DAYS OR LESS, THE LAW PERMITS YOU TO AVOID A SUSPENSION OF YOUR REGISTRATION BY THE PAYMENT OF A CIVIL PENALTY FOR EACH DAY OR ANY PORTION THEREOF UP TO 90 DAYS FOR WHICH YOUR INSURANCE WAS NOT IN EFFECT. THIS CIVIL PENALTY OPTION APPLIES ONLY ONCE DURING ANY 36-MONTH PERIOD. THE CIVIL PENALTIES ARE:

- 1 TO 30 DAY LAPSE - \$8 PER EACH DAY OF LAPSE

- 31 TO 60 DAY LAPSE - \$240 PLUS \$10 PER DAY FOR DAYS 31 TO 60

- 61 TO 90 DAY LAPSE - \$540 PLUS \$12 PER DAY FOR DAYS 61 TO 90"

**FOR HIRE VEHICLES ONLY:** "IF YOU DO NOT KEEP YOUR INSURANCE IN FORCE CONTINUOUSLY DURING THE REGISTRATION PERIOD YOUR REGISTRATION WILL BE REVOKED. TO AVOID THIS PENALTY YOU MUST SURRENDER YOUR REGISTRATION CERTIFICATE AND PLATES BEFORE YOUR INSURANCE EXPIRES. BY LAW YOUR INSURANCE CARRIER IS REQUIRED TO REPORT SPECIFIC TERMINATION INFORMATION TO THE COMMISSIONER OF MOTOR VEHICLES."

