KAL OLIVIATORY MARINETTE TO

NOTICE OF CANCELLATION OR NONRENEWAL

| ~ EGU 157 | 0.2 30 30 30 1 | GREAT AME | RICAN II | NSURANCE COMPAN | Y 2019 NOV - 5 AH, 10: 50 |
|--|--|---|---|--|---|
| WEEGH ELLIE CHILO. | | Bond Number FS1379694 | | Date of Notice NOVEMBER 2, 2010 TR.A. DUCKET ROOM | |
| | | | | | |
| | TE AND HOUR OF C | | | | 7/ T |
| DATE D | _ | 1 A.M. Noon and Time | to any | 'S AFTER RECEIPT OF THIS NOTICE. (Provided, however, that as mortgagee or loss payee who, by express provision of the bond is entitled to nal days notice of cancellation, the effective date of cancellation shall be) days after service of this notice.) | |
| Name and Ad | dress of Principal: | | | Name and Address of Obligee: | |
| YMAX COMMUNICATIONS CORP 5700 GEORGIA AVE W PALM BEACH, FL 33405 | | | | TENNESSEE REGULATORY AUTHORITY 460 JAMES ROBERTSON PARKWAY NASHVILLE, TN 37243 | |
| (Applicable p | aragraph marked X | | | | |
| CANCEL- [| and from the h If the premium If the premium | our and date mentioned ab has been paid, premium a has not been paid, a bill fo | ove. djustment will r the premiun | be made as soon as practicable at a carned to the time of cancellation | |
| NON- RENEWAL | | notified that the above me NOT be renewed. | entioned polic | y will expire effective at and from the | ne hour and date mentioned above and |
| CANCEL- LATION NON PAY- MENT OF PREMIUM | | notified in accordance with hour and date mentioned | | nd conditions of the above mention | ed policy that your insurance will cease |
| IMPORTANT NOTICE | | | | | med that the action taken above is being owing consumer reporting agency. |
| CANCELLAT | TION OF: | | | | |
| TELECOMMUNICATIONS BOND | | | | By: Shully M Schwarn AUTHORIZED REPRESENTATIVE | |
| | | insured Copy | | Obligee Copy | |
| *************************************** | | Cut on abo | ve line for Ins | sured's & Obligee's Copy | |
| AUDIT [] RETURN PREMIUM | \$ | Policy cancelled Flat | l: | | |
| EARNED PREMIUM | \$ | Short Rate | е | | |
| REASON: | NON-RENEW/NO | Pro Rata | | Minimum premium charged | |
| VORLD WID | | ECIALISTS INC | , | GREAT AMERICAN INSURANCE COMMERCIAL BOND DEPT - 1 WATERSIDE CROSSING WINDSOR, CT 06095 | |
| 110112 002- | 1-12-0104 | Company Copy | _ | Producer's Copy | |