CALIFORNIA FLEET AUTO INSURANCE IDENTIFICATION CARD			
COMPANY NUMBER 10200		COMPANY NAME AND ADDRESS Hiscox Insurance Company Inc. 233 N Michigan Ave., Suite 1840 Chicago, IL 60601	
POLICY NUMBER US UAE 272568	B8.24		
EFFECTIVE DATE 09/10/2024	EXPIRATION DATE 09/10/2025		
THIS POLICY MEETS THE REQUIREMENTS OF § 16056 OR § 16500.5 OF THE CALIFORNIA VEHICLE CODE AND IS A COMMERCIAL OR FLEET POLICY YEAR MAKE/MODEL VEHICLE IDENTIFICATION NUMBER			
2021	RSRCT T40 3RM		
AGENCY/COMPANY ISSUING CARD NFP Property & Casualty Services, Inc. 2450 Tapo Street Simi Valley, CA 93063			
	Amigos Studio Tr Shana Place Clarita, CA 91350	ansportation, LLC	
L	SEE IMPOR	RTANT NOTICE ON REVERSE SIDE	

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THIS CARD MUST BE KEPT IN THE INSURED VEHICLE AND PRESENTED UPON DEMAND

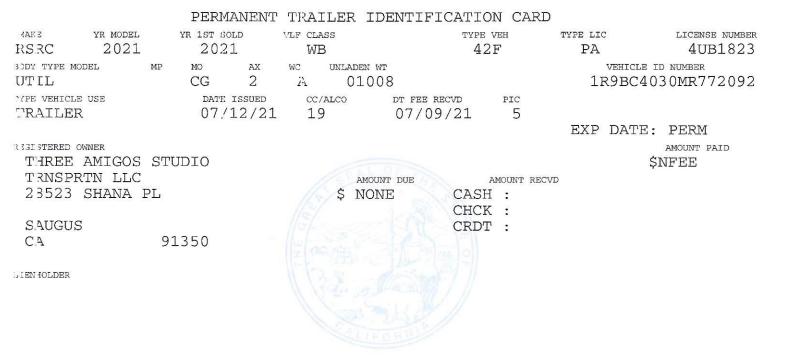
IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.

2. Name of Insurance Company and policy number for each vehicle involved.

3 Room #303





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