



Date Friday, August 09, 2013

From Addict2Shop, LLC DBA Addict2Shop

To:

Insurance Agency Phone # Fax #

Insurance Carrier Policy # Effective Dates

Re: Insurance Verification Request

We have entered into a Working Capital Cash Advance Agreement (the "Agreement") with Max Advance LLC located at 4208 18th Avenue, Brooklyn, NY 11218 in which Max Advance LLC has purchased our future credit card and/or debit card receivables in the sum of \$5600 (Five Thousand Six Hundred Dollars And No Cents)

We are responsible for the obligation of this merchant cash advance pursuant to the terms and conditions therein and we are requesting that Max Advance located at 4208 18th Avenue, Brooklyn, NY, 11218 be listed on our insurance policy as Loss Payee & Additional Insured for as long as the Agreement is in effect pursuant to the terms therein. We acknowledge that our failure to add Max Advance LLC or removal of Max Advance LLC from our policy at any time during the course of the Agreement may be a violation of the Agreement.

Please forward a copy of the insurance policy or certificate of insurance referencing the Working Capital Cash Advance Agreement. For any future notices, please include Max Advance LLC and please include therein the standard 30 day notice of cancellation clause.

If you have any questions please call Max Advance LLC at 866-629-4464.

Please mail or fax evidence of coverage to:

Max Advance LLC

4208 18th Ave

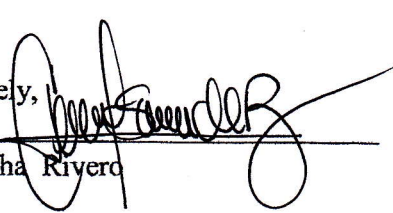
Brooklyn, NY 11218

Phone: 866-629-4464

Fax: 917-368-6943

Sincerely,

X


Martha Rivero

Addict2Shop, LLC DBA Addict2Shop - 3078 Rodrick Circle - Orlando, FL 32824

**Please complete this application and fax to 718-435-5005.
Give original to your insurance broker to add Max Advance
LLC to your Insurance policy as: loss payee additional insured)**