



AJM Insurance & Trucking Services LLC
18506 Greenland Way Ste C Houston, TX 77084

Date: 10/13/2025

Company Name: ISMEL TRANSPORTATION LLC

Owner: ISMEL CAMEJO

Por este medio **ISMEL CAMEJO** yo con número de identificación **4284250** con domicilio legal reconocido en **1000 HICKS ST APT 906, TOMBALL, TX, 77375**. Hago constar que debo a la compañía de **AJM Insurance & Trucking Service LLC** el monto ascendente a XXX por haber adquirido la Póliza de Seguro No _____ en fecha la cual debo pagar en el periodo de **15 días** contados a partir del día siguiente de ser activada la póliza __/__/__, la cual me comprometo a pagar en el plazo acordado, la cual autorizo me sea cancelada una vez transcurrido el término establecido y yo no haber honrado la deuda contraída.

By this means **ISMEL CAMEJO** with identification number **4284250** with recognized legal address at **1000 HICKS ST APT 906, TOMBALL, TX, 77375**. I certify that I owe the company AJM Insurance & Trucking Service LLC the amount of XXXX for having acquired the Insurance Policy No _____ on the date which I must pay in the period of **15 days**, counted from the day after the policy is activated __/__/__, which I promise to pay within the agreed term, which I authorize to be canceled once the established term has elapsed and I have not honored the debt contracted.



Insured Signature

Pay before