

Date

(Your address here)

RE: (Your company name here)
Account Number #

Effective immediately, we would like to change our agent of record for our group coverage to the following broker:

Landmark Insurance LLC
5388 East Mountain Street
Stone Mountain, Georgia 30083

Telephone: 770-498-6969
Fax: 770-498-1969

Email: Lonnie@liainc.com

Georgia Writing # 550882245

We wish to waive any waiting periods for this to go into effect.

Thank you for your attention to this matter.

Sincerely,



(Your name here)