

Automatic Data Processing Insurance Agency, Inc.
One ADP Boulevard
MS 325
Roseland, New Jersey, 07068-1728



Endorsement Authorization

As per your request, in connection with your current workers' compensation insurance policy, you hereby authorize Automatic Data Processing Insurance Agency, Inc. to endorse your policy with your insurance carrier for the following reason(s):

- Change of physical address
- Change in operations/class code(s)
- Additional location
- Change in payroll/New payroll control
- Conversion to Pay-by-Pay/Direct Bill payment method
- Change in Owner/Office Inclusion or Exclusion
- Entity name/Ownership Change (accompanied by an ERM-14)
- Other: _____

Company Name: **3B, LLC**

Insurance Carrier: **Berkshire Hathaway Guard**

Policy #: **THWC893104**

Effective Date of the Endorsement: **10/19/2017**

Representative: **Travis Devry**

Title: **LLC Member**

(Please Print - Must be an authorized signatory on the account listed above)

Signature: *Travis Devry*

Date: 10-19-2017