

May 20, 2008

Dear Broker:

We appreciate your interest in what our insurance brokerage offers. All classes of business available are proprietary programs for unique, fast growing industries. The programs we work with are self-raters except for our Medi-Spa plan and this can be quoted usually in 24 hours or less. The industries we offer insurance for include the following:

**Body Piercing**  
**Tattoo**  
**Permanent Cosmetics**  
**Beauty**  
**Laser Industry**  
**Medi-Spas**  
**Tanning Salons**

To better support our brokers, we now offer an improved commission schedule that allows us to pay brokers 10% on all business as of 2/1/2007 and 1/1/2007 on our new proprietary tanning program. However before we can initiate this favorable commission schedule, we require the attached broker contract to be signed and faxed, emailed or mailed to us along with a copy of your agency's license and errors and omissions dec page. This contract outlines the terms and conditions of our program.

Thank you for your response and your support of our program. It is our goal to make doing business with us as smooth and quick as possible so we will be your first choice when placing these classes of business.

Sincerely,

Susan Preston  
President



outlined will result in termination of any binding consideration by PPIB on behalf of the broker, until the account is brought current.

7. Broker agrees to keep complete and accurate records of all account transactions and shall provide PPIB access to records as they relate to business placed with PPIB.
8. Broker shall not have authority to bind any coverage with any of PPIB's insurance facilities, or make any changes in the terms or conditions of any coverage placed through PPIB until approved in writing by PPIB. Broker shall not have authority to issue binders, certificates, or any other form used as evidence of coverage for coverages placed through PPIB.
9. Broker shall promptly notify PPIB in writing of any claim, demand, lawsuit or other action or report of such known to Broker in which PPIB or any of its underwriting or servicing companies are named.
10. Broker understands that in the event Broker or any of Broker's sub-producers or affiliate companies or representatives are named in litigation arising out of or related to the performance by the Broker of the terms and provisions of this agreement, neither PPIB nor any of its insurance facilities shall be obligated to defend, indemnify, or hold Broker harmless from such litigation.
11. In the event of litigation between Broker and PPIB, the prevailing party shall be entitled to an award of reasonable attorneys' fees and court costs in addition to any and all other damages to which the prevailing party may be legally entitled.
12. PPIB shall have no responsibility for any Broker expenses
13. This agreement shall be effective as of the date hereinafter written and shall remain in force and effect until cancellation, which may be effected by either party giving to the other a written notice of cancellation. The cancellation will not absolve the Broker from paying any earned premiums, commissions, taxes and fees that are currently due.
14. Following thirty days from the cancellation of this Agreement, in the event the Broker has accounted for and paid all premiums for which it is liable, the Broker's records, customer lists and expirations shall remain the property of the Broker. Otherwise, PPIB shall have the right to use the records, customer lists and expirations of the Broker.
15. If Broker is a partnership or individual, the persons signing this agreement for and on behalf of Broker agree that they assume individual responsibility for the obligations of the Broker to be performed in accordance with the terms and provisions of this agreement, and that the individual liability of the signers of this agreement for and on behalf of the broker shall be joint and several.

If Owner or Officer is also the license Broker, sign on line #1

1. \_\_\_\_\_  
(Broker Signature: Owner/Officer) Date

If Owner or Officer is not the licensed Broker, both Owner and Broker-Employee shall sign below

2.A \_\_\_\_\_  
(Owner/Officer signature) Date

2.B \_\_\_\_\_  
(Broker signature: Employee) Date

\_\_\_\_\_  
Susan Preston, President Professional Program Insurance Brokerage Date