

**VIRGINIA INSURANCE IDENTIFICATION CARD**

(STATE)

COMPANY NUMBER  
**16392**COMPANY  
**Mobilias Insurance Company** COMMERCIAL  PERSONALPOLICY NUMBER  
**ORBA0C4353974273**EFFECTIVE DATE  
**04/01/2024**EXPIRATION DATE  
**04/01/2025**YEAR  
**2024**MAKE/MODEL  
**FLEET AUTO ID CARD**VEHICLE IDENTIFICATION NUMBER  
**VA FLEET**AGENCY/COMPANY ISSUING CARD  
**Alliant Insurance Services, Inc.**  
**3850 N Causeway Blvd Suite 1150**  
**Metairie, LA 70002**INSURED   
**Flexdrive Services, LLC**  
**309 East Paces Ferry Rd NE**  
**Ste 400**  
**Atlanta, GA 30305**

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SEE IMPORTANT NOTICE ON REVERSE SIDE

THIS CARD MUST BE KEPT IN THE INSURED  
VEHICLE AND PRESENTED UPON DEMANDIN CASE OF ACCIDENT: Report all accidents to your Agent/Company as  
soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.