

VOLUNTARY SURRENDER OF LICENSE

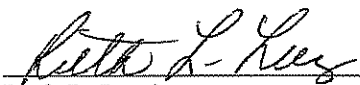
**STATE OF MISSISSIPPI
COUNTY OF HINDS**

I, Ruth L. Lewis, having been fully advised of charges of alleged violations of Miss. Code Ann. §83-17-71 (Supp. 2008) and the proposed action against me, and understanding that I am entitled to a hearing before the Commissioner of Insurance of the State of Mississippi to determine the reasonableness of the Commissioner's action, do hereby waive these rights and voluntarily surrender my Mississippi Privilege License No. 410705 effective this date to act as a Resident Producer- Life Accident and Health insurance and Resident Producer- Property & Casualty insurance.

By surrendering my license, I, Ruth L. Lewis, agree to cease selling, soliciting or negotiating any insurance; procuring insurance obligations; making or causing to be made in any way, directly or indirectly, any contract of insurance; receiving or receipting for money on behalf of an insurer for insurance, or securing or aiding in the placement of any contract of insurance in the State of Mississippi for at least one year from this date.

This Voluntary Surrender of License is being entered into in lieu of other possible administrative action by the Mississippi Department of Insurance. The entering of this Voluntary Surrender resolves all matters alleged in the Notice of Hearing.

STATE OF MISSISSIPPI.
COUNTY OF Hinds



Ruth L. Lewis

Sworn to and subscribed to
Before me this the 1 day of
June, 2009.



Notary Public

My Commission Expires _____

MISSISSIPPI STATEWIDE NOTARY PUBLIC
MY COMMISSION EXPIRES NOV 23, 2010
BONDED THROUGH LEGAL NOTARY SERVICE

Accepted by: _____



MIKE CHANEY
COMMISSIONER OF INSURANCE

This the 6 day of June, 2009.