



**MISSISSIPPI INSURANCE DEPARTMENT**

501 N. WEST STREET, SUITE 1001  
WOOLFOLK BUILDING  
JACKSON, MISSISSIPPI 39201  
www.mid.ms.gov

MAILING ADDRESS  
Post Office Box 79  
Jackson, Mississippi 39205-0079  
TELEPHONE: (601) 359-3569  
FAX: (601) 359-2474

**MIKE CHANEY**  
Commissioner of Insurance  
State Fire Marshal

**MARK HAIRE**  
Deputy Commissioner of Insurance

**RICKY DAVIS**  
State Chief Deputy Fire Marshal

July 1, 2016

Jamela Butler  
2750 West Roosevelt Road  
Chicago, IL 60608-1094

VIA CERTIFIED MAIL

**Re:** Notice of License Revocation  
License No 10408027

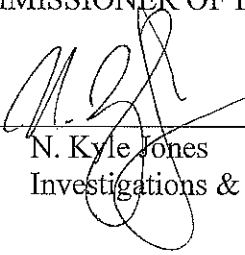
Ms. Butler:

The Department has received notification that your Illinois Producer's License was revoked. According to Miss. Code §83-17-65(6), "a person licensed in this state as a nonresident producer whose license is denied, suspended or revoked in his or her home state shall also have his or her nonresident license denied, suspended or revoked in this state without prior notice or hearing." Your non-resident license has been revoked upon receipt of this notification.

If you would like to contest the revocation, you may within ten (10) days of the date of this letter make a written request to the Department for a hearing before the Commissioner to determine the reasonableness of the Commissioner's action. Please mail this request to Mississippi Insurance Department, P.O. Box 79, Jackson, MS 39205. The hearing shall be held within thirty (30) days of the receipt of the written request.

If you have any further questions regarding this matter, or if you believe that this letter was sent in error, you may contact me at the following number: (601) 359-2347. Please note that I am not able to provide you with legal advice. You should contact an attorney of your choice to obtain any legal advice or assistance you may desire.

**MIKE CHANEY**  
**COMMISSIONER OF INSURANCE**

BY:   
N. Kyle Jones  
Investigations & Consumer Protection Div.