



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

BEFORE THE MISSISSIPPI INSURANCE DEPARTMENT

In re: DORIAN BLACK
License No. 306222

CONSENT TO ADMINISTRATIVE FINE

I, DORIAN BLACK, having been fully informed of my alleged noncompliance with various provisions of Miss. Code §83-17-1 et seq., and understanding that I am entitled to a hearing before the Commissioner of Insurance of the State of Mississippi, do hereby waive my right to such hearing and voluntarily consent to the imposition of an administrative fine in the sum of FIVE HUNDRED DOLLARS (\$500.00).

I also agree that my privilege license to act as an insurance producer in the State of Mississippi is hereby placed on probation for a period of one (1) year beginning at the effective date of this order.

This Consent to Administrative Fine is in lieu of any other administrative action by the Mississippi Insurance Department related to this matter.

[Signature]
Dorian Black
License No. 306222

Sworn to and subscribed before me this the 5th day of July, 2019.

[Signature: Shaquell Nance]
Notary Public
My Commission Expires: 04/02/2022



Approved and Accepted by: [Signature]
Mike Chaney
Commissioner of Insurance
State of Mississippi
Date: 7/9/19