MISSISSIPPI INSURANCE DEPARTMENT

MIKE CHANEY
Commissioner of Insurance
State Fire Marshal

MARK HAIRE
Deputy Commissioner of Insurance

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

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

VOLUNTARY SURRENDER OF LICENSE

I, DAVID LEE LOYD, having been fully advised of the charges of possible violations of the Mississippi Code and my rights to a hearing as provided in Miss. Code Ann. § 83-17-71 (Rev. 2011) 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 the right to a hearing and consent to voluntarily surrender my Mississippi Privilege Tax License No. 10432 to act as an insurance producer in the State of Mississippi, effective immediately.

I also 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, and to refrain from any licensed activities in the State of Mississippi.

This voluntary surrender of license is being tendered in lieu of other possible administrative action by the Department of Insurance of the State of Mississippi.

DAVID LEE LOYD

STATE OF MISSISSIPPI
COUNTY OF Lauderdale

Sworn to and subscribed before me on this the 1st day of October, 2012.

My Commission Expires:
May 29, 2014

STATE OF MISSISSIPPI NOTARY PUBLIC ID # 81350 TORI D. SHOEMAKER Commission Expires May 29, 2014 LAUDERDALE COUNTY

Notary Public

Accepted by:
MIKE CHANEY
COMMISSIONER OF INSURANCE

This the 3rd day of October, 2012.