

LEE HARRELLDeputy Commissioner of Insurance



501 N. West Street 1001 Woolfolk Building (39201) Post Office Box 79 Jackson, Mississippi 39205-0079 (601) 359-3569 http://www.doi.state.ms.us

July 17, 2007

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Ms. Diana Ludlow 1189 E. 104th Street Grant, MI 49327

Re: License Application

Dear Ms. Ludlow:

Please be advised that the Mississippi Department of Insurance ("Department") has carefully reviewed and considered your application for a life, accident and health license in the State of Mississippi.

As you are aware, due to the fact that you had a felony conviction, our office requested that you provide us with letter from the Michigan Commissioner certifying that your felony conviction had been duly considered and no written consent will be required by the Michigan Commissioner in order for you to hold a license in the State of Michigan. To date, you have failed to provide the foregoing information. As such, the Department wishes to advise you that you have an opportunity to withdraw your application.

In the alternative, if we do not hear from you within 10 days of this letter your application will be **denied** for violation of <u>Miss. Code Ann.</u> § 83-17-71(1) (a) (Supp. 2006) which provides that the Commissioner of Insurance may refuse to issue or renew a license for failure to provide "incorrect, misleading, **incomplete**, or materially untrue information in the license application."

If you have any questions or wish to speak with someone in our office, please feel free to contact me by telephone at (601) 359-3577.

Sincerely,

GEORGE DALE COMMISSIONER OF INSURANCE

RY

Christina Kelsey Senior Attorney

CJK/kc