



MISSISSIPPI INSURANCE DEPARTMENT

MIKE CHANEY
Commissioner of Insurance
State Fire Marshal

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) 359-1061
FAX: (601) 359-1076

MARK HAIRE
Deputy Commissioner of Insurance

CONSENT TO ADMINISTRATIVE PENALTY

STATE OF NEW YORK
COUNTY OF Richmond

I, Dean Mortilla, having been fully advised of charges of alleged violations of Miss. Code Ann. §83-17-71 and § 83-17-81(1) (Supp. 2009) 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 the right to a hearing, admit to violating Miss. Code Ann. § 83-17-71(1)(b) and Miss. Code Ann. § 83-17-81, and voluntarily consent to the imposition of an administrative penalty as follows:

Administrative penalty in the sum of Two Hundred Fifty Dollars (\$250.00), payable within fourteen (14) days of the date of this Consent to the Mississippi Department of Insurance.

I fully understand that should I fail to timely pay the aforementioned administrative penalty as agreed, that the administrative hearing set by the Commissioner will be held and the action proposed in the Notice of Hearing and Statement of Charges may be taken against me without limitation. Furthermore, this Consent to Administrative Penalty is being entered into in lieu of other possible administrative action by the Mississippi Department of Insurance. The entering of this Consent Agreement resolves all matters alleged in the Notice of Hearing, and that my insurance producer license remains in good standing with the Mississippi Department of Insurance.

Signature of Dean Mortilla
DEAN MORTILLA

Sworn to and subscribed before me this the 17th day of February, 2010.

Signature of Linda Tringali
NOTARY PUBLIC
My Commission Expires:

Linda Tringali
Notary Public of New Jersey
My Commission Expires 12/18/2012
ID # 2295103

Accepted by: Signature of Mike Chaney
MIKE CHANEY
COMMISSIONER OF INSURANCE

Date: 2/22/2010