



MISSISSIPPI INSURANCE DEPARTMENT

MIKE CHANEY
Commissioner of Insurance
State Fire Marshal

MARK HAIRE
Deputy Commissioner of Insurance

RICKY DAVIS
State Chief Deputy Fire Marshal

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) 359-3559
FAX: (601) 359-2474

VOLUNTARY SURRENDER OF LICENSE

I, Amiben Patel, having been fully advised of a charge of a possible violation 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. 10256956 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 new insurance business, 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

STATE OF ILLINOIS
COUNTY OF _____

[Signature]
Amiben Patel

Sworn to and subscribed to
Before me this the 05 day of II, 2015

Notary Public
My Commission Expires:

Accepted by: [Signature]
MIKE CHANEY
COMMISSIONER OF INSURANCE

This the 18th day of May, 2015.



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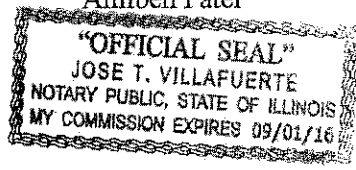
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STATE OF ILLINOIS
COUNTY OF COOK

Amiben Patel (with signature)

Sworn to and subscribed to
Before me this the 23 day of JUNE, 2015



(Signature)
Notary Public
My Commission Expires: 09-01-16

Accepted by: MIKE CHANEY
COMMISSIONER OF INSURANCE

This the ___ day of ___, 2015.