

NORTH CAROLINA
DEPARTMENT OF INSURANCE

CRYSTAL TATE

Who has fulfilled all of the conditions of eligibility imposed by the General Statutes of North Carolina is hereby licensed by this state and granted the privilege to act within the authority of this license. It shall be valid until cancelled, surrendered or revoked.

LIFE & HEALTH INSURANCE AGENT

JANUARY 20, 2006


Commissioner of Insurance

NC NOTICE OF CANCELLATION
AGENT MUST BE NOTIFIED

ID NO. 4118

RES. R

CO. NO.

LIC. TYPE 01-L

CO. OFFICIAL'S SIGNATURE _____

CRYSTAL TATE
1581 HARKIS HULLY SPRINGS RD
RUTHERFORDTON, NC 28139

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MEDICARE SUPPLEMENT/LONG TERM CARE AGENT

FEBRUARY 06, 2006


Commissioner of Insurance

NC NOTICE OF CANCELLATION
AGENT MUST BE NOTIFIED

ID NO. 4118
CO. NO.

RES.
LIC. TYPE ^R 21-L

CO. OFFICIAL'S SIGNATURE _____

CRYSTAL TATE
1581 HARRIS HULLY SPRINGS RD
RUTHERFORDION, NC 28139

RECEIVED ASD

2007 OCT 23 AM 11:11

AGENT SERVICES
DIVISION

Voluntary Surrender of Insurance Agent's License(s)

I, Crystal Tate, hereby voluntarily and permanently surrender my North Carolina Life & Health and Medicare Supplement / Long Term Care insurance agent's license(s) due to submitting ten (14) bogus insurance applications. I understand and acknowledge that effective immediately, I can no longer act as an insurance agent in North Carolina, in any manner.

I understand that I have a right to an administrative hearing. In lieu of a hearing, I voluntarily surrender my license. The license is being surrendered without duress and with knowledge of due process.

Surrendered this the 19 day of October, 2007.

[Redacted Signature]

Crystal Tate


Sworn to and subscribed before me

this the 19th day of OCTOBER, 2007

[Redacted Signature] (signature)

RANDAL E. MULKEY (printed name)
Notary Public

My commission expires: 06.29.2010

 RANDAL E MULKEY
NOTARY PUBLIC
RUTHERFORD COUNTY, NC
My Commission Expires 6-29-2010