

I, **Albert Arrivi NPN 21567826**, hereby voluntarily surrender all licenses issued to me by the North Carolina Department of Insurance (NCDOL) **for a period of two (2) years** from today's date. I understand and acknowledge that effective immediately, I can no longer perform any activities for which a license from NCDOL is required.

I understand and agree that I may not request relicensure (for any license) from NCDOL during the above-stated period of license surrender. I also understand that submitting an application for relicensure does not guarantee reissuance of license(s) surrendered.

I understand my right to an administrative hearing and to judicial review after such a hearing, and I hereby voluntarily give up those rights.

I understand that this Voluntary Surrender is equivalent to the taking of regulatory action by NCDOL. I also understand that this Voluntary Surrender will be a public record and is not confidential. NCDOL is free to disclose this Voluntary Surrender to third parties upon request or pursuant to any law or policy providing for such disclosure.

I acknowledge that I have had the opportunity to consult with an attorney prior to execution of this Voluntary Surrender.

This 14 day of 05, 2026.

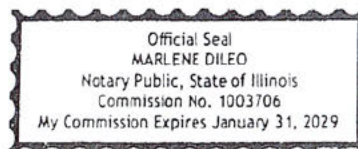
Signature

Albert Arrivi

(print name)

Sworn to and subscribed before me

This 14 day of May, 2026



Notary Public

My Commission expires: 1/31/29

