



NC DEPARTMENT of INSURANCE

MIKE CAUSEY, COMMISSIONER

AGENT SERVICES

Tel 919.807.6800 Fax 866.565.7854

DEC 29 2025

AGENT SERVICES DIVISION
N.C. DEPARTMENT OF INSURANCE

VOLUNTARY SURRENDER OF LICENSE OR LICENSES (N.C.G.S. §58-2-65)

I, **Gina Byrd (NPN # 6566954)**, hereby voluntarily surrender all licenses issued to me by the North Carolina Department of Insurance (NCDI) for a period of twenty-five (25) years. I understand and acknowledge I can no longer perform any activities for which a license from NCDI is required.

I understand and agree that I may not request relicensure (for any licenses) from NCDI 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 NCDI. I also understand that this Voluntary Surrender will be a public record reported to the NAIC and is not confidential. NCDI 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 23 day of December 2025.

Signature

Gina M. Byrd

(print name)

Sworn to and subscribed before me,

This 23 day of Dec 2025

Notary Public

My Commission expires: 4/12/28

