



Tel 919.807.6800 Fax 919.715.3794

VOLUNTARY SURRENDER O (N.C.G.S. §5
I, Michelle Encernacion, NPN 19888577, hereby voluntarily surronder all licenses issued to me by the North Carolina Department of Insurance (NCDC from today's date. I understand and acknowledge that effective immediately, I can no longer perform any activities for which a license from NCDOI is required.
I understand and agree that I may not request relicensure (for any license) from NCDOI during the above-stated period of license surrender. I also understand that submitting an application for relicensure does not guarantee reissuance of licenses.
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 NCDOI. I also understand that this Voluntary Surrender will be a public record and is not confidential. NCDOI is free to disclose this Voluntary Surrender will be a public record and is not pursuant to any law or policy providing for such disclosure.
I acknowledge that I have had the opportunity to this Voluntary Surrender.
This June day of 26, 20222. Signature
Mich (print name)
Sworn to and subscribed before me
This day of, 202
Notary Public
My Commission expires: