

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

I, Shawn Kraatz (NPN 2740313), hereby voluntarily surrender all licenses issued to me by the North Carolina Department of Insurance (NCDOI) for a period of five (5) years 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 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 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 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 16Td day of Oct 2020



SAAW KrAATZ (print name)

Sworn to and subscribed before me

Oct. , 202 . day of This

Notany Public

Notary Public

My Commission expires: 08-23-2024 R(5. Dec attached.



CALIFORNIA JURAT

GOVERNMENT CODE § 8202

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of



Subscribed and sworn to (or affirmed) before me on this 464 day of 2024, 2020, by Date day of Month 2020, by (1) Shawn KRAA72 (and (2)

Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Place Notary Seal and/or Stamp Above

Riblic Signature Signature of Notary Public

- OPTIONAL -Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** dustay Sunnder B License on License Title or Type of Document: Document Date: _____ Number of Pages: Signer(s) Other Than Named Above:

©2018 National Notary Association