



Tel 919.807.6800 Fax 919.715.3794

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

I, Mehul Shah (NPN 1940 2099), hereby voluntarily surrender all licenses issued to me by the North Carolina Department of Insurance (NCDOI) for a period of 20 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 re-licensure (for any license) from NCDOI during the above-stated period of license surrender. I also understand that submitting an application for re-licensure does not guarantee re-issuance 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 <u>26</u> day of <u>3</u> , 202 <u>1</u> .	
	Signature
	MEHUL H. SHAH
	Print Name

Sworn to and subscribed before me

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	Notary Public '			
	My Commission expires:	11-2-	2.2	17 En 12
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