STATE OF NORTH CAROLINA

VOLUNTARY SURRENDER

COUNTION	COUNTY OF	MACON
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I, Raymond F. Shapiro, hereby voluntarily surrender my North Carolina Accident & Health or Sickness license and my North Carolina Medicare Supplement Long-Term Care agent/producer license effective on the date below.

I understand that the surrender of my licenses is in lieu of an administrative hearing in *In Re: Raymond F. Shapiro* (NPN #92360), DOI Docket Number 1691, the allegations in which I neither admit nor deny.

Raymond F. Shapiro

Dated: 9-20-2011

STATE OF NORTH CAROLINA

COUNTY OF Macon

I, <u>Raymond F Shapiro</u>, the undersigned Notary Public, certify that Raymond F. Shapiro personally appeared before me this day, and acknowledged to me that he voluntarily signed the foregoing document.

Witness my hand and Notarial stamp or seal this the 20 day of Sept, 2011.

Notary Public

Typed or Printed Name of Notary

My Commission Expires: 12-14-2013

