STATE OF ALABAMA DEPARTMENT OF INSURANCE License No: 3002191524 NPN: 20474261 ABIGAIL FLOYD LICENSE EXPIRATION DATE LICENSE EFFECTIVE DATE LOA EFFECTIVE LICENSE TYPE LINES OF AUTHORIT DATE Accident & Health o 10/07/2022 04/30/2023 rance Produce 10/07/2022 Life **ABIGAIL FLOYD** -1 1324 BOSTIC ST FRANKLIN TN 37064 has fulfilled all of the conditions of eligibility imposed by the State of Alabama. Title 27. Code of Alabama and is hereby This license shall remain in effect until the expiration date unless cancelled, surrendered or revoked. Individual licensees must complete continuing education and pay all applicable renewal fees as required by Alabama administrative code prior to the expiration date For questions regarding a license, contact the Alabama Department of Insurance 334-269-3550 or E-mail:producerlicensing@insurance.alabama.gov STATE OF ALABAMA DEPARTMENT OF INSURANCE License No: 3002191524 NPN: 20474261 ABIGAIL FLOYD LOA LICENSE LICENSE **EFFECTIVE** EFFECTIVE **EXPIRATION** LINES OF AUTHORITY LICENSE TYPE DATE DATE DATE Insurance Producer Accident & Health or Sickness 10/07/2022 10/07/2022 04/30/2023 Life 10/07/2022 ATE has fulfilled all of the conditions of eligibility imposed by the State of Alabama, Title 27, Code of Alabama and is hereby

licensed/registered by this state, in the capacity stated above, and granted the privilege to act with the authority of this license. This license shall remain in effect until the expiration date unless cancelled, surrendered or revoked. Individual licensees must complete continuing education and pay all applicable renewal fees as required by Alabama administrative code prior to the expiration date.

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^CCommissioner's Signature