

ABIGAIL FLOYD 1324 BOSTIC ST FRANKLIN TN 37064

	State of Mor	ntana
License No: 3002189370	Insurance Lic	Cense NPN: 20474261
Commissioner of S	Securities and Insurance	e Office of Montana State Auditor
	ABIGAIL FL	OYD
Is licensed/authorized to en	gage in the business of insurance in the NON-RESIDENT	the State of Montana in the capacity stated below:
	LICENSE LICENS EFFECTIVE EXPIRATI DATE DATE	TION
Insurance Producer		Disability (Health), Life
An insurance producer may not claim to be a rep the producer is an appointed Insurance producer M.C.A. Failure to comply shall result in administr provided that the individual(s) named has (have) license requirements, including any continuing ed be on display in the place of business of the licer of the State of Montana. it must be returned to th suspension or revocation.	of that insurer pursuant to 33-17-236, ative action. This license is continuous complied with all Montana insurance ducation requirements. This license must isee and shall at all times be the property	Troy Downing State Auditor Commission of Securities and Insurance