| License No: 3001055714 | | STATE OF ALABAMA DEPARTMENT OF INSURANCE ICHOLAS RYAN TALLY | NPN: 19670497 | |
|--|--|---|---|---|
| LICENSE TYPE | LINES OF AUTHORITY | LOA EFFECTIVE DATE | LICENSE EFFECTIVE DATE | LICENSE EXPIRATION DATE |
| Insurance Producer | Accident & Health or Life | 10/29/2020 10/29/2020 | 06/01/2022 | 05/31/2024 |
| licensed/registere This license shall | d by this state, in the capaci remain in effect until the exp | posed by the State of Alabama, Title 27 ty stated above, and granted the privileg piration date unless cancelled, surrender pilcable renewal fees as required by Ala | e to act with the a ed or revoked. Ind | uthority of this license ividual licensees mus |

Commissioner's Signature

Department of Insurance 334-269-3550 or E-mail:producerlicensing@insurance.alabama.gov

NICHOLAS RYAN TALLY 4629 POINCIANA ST APT 205

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STATE OF ALABAMA DEPARTMENT OF INSURANCE License No: 3001055714 NPN: 19670497 NICHOLAS RYAN TALLY LOA LICENSE LICENSE **EFFECTIVE** EFFECTIVE **EXPIRATION** LINES OF AUTHORITY LICENSE TYPE DATE DATE DATE Insurance Producer Accident & Health or Sickness 10/29/2020 06/01/2022 05/31/2024 10/29/2020 Life 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. For questions regarding a license, contact the Alabama Department of Insurance 334-269-3550 or Commissioner's Signature E-mail:producerlicensing@insurance.alabama.gov