

VIATICAL BROKER LICENSE

BOCKHORN, DANIEL A
TRINITY FINANCIAL SERVICES, LLC
940 CENTRE CIRCLE SUITE 3022
ALTAMONTE SPRINGS, FL 32714

State of Nebraska

DEPARTMENT OF INSURANCE



941 O STREET SUITE 400
LINCOLN, NEBRASKA 68508-3639

NOTICE TO LICENSEE:

CHANGE OF BUSINESS AND RESIDENCE ADDRESS

EVERY PERSON LICENSED TO TRANSACT THE BUSINESS OF INSURANCE IN THE STATE OF NEBRASKA SHALL NOTIFY THE DEPARTMENT WITHIN 30 DAYS OF ANY CHANGE OF SUCH PERSON'S BUSINESS OR RESIDENCE ADDRESS. ANY PERSON FAILING TO PROVIDE SUCH NOTIFICATION SHALL BE SUBJECT TO A FINE BY THE DIRECTOR OF NOT MORE THAN FIVE-HUNDRED DOLLARS PER VIOLATION, SUSPENSION OF THE PERSON'S LICENSE UNTIL THE CHANGE OF ADDRESS IS REPORTED TO THE DEPARTMENT OF INSURANCE OR BOTH.

SUCH NOTICE OF CHANGE OF ADDRESS SHALL BE FILED ON THE FORM PRESCRIBED BY THE DIRECTOR OF INSURANCE. CHANGE OF ADDRESS FORMS MAY BE OBTAINED FROM THE NEBRASKA DEPARTMENT OF INSURANCE.

STATE OF NEBRASKA	<i>Non-Resident</i> VIATICAL BROKER LICENSE	DEPARTMENT OF INSURANCE
THIS IS TO CERTIFY THAT THE PERSON NAMED HEREON IS DULY LICENSED		
BOCKHORN, DANIEL A		
TRINITY FINANCIAL SERVICES, LLC		
940 CENTRE CIRCLE SUITE 3022		
ALTAMONTE SPRINGS, FL 32714		
NATIONAL PRODUCER # 1680978		
LICENSE NUMBER AV350548	DIRECTOR OF INSURANCE	ISSUED Mar 22, 2007
		EXPIRES Jul 31, 2008