

Removing a Designated Representative from the Business Entity's License

Name of business entity as it appear	s on the Hawaii licer	ise certificate		
HI License No.	License Types:			
REMOVI	NG A DESIGN	ATED REPRESENTATIVE		
The business entity named above is removing the Designated Representative(s) listed below.				
Print Name of individual as it app	ears on the Hawai	i license certificate		
1.				
2.				
3.				
Signature of Officer		Signature of Designated Representative		
Print Name of Officer Title of Officer	OR	Print Name of Designated Representative		
Title of Officer				

IMPORTANT NOTE: The changes indicated above will be effective upon receipt in the Hawaii Insurance Division.

Hawaii Insurance Division, 335 Merchant Street - Room 213, Honolulu, Hawaii 96813				
Website: http://insurance.hawaii.gov	FOR MORE	phone: 808-586-2788		
E-mail: InsLic@dcca.hawaii.gov	INFO	fax: 808-587-6714		