

State of



Louisiana

Commissioner of Insurance
certifies that

Prat Kein Godoy
2645 Executive Park Dr Ste 354
Weston, FL 33331-3624

*has properly met the requirements for licensure of the
Louisiana Department of Insurance.*

License Number: 1000214



<u>License Code</u>	<u>Issue Date</u>	<u>Expiration Date</u>
Producer - Accident and Health or Sickness	08/02/2022	05/31/2026
Producer - Life	08/02/2022	05/31/2026

A handwritten signature in black ink, appearing to read "Timothy J. Temple".

Timothy J. Temple
Commissioner of Insurance

State of Maryland Insurance License

License No: 3001983275

NPN: 19306888

PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

This is to certify that pursuant to requirements of the Maryland Insurance Code the above named is qualified to do business in the state of Maryland with the authority listed below.

NON-RESIDENT

LICENSE/REGISTRATION	LICENSE ISSUE DATE	LICENSE EXPIRATION DATE	LINE OF AUTHORITY
Insurance Producer	06/01/2025	05/31/2027	Accident and Health or Sickness, Life

This qualification shall remain in effect until the expiration date, unless suspended, revoked or denied. Licensees, Registrants must renew the qualification and pay all applicable fees as required by Maryland Insurance Code prior to the expiration date.

For questions regarding licensing, renewal or continuing education Requirements, contact the Maryland Insurance Administration at 1-888-204-6198 or visit www.insurance.maryland.gov

Marie Grant, Insurance Commissioner
VOID IF ALTERED, NON-TRANSFERABLE

Dear Licensee:

Enclosed is your new license.

Please use your new License number, your name as it appears on your License, and your Social Security or National Producer Number whenever calling or writing to the Maryland Insurance Administration. Any update to the information provided on your original application must be reported to The Maryland Insurance Administration within thirty (30) days of the change.

If applicable, you must remain current on, and comply with all Continuing Education requirements for any License and lines of insurance that you hold. Please see the Maryland CE regulation for details.

Should you have any questions or concerns regarding your Maryland Insurance License, please call our customer service unit at 1-888-204-6198 between 8:00AM and 5:00PM EST Monday through Friday, or write to The Maryland Insurance Administration, Attn: Producer Licensing, 200 St. Paul Place, Suite 2700, Baltimore, MD 21202.

Sincerely,
The Maryland Insurance Administration



State of Michigan

Department of Insurance and Financial Services

The licensee has fulfilled the requirements of Public Act 218 of 1956 as amended. This license is granted by the Director of the Department of Insurance and Financial Services to engage in the business of Insurance as stated on this license, subject to all applicable laws, regulations and rules.

SYSTEM ID: 1228993

LICENSE: Non-Resident Producer

NPN: 19306888

EFFECTIVE: 08-08-2023

QUALIFICATIONS

GODOY, PRAT KEIN
55 TRUMAN DR
WESTON, FL 33326

Accident and Health 08-08-2023
Life 08-08-2023



MISSISSIPPI

INSURANCE DEPARTMENT

Mike Chaney
Commissioner of Insurance

David Browning
Deputy Commissioner of Insurance

License

PRAT KEIN GODOY

License Number: 10963227 NPN: 19306888

is licensed to engage in the business of insurance in the State of Mississippi in the capacity stated below, subject to applicable laws and rules.

	Effective Date	Expiration Date
Licensed as: Insurance Producer	07-19-2023	05-31-2027
Qualified for:		
Accident & Health or Sickness	07-19-2023	
Life	07-19-2023	

Commissioner of Insurance

Mississippi Insurance Department



PRAT KEIN GODOY
LICENSE NUMBER: 10963227 NPN: 19306888

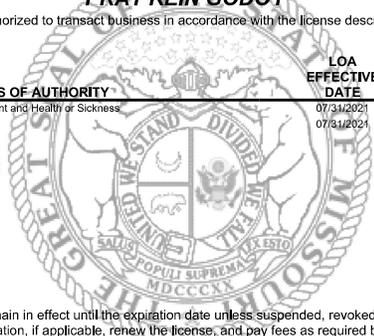
Licensed as/ Qualified for:	Effective Date	Expiration Date
Insurance Producer	07-19-2023	05-31-2027
Accident & Health or Sickness	07-19-2023	
Life	07-19-2023	

State of Missouri
 Insurance License NPN: 19306888

PRAT KEIN GODOY

Is hereby authorized to transact business in accordance with the license description below:

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident and Health or Sickness Life	07/31/2021 07/31/2021	05/12/2026



This insurance license shall remain in effect until the expiration date unless suspended, revoked or forfeited. The individual must complete continuing education, if applicable, renew the license, and pay fees as required by Missouri Statutes prior to the expiration date.

For questions regarding a license, contact:
 MO Dept. of Commerce and Insurance 573-751-3518
 or E-mail: licensing@insurance.mo.gov
<http://www.insurance.mo.gov>

PRAT KEIN GODOY

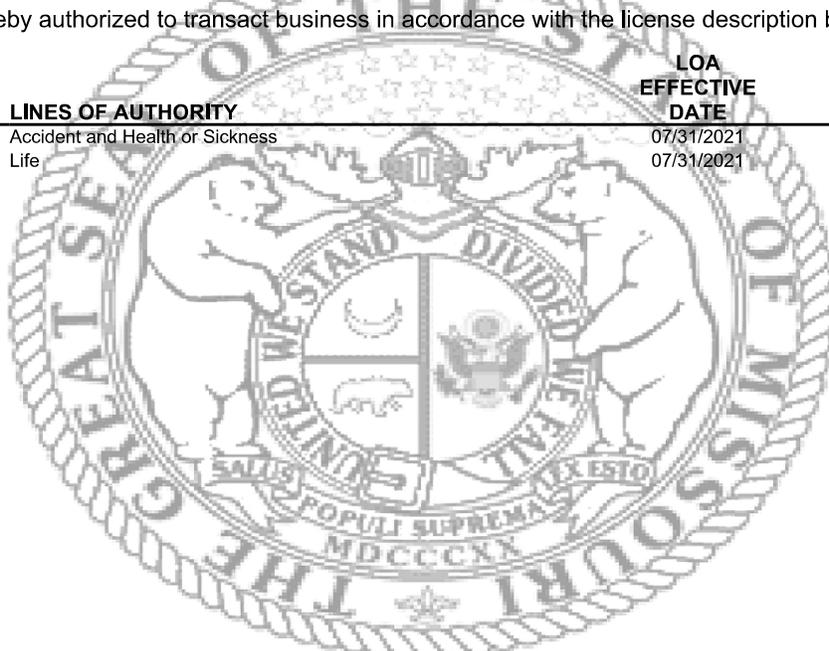
2645 EXECUTIVE PARK DR STE 354
 WESTON FL 33331-3624

State of Missouri
 Insurance License NPN: 19306888

PRAT KEIN GODOY

Is hereby authorized to transact business in accordance with the license description below:

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident and Health or Sickness Life	07/31/2021 07/31/2021	05/12/2026



This insurance license shall remain in effect until the expiration date unless suspended, revoked or forfeited. The individual must complete continuing education, if applicable, renew the license, and pay fees as required by Missouri Statutes prior to the expiration date.

For questions regarding a license, contact:
 MO Dept. of Commerce and Insurance 573-751-3518
 or E-mail: licensing@insurance.mo.gov
<http://www.insurance.mo.gov>

State of New Jersey

License No: 3002651002

NPN: 19306888

Department of Banking and Insurance

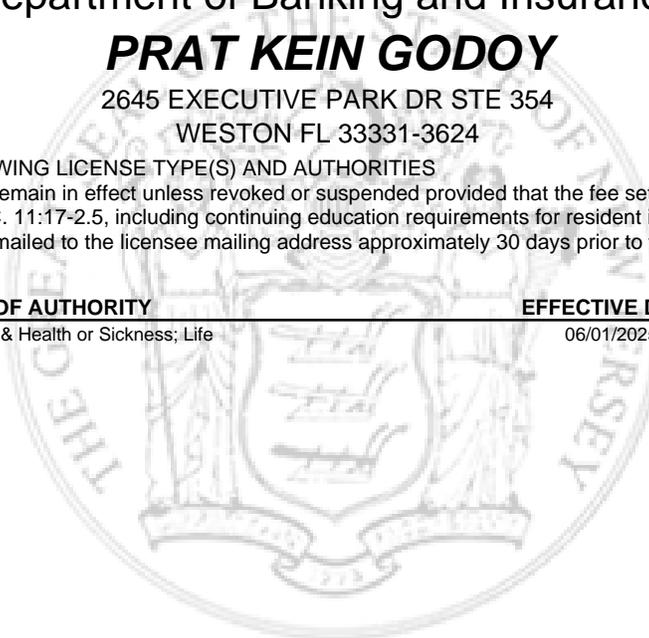
PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness; Life	06/01/2025	05/31/2027



A handwritten signature in black ink, reading 'Justin Zimmerman', is located in the lower right quadrant of the page.

The department maintains an informative website at www.dobi.nj.gov. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information

web site: www.dobi.nj.gov
phone: (609) 292-4337
fax: (609) 984-5263

The request for any change of license information must be sent to the Department within 30 days of the change.

Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance
20 West State Street
P.O. Box 327
Trenton, NJ. 08625-0327

PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

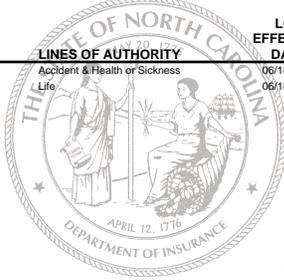
PRAT KEIN GODOY
 55 TRUMAN DR
 WESTON FL 33326

North Carolina
License

License No: 19306888 NPN: 19306888

PRAT KEIN GODOY

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE FIRST ACTIVE DATE
Insurance Producer	Accident & Health or Sickness Life	06/18/2021 06/18/2021	06/18/2021



APRIL 12, 1776
DEPARTMENT OF INSURANCE

Mike Causey
Mike Causey, Commissioner of Insurance

This insurance license shall remain in effect until the expiration date unless cancelled, surrendered or revoked. Individuals who are licensed as Insurance Producers and/or Bail Bond licensees must complete continuing education and pay all applicable renewal fees as required by North Carolina administrative code prior to the expiration date.

North Carolina

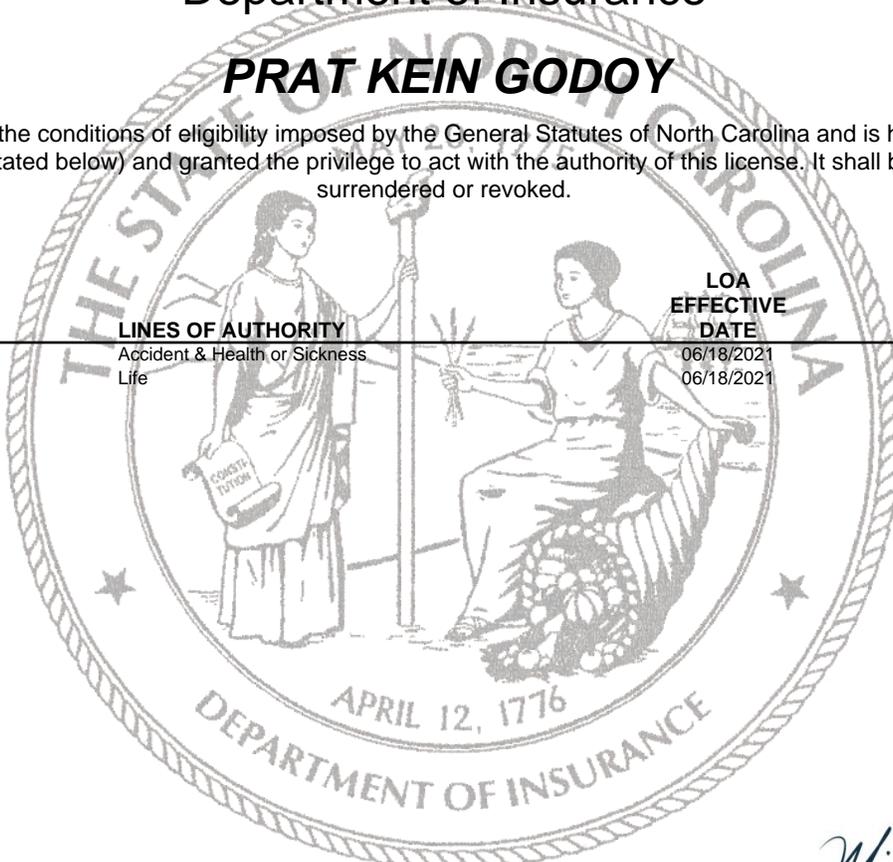
License

Department of Insurance

PRAT KEIN GODOY

Who has fulfilled all of the conditions of eligibility imposed by the General Statutes of North Carolina and is hereby licensed by this State (in the capacity stated below) and granted the privilege to act with the authority of this license. It shall be valid until cancelled, surrendered or revoked.

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE FIRST ACTIVE DATE
Insurance Producer	Accident & Health or Sickness Life	06/18/2021 06/18/2021	06/18/2021



APRIL 12, 1776
DEPARTMENT OF INSURANCE

Mike Causey
Mike Causey, Commissioner of Insurance

For questions regarding a license please contact the North Carolina Department of Insurance at: 919-807-6800

State of Ohio Department of Insurance

PRAT KEIN GODOY

Is licensed to engage in the business of insurance in the
State of Ohio in the capacity stated below.

License Type : Non-Resident Major Lines
Line(s) of Authority : Accident & Health, Life



Date of License: October 25, 2022
Expiration Date: May 31, 2026
License Number: 1470584
National Producer Number: 19306888

Mike Dewine, Governor

Judith L. French
Judith L. French, Director

Ohio Insurance License

Issued By:
The Ohio Department of Insurance

PRAT KEIN GODOY
(National Producer No: 19306888)

Is hereby licensed to engage in the business of insurance in the State of Ohio in the capacity stated below:

License Type: Non-Resident Major Lines
Line(s) of Authority: Accident & Health, Life



License Number: 1470584
Date of License: October 25, 2022
Expiration Date: May 31, 2026

Mike Dewine, Governor

Judith L. French
Judith L. French, Director

PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON, FL 333313624

Ohio Insurance License

Consumers 800-686-1526 | Medicare 800-686-1578 | Fraud & Enforcement 800-686-1527

Your work helps financially protect Ohio consumers and their families.

You are also part of Ohio's dynamic and growing insurance industry and marketplace, which is one of the strongest and largest in the world.

Your work is vital to Ohio's economy and to the consumers that need your expertise when making decisions that impact their lives.

I have included some information to help you as an insurance professional:



Judith L. French, Director

- Report any change of address and/or contact information to the [department](#) immediately to ensure you continue receiving important information about your license.
- Before signing a contract with an insurance company or agency, verify that they are authorized and/or licensed to do business in Ohio.
- Keep up with important ODI news. Sign up for our [Monthly Insurance Review](#) newsletter.
- Insurance fraud and professional misconduct are illegal. Contact the department's [Fraud and Enforcement Division](#) or call 800-686-1527 to report suspected wrongdoing.
- For answers to questions regarding your insurance license and meeting your regulatory requirements, visit the department's [Licensing Division](#) web page or call 614-644-2665.

Let us work together to serve and protect Ohio insurance consumers.

Sincerely,



Judith L. French
Ohio Department of Insurance Director

PRAT KEIN GODOY
 2645 EXECUTIVE PARK DR STE 354
 WESTON FL 33331-3624

State of Oklahoma
 License No: 3002225726 Insurance Department NPN: 19306888

PRAT KEIN GODOY

This is to certify that the above named individual is properly licensed in the State of Oklahoma in accordance with the provisions of the Oklahoma Insurance code, and has

LICENSE CLASS	FIRST ACTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY	LOA EFFECTIVE DATE
Insurance Producer	10/26/2022	06/01/2024	05/31/2026	Accident & Health or Sickness Life	10/26/2022 10/26/2022

In testimony Whereof, I have affixed my signature as Insurance Commissioner in the State of Oklahoma to this Certificate and caused these letters to be made Patent.

Glen Mulready
 Glen Mulready
 Insurance Commissioner
 State of Oklahoma Insurance

This license shall continue in force until suspended, revoked or terminated.

State of Oklahoma
 License No: 3002225726 Insurance Department NPN: 19306888

PRAT KEIN GODOY

This is to certify that the above named individual is properly licensed in the State of Oklahoma in accordance with the provisions of the Oklahoma Insurance code, and has duly met all qualifications as provided by statute to act in the following capacity:

LICENSE CLASS	FIRST ACTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY	LOA EFFECTIVE DATE
Insurance Producer	10/26/2022	06/01/2024	05/31/2026	Accident & Health or Sickness Life	10/26/2022 10/26/2022

In testimony Whereof, I have affixed my signature as Insurance Commissioner in the State of Oklahoma to this Certificate and caused these letters to be made Patent.

Glen Mulready
Glen Mulready
 Insurance Commissioner
 State of Oklahoma Insurance

This license shall continue in force until suspended, revoked or terminated.

PRAT KEIN GODOY
 2645 EXECUTIVE PARK DR STE 354
 WESTON FL 33331-3624

STATE OF ALABAMA
 DEPARTMENT OF INSURANCE

License No: 3002616700 NPN: 19306888

PRAT KEIN GODOY

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident & Health or Life	07/19/2023 07/19/2023	06/01/2025	05/31/2027

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 E-mail:producerlicensing@insurance.alabama.gov


 Commissioner's Signature

STATE OF ALABAMA
 DEPARTMENT OF INSURANCE

License No: 3002616700 NPN: 19306888

PRAT KEIN GODOY

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness Life	07/19/2023 07/19/2023	06/01/2025	05/31/2027

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 E-mail:producerlicensing@insurance.alabama.gov


 Commissioner's Signature

PRAT KEIN GODOY
55 TRUMAN DR
WESTON FL 33326

ARIZONA INSURANCE LICENSE

License No: 19306888

PRAT KEIN GODOY

55 TRUMAN DR
WESTON FL 33326

NON-RESIDENT

As of May 03, 2023

LICENSE CLASS	FIRST ACTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY	LOA EFFECTIVE DATE
Insurance Producer	11/15/2019	06/01/2023	05/31/2027	Accident and Health or Sickness Life	11/15/2019

APPOINTMENT DATA IS NOT COLLECTED, TRACKED OR MAINTAINED IN ARIZONA.

Arizona Department of Insurance and Financial Institutions
100 N 15th Ave, Suite 261
Phoenix, AZ 85007-2630

PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

License No: 19306888

State of Arkansas

Insurance License

Arkansas Insurance Department

PRAT KEIN GODOY

This is to certify that the above named individual is licensed to engage in the business of insurance in the State of Arkansas in the following capacity:

NON-RESIDENT

LICENSE TYPE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY
Exchange Producer	10/01/2024	09/30/2025	Exchange Health
Insurance Producer	12/14/2023	05/31/2025	Accident and Health or Sickness, Life



Alan McClain

ALAN MCCLAIN
Insurance Commissioner

For questions regarding a license, contact Arkansas Insurance Department at 501-371-2750 or E-mail: insurance.license@arkansas.gov

License No: 19306888

State of Arkansas

Insurance License

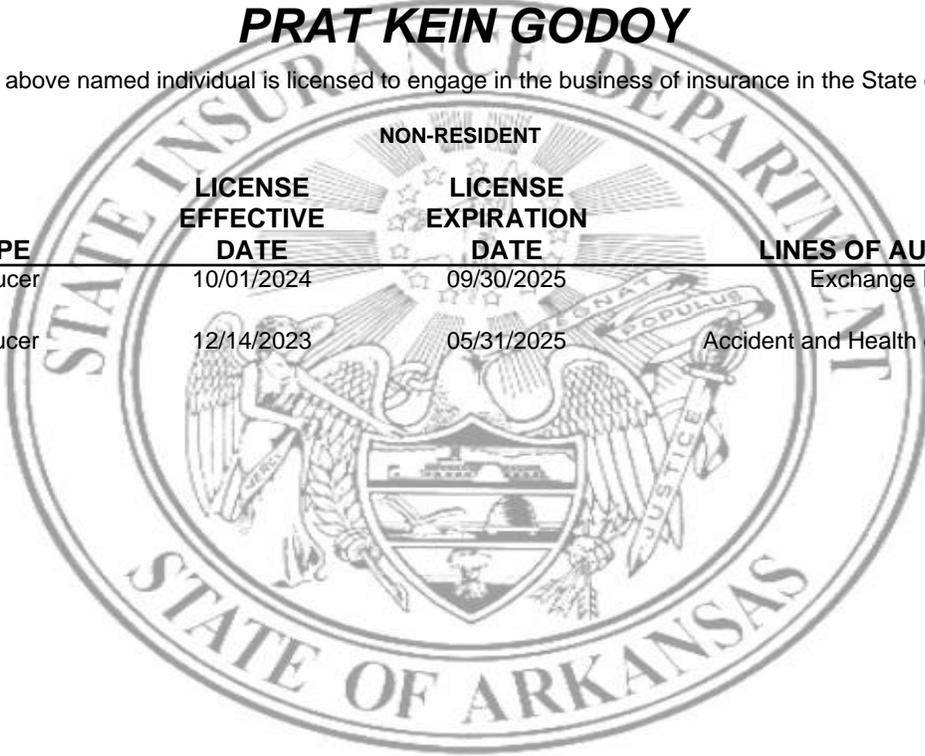
Arkansas Insurance Department

PRAT KEIN GODOY

This is to certify that the above named individual is licensed to engage in the business of insurance in the State of Arkansas in the following capacity:

NON-RESIDENT

LICENSE TYPE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY
Exchange Producer	10/01/2024	09/30/2025	Exchange Health
Insurance Producer	12/14/2023	05/31/2025	Accident and Health or Sickness, Life



Alan McClain

ALAN MCCLAIN
Insurance Commissioner

For questions regarding a license, contact Arkansas Insurance Department at 501-371-2750 or E-mail: insurance.license@arkansas.gov



Insurance Producer
 Accident & Health or Sickness, Life

PRAT KEIN GODOY
 55 TRUMAN DR
 WESTON, FL 33326

is authorized to transact business as described above

License No: 4156805

Issue Date: 09-20-2021

Expiration Date: 09-30-2025

Generated by Sircon 300006436

<p>California Department of Insurance THIS IS TO CERTIFY THAT</p>  <p>PRAT KEIN GODOY 55 TRUMAN DR, WESTON, FL 33326</p> <p>LICENSE NUMBER: 4156805</p>	<p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>Insurance Producer Accident & Health or Sickness, Life</p> <p>Issue Date: 09-20-2021 Expiration Date: 09-30-2025</p> <p>Generated by Sircon 300006436</p>
--	--



COLORADO

Department of Regulatory Agencies

Division of Insurance

Non-Resident Producer

Qualification Effective Dates

Accident and Health 06/21/2023 Life 06/21/2023

PRAT KEIN GODOY

NPN: 19306888

WESTON, FLORIDA

is authorized to transact business as described above

License No: 798793 Issue Date: 06/21/2023 Expiration Date: 05/31/2027

Generated by Sircon 347978919

<p>Colorado Division of Insurance</p> <p>THIS IS TO CERTIFY THAT</p> <p>PRAT KEIN GODOY WESTON, FLORIDA</p> <p>LICENSE NUMBER: 798793 NPN: 19306888</p> 	<p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>Non-Resident Producer</p> <p>Accident and Health, Life</p> <p>Issue Date: 06/21/2023 Expiration Date: 05/31/2027</p> <p>Generated by Sircon 347978919</p>
---	---



Non-Resident Producer

Qualification Effective Dates

Accident & Health or Sickness 02/14/2024 Life 02/14/2024

PRAT KEIN GODOY

NPN: 19306888

2645 EXECUTIVE PARK DR STE 354

WESTON, FL 33331-3624

is authorized to transact business as described above

License No: 584269 Issue Date: 02/14/2024 Expiration Date: 05/31/2026

Generated by Sircon 314786143

<p>Wyoming Insurance Department THIS IS TO CERTIFY THAT</p>  <p>PRAT KEIN GODOY 2645 EXECUTIVE PARK DR STE 354 WESTON, FL 33331-3624</p> <p>LICENSE NUMBER: 584269 NPN: 19306888</p>	<p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>Non-Resident Producer Accident & Health or Sickness, Life</p> <p>Issue Date: 02/14/2024 Expiration Date: 05/31/2026</p> <p>Generated by Sircon 314786143</p>
---	---

PRAT KEIN GODOY
 2645 EXECUTIVE PARK DR STE 354
 WESTON FL 33331-3624

State of Oregon
Insurance License
 Oregon Department of Consumer & Business Services Insurance Division
PRAT KEIN GODOY

Is licensed/authorized to engage in the business of insurance in the State of Oregon in the capacity stated below.

LICENSE TYPE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY
Insurance Producer	06/01/2025	05/31/2027	Health, Life

The license continues in force until it is suspended, revoked, or expired. This license cannot be reinstated if it has been expired longer than 1 calendar year from the date of expiration.

A licensee must notify the director of the Department of Consumer Services & Business Services no more than 30 days after a change of resident, business address, or telephone number. ORS-744.068

A producer can not transact insurance unless appointed by an insurer or affiliated with a business entity that is appointed by an insurer. ORS 744.078

For more information, call (503)947-7981

Register for E-notify to receive notification of law changes; The Regulator, and other information.
https://service/gov/delivery.com/service/multi_subscribe.html

State of Oregon
Insurance License
 Oregon Department of Consumer & Business Services Insurance Division
PRAT KEIN GODOY

Is licensed/authorized to engage in the business of insurance in the State of Oregon in the capacity stated below.

NON-RESIDENT

LICENSE TYPE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY
Insurance Producer	06/01/2025	05/31/2027	Health, Life

The license continues in force until it is suspended, revoked, or expired. This license cannot be reinstated if it has been expired longer than 1 calendar year from the date of expiration.

A licensee must notify the director of the Department of Consumer Services & Business Services no more than 30 days after a change of resident, business address, or telephone number. ORS-744.068

A producer can not transact insurance unless appointed by an insurer or affiliated with a business entity that is appointed by an insurer. ORS 744.078

For more information, call (503)947-7981

Register for E-notify to receive notification of law changes; The Regulator, and other information.
https://service/gov/delivery.com/service/multi_subscribe.html

Detach this wallet size license and carry on your person.



PRAT KEIN GODOY
License Number 1151538

License Type: Non-Resident Producer Indv
Effective Date: September 28, 2023
Expiration Date: May 31, 2026

PRAT KEIN GODOY
55 TRUMAN DR
WESTON, FL 33326

Lines of Authority:
Life and Fixed Annuities,
Accident and Health


 2127228172

- This is your new License. Please note your new license number and check your lines of authority to be certain they are correct.
- If your license is subject to Continuing Education (CE) requirements, this requirement **MUST BE SATISFIED** prior to your license expiration date.
 - To obtain information on your CE requirements and current CE status, access www.sircon.com/pennsylvania
- You must notify the Insurance Department of address changes within 30 days of the change.
 - You may report the address change via e-mail sent to ra-in-producer@pa.gov
- For additional information on the services of the Insurance Department visit our website at www.insurance.pa.gov
- You must notify the Insurance Department in writing within 30 days of being charged with any misdemeanor or felony.

Visit the Pennsylvania Insurance Department’s WEB Site at www.insurance.pa.gov

DETACH BELOW

PRAT KEIN GODOY
License Number 1151538

is licensed to engage in the business of insurance in the Commonwealth of Pennsylvania in the capacity stated below, subject to applicable laws and rules

License Type: Non-Resident Producer Indv

Effective Date: September 28, 2023

Expiration Date: May 31, 2026

PRAT KEIN GODOY
55 TRUMAN DR
WESTON, FL 33326



Lines of Authority:

Life and Fixed Annuities, Accident and Health



PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

State of South Carolina
Department of Insurance
PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

License No: 19306888

Is authorized by this department to sell, solicit, or negotiate insurance for the line(s) of authority shown

LICENSE TYPE	LICENSE FIRST ACTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY
Insurance Producer	06/18/2021	05/31/2027	Accident & Health or Sickness, Life

Subject to Cancellation, Suspension, or Revocation per Statutes.

Date Printed: June 12, 2025



State of South Carolina

License No: 19306888

Department of Insurance

PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

NON-RESIDENT

Is authorized by this department to sell, solicit, or negotiate insurance for the line(s) of authority shown

LICENSE TYPE	LICENSE FIRST ACTIVE DATE	LICENSE EXPIRATION DATE	LINES OF AUTHORITY
Insurance Producer	06/18/2021	05/31/2027	Accident & Health or Sickness, Life

Subject to Cancellation, Suspension, or Revocation per Statutes.

Date Printed: June 12, 2025



<p align="center">State of Tennessee Department of Commerce and Insurance PRAT KEIN GODOY</p>		
<p>License No: 2472053 NPN: 19306888</p>		
<p>LICENSE TYPE Insurance Producer</p>	<p>LINES OF AUTHORITY Life Accident & Health</p>	<p>LICENSE EXPIRATION DATE 05/31/2026</p>

PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

<p>License No: 2472053</p>	<p>State of Tennessee Department of Commerce and Insurance</p>	<p>NPN: 19306888</p>
<p>PRAT KEIN GODOY</p> <p>This is to certify that all requirements of the State of Tennessee have been met.</p>		
<p>LICENSE TYPE Insurance Producer</p>	<p>LINES OF AUTHORITY Life Accident & Health</p>	<p>LICENSE EXPIRATION 05/31/2026</p>
<p>This insurance license shall remain in effect until the expiration date unless suspended, revoked or forfeited. The insurance producer must complete continuing education, renew the license and pay fees.</p>		
		
<p>IN-1313 Department of Commerce and Insurance</p>		



General Lines Agent

Life, Accident, Health and HMO

PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354
WESTON, FL 33331-3624

is authorized to transact business as described above

License No: 2523787

Issue Date: 05-25-2020

Expiration Date: 05-31-2026

Generated by Sircon 316984300

<p>TEXAS DEPARTMENT OF INSURANCE THIS IS TO CERTIFY THAT</p>  <p>PRAT KEIN GODOY 2645 EXECUTIVE PARK DR STE 354, WESTON, FL 33331-3624</p> <p>LICENSE NUMBER: 2523787</p>	<p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>General Lines Agent Life, Accident, Health and HMO</p> <p>Issue Date: 05-25-2020 Expiration Date: 05-31-2026</p> <p>Generated by Sircon 316984300</p>
--	---



State of Utah

SPENCER J. COX
Governor

DEIDRE M. HENDERSON
Lieutenant Governor

Insurance Department

JONATHAN T. PIKE
Insurance Commissioner

Licenses must submit address changes to the Utah Insurance Department within 30 days of the change. All such changes should be submitted online at www.sircon.com/utah or www.nipr.com.

Individual producers cannot solicit, sell, or negotiate insurance until appointed by an insurer or designated to act by an insurance agency.

Insurance Agencies cannot solicit, sell, or negotiate insurance until contracted and appointed by an insurer.

Non-Resident Producer Individual

Accident and Health or Sickness, Life

PRAT KEIN GODOY

55 TRUMAN DR
WESTON, FL 33326

is authorized to transact business as described above

License No: 992324

Issue Date: 07-18-2023

Expiration Date: 05-31-2026

Generated by Sircon 300335701

<p>State of Utah Insurance Department</p> <p>THIS IS TO CERTIFY THAT</p> <p>PRAT KEIN GODOY 55 TRUMAN DR, WESTON, FL 33326</p> <p>LICENSE NUMBER: 992324</p> 	<p>IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW:</p> <p>Non-Resident Producer Individual Accident and Health or Sickness, Life</p> <p>Issue Date: 07-18-2023 Expiration Date: 05-31-2026</p> <p>Generated by Sircon 300335701</p>
---	---



Producer

Qualification Effective Dates

Health 06/18/2021 Life & Annuities 06/18/2021

PRAT KEIN GODOY

NPN: 19306888

2645 EXECUTIVE PARK DR STE 354

WESTON, FLORIDA 33331-3624

is authorized to transact business as described above

License No: 1243445 Issue Date: 06/18/2021 Expiration Date: 05/31/2027

Generated by Sircon 348084029

**COMMONWEALTH OF VIRGINIA
BUREAU OF INSURANCE**

THIS IS TO CERTIFY THAT



PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354
WESTON, FLORIDA 33331-3624

LICENSE NUMBER: 1243445

NPN: 19306888

IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN
ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN
BELOW:

Producer

Health, Life & Annuities

Issue Date: 06/18/2021

Expiration Date: 05/31/2027

Generated by Sircon 348084029

OIC online services login information:

User ID: LIC1170128
Registered email address: inversioneskein@gmail.com
Next expiry date: 05/31/2024

Remember, all licensing processes must be completed online.

Contact us via:

Email: licinfo@oic.wa.gov
Phone: 360-725-7144
Fax: 360-586-2019
Postal mail: P.O. Box 40255
Olympia, WA 98504-0255

Visit our website: <https://www.insurance.wa.gov/producers>

Make sure you are familiar with insurance license compliance laws and rules at:
<https://www.insurance.wa.gov/now-youre-licensed-whats-next>

Cut Here Cut Here Cut Here Cut Here Cut Here Cut Here

State of Washington
OFFICE OF THE INSURANCE COMMISSIONER

* * * INSURANCE PRODUCER LICENSE * * *

WAOIC # : 1170128
EFFECTIVE : 08/16/2022
EXPIRES : 05/31/2024
PRAT KEIN GODOY
55 TRUMAN DR
WESTON FL 33326

THE LICENSEE IS AUTHORIZED TO SELL THE FOLLOWING
LINES OF INSURANCE:
Life, Disability

THIS LICENSE MUST BE ACCOMPANIED BY A CURRENT
APPOINTMENT OR AFFILIATION FOR EACH INSURER OR
BUSINESS ENTITY REPRESENTED.

Prat Kein Godoy
INSURANCE COMMISSIONER

NOT TRANSFERABLE

PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

State of Wisconsin

License No: 19306888

Insurance License

NPN: 19306888

Office of the Commissioner of Insurance

PRAT KEIN GODOY

Is licensed to transact insurance business in the state of Wisconsin subject to applicable laws and regulations.

LICENSE TYPE	EFFECTIVE DATE	LICENSE EXPIRATION DATE	LINE OF AUTHORITY	LOA EFFECTIVE DATE
Intermediary (Agent) Individual	06/01/2025	05/31/2027	Accident & Health Life	10/13/2022 10/13/2022

Document printed on-line. To verify license status or appointment, go to OCI Website at www.statebasedsystems.com

Licensee must notify OCI of any change of name or address within 30 days of the change. Regulation fees and continuing education (if required) are due by the expiration date identified.

Office of the Commissioner of Insurance

Agent Licensing Section

PO Box 7872

Madison, Wisconsin 53707-7872

Telephone: (608)266-8699 Website: oci.wi.gov

E-mail: ociagentlicensing@wisconsin.gov

FLORIDA DEPARTMENT OF FINANCIAL SERVICES

PRAT KEIN GODOY

License Number : W601115

Resident Insurance License

● 0215 - LIFE INCL VAR ANNUITY & HEALTH

Issue Date

10/02/2019



Please Note:

A licensee may only transact insurance with an active appointment by an eligible insurer or employer. If you are acting as a surplus lines agent, public adjuster, or reinsurance intermediary manager/broker, you should have an appointment recorded in your own name on file with the Department. If you are unsure of your license status you should contact the Florida Department of Financial Services immediately. This license will expire if more than 48 months elapse without an appointment for each class of insurance listed. If such expiration occurs, the individual will be required to re-qualify as a first-time applicant. If this license was obtained by passing a licensure examination offered by the Florida Department of Financial Services, the licensee is required to comply with continuing education requirements contained in 626.2815 or 648.385, Florida Statutes. A licensee may track their continuing education requirements completed or needed in their MyProfile account at <https://dice.flds.com>. To validate the accuracy of this license you may review the individual license record under "Licensee Search" on the Florida Department of Financial Services website at <http://www.MyFloridaCFO.com/Division/Agents>



Jimmy Patronis
Chief Financial Officer
State of Florida



Non-Resident Agent
Agent - Accident & Sickness
Agent - Life

PRAT KEIN GODOY

is authorized to transact business as described above

License No: 3364998

Effective Date: 01-12-2021

Expiration Date: 05-31-2027

**Georgia Department
of Insurance**

THIS IS TO CERTIFY THAT

PRAT KEIN GODOY

LICENSE NUMBER: 3364998



IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN
ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN
BELOW:

Non-Resident Agent
Agent - Accident & Sickness
Agent - Life

Effective Date: 01-12-2021

Expiration Date: 05-31-2027

PRAT KEIN GODOY
 2645 EXECUTIVE PARK DR STE 354
 WESTON FL 33331-3624

State Of Illinois
 Insurance License
PRAT KEIN GODOY

License No: 19306888 NPN: 19306888

This is to certify that pursuant to requirements of the Illinois Insurance code the above individual is licensed to do business in the state of Illinois with the following authority:

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Health	06/18/2021	06/01/2025	05/31/2027
	Life	06/18/2021		

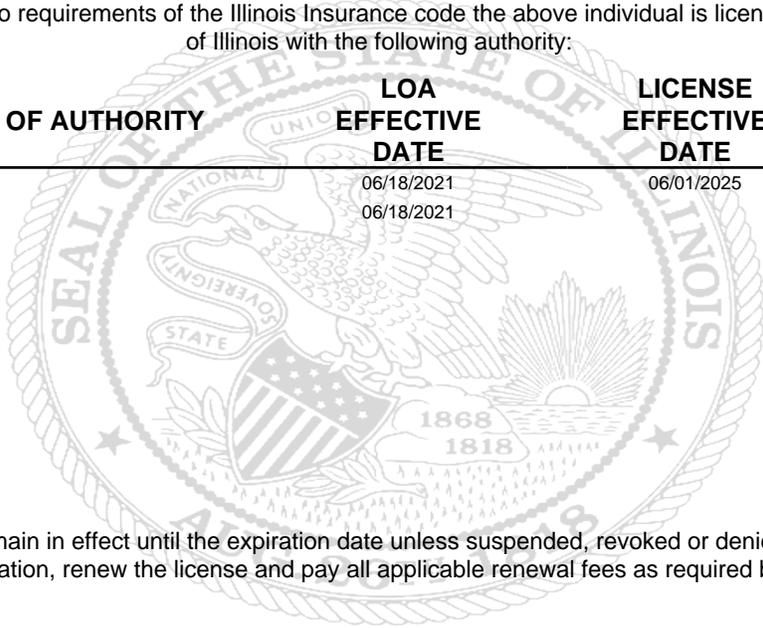

 Ann Gillespie
 Acting Director Illinois Dept. of Insurance

State Of Illinois
 Insurance License
PRAT KEIN GODOY

License No: 19306888 NPN: 19306888

This is to certify that pursuant to requirements of the Illinois Insurance code the above individual is licensed to do business in the state of Illinois with the following authority:

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Health	06/18/2021	06/01/2025	05/31/2027
	Life	06/18/2021		



This insurance license shall remain in effect until the expiration date unless suspended, revoked or denied. If required, the licensee must complete continuing education, renew the license and pay all applicable renewal fees as required by Illinois administrative code prior to the expiration date.


 Ann Gillespie
 Acting Director Illinois Dept. of Insurance

For questions regarding a license, contact the Illinois Department of Insurance at DOI.licensing@illinois.gov



Non-Resident Producer Indv.

Qualification Effective Dates

Life, Accident & Health 09/01/2021

PRAT KEIN GODOY

NPN: 19306888

2645 EXECUTIVE PARK DR STE 354

WESTON, FLORIDA 33331-3624

is authorized to transact business as described above

License No: 3716531 Issue Date: 09/01/2021 Expiration Date: 05/31/2026

Generated by Sircon 348079127

**Indiana Department
of Insurance**

THIS IS TO CERTIFY THAT

PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON, FLORIDA 33331-3624

LICENSE NUMBER: 3716531

NPN: 19306888



IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN
ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN
BELOW:

Non-Resident Producer Indv.

Life, Accident & Health

Issue Date: 09/01/2021

Expiration Date: 05/31/2026

Generated by Sircon 348079127

PRAT KEIN GODOY
2645 EXECUTIVE PARK DR STE 354
WESTON FL 33331-3624

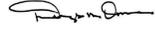
State of Iowa

License No: 19306888 Insurance License NPN: 19306888

PRAT KEIN GODOY

Is licensed to engage in the business of insurance in the State of Iowa in the capacity stated below:

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident and Health Life	05/01/2025 05/01/2025	05/01/2025	05/31/2028


Doug Ommen, Insurance Commissioner

State of Iowa

License No: 19306888 Insurance License NPN: 19306888

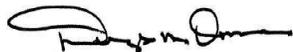
PRAT KEIN GODOY

Is licensed to engage in the business of insurance in the State of Iowa in the capacity stated below:

LICENSE TYPE	LINES OF AUTHORITY	LOA EFFECTIVE DATE	LICENSE EFFECTIVE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident and Health Life	05/01/2025 05/01/2025	05/01/2025	05/31/2028

This insurance license shall remain in effect until the expiration date unless suspended, revoked or forfeited. The insurance producer must complete continuing education, renew the license and pay fees as required by 191 Iowa Administrative code Chapters 10 and 11 prior to the expiration date.

For questions regarding a license, contact:
Iowa Insurance Division 515-654-6600
or E-mail: producer.licensing@iid.iowa.gov


Doug Ommen, Insurance Commissioner

Before an individual insurance producer can sell insurance in Kansas, you must secure a company certification. An appointment is required by each company for which you sell, solicit, or negotiate insurance in Kansas. For questions see information on appointments at the Department's website at insurance.kansas.gov/company-appointment/.

The named licensee is required to keep a current email address on file with the Kansas Insurance Department. In addition, in accordance with K.S.A. 40-4905 you shall remain in compliance by reporting home and mailing address changes, name changes, email address changes, regulatory actions, termination for cause, actions taken against a license in another state and new convictions, within 30 days of the occurrence, to the Department. See the Department's website at insurance.kansas.gov for details on how to update your information through nopr.com.

For information on Continuing Education requirements and license renewals, see the Kansas Department of Insurance's website for details. If you have questions regarding your Kansas Insurance License, call the Licensing Division at 785-296-7862, or email the department at kdoi.licensing@ks.gov.

PRAT KEIN GODOY

2645 EXECUTIVE PARK DR STE 354

WESTON FL 33331-3624

Kansas Insurance License

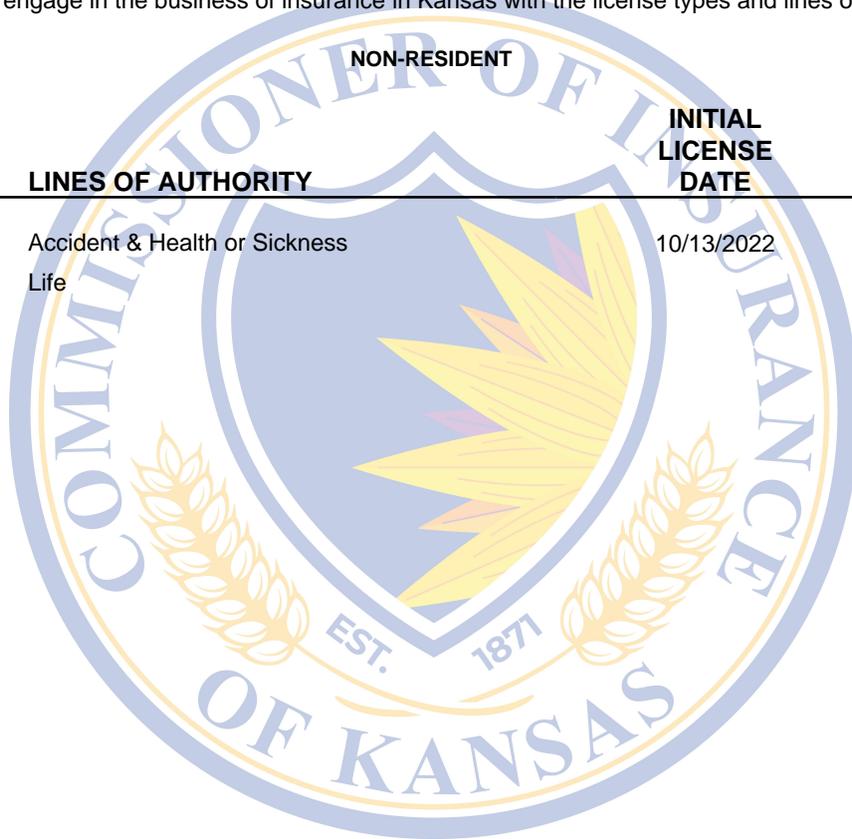
NPN: 19306888

PRAT KEIN GODOY

By the authority vested in me by law as the Commissioner of Insurance in the state of Kansas, I hereby certify that the licensee named hereon is authorized to engage in the business of insurance in Kansas with the license types and lines of authority shown below.

NON-RESIDENT

LICENSE TYPE	LINES OF AUTHORITY	INITIAL LICENSE DATE	LICENSE EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness Life	10/13/2022	05/31/2027



Vicki Schmidt
Commissioner of Insurance

For questions regarding a license, contact: Kansas Insurance Department at kdoi.licensing@ks.gov or visit our website at insurance.kansas.gov.