



CHIEF FINANCIAL OFFICER  
JEFF ATWATER  
STATE OF FLORIDA

**FILED**

FEB 09 2015

Docketed by \_\_\_\_\_

IN THE MATTER OF:

ALSTON INSURANCE GROUP DBA  
HERITAGE INSURANCE

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Case No.: 162501-14-AG

ORDER OF REVOCATION

THIS PROCEEDING CAME on for final agency action and the Chief Financial Officer, having considered the record, including the Administrative Complaint filed on December 8, 2014, and being fully advised in the premises, finds that:

1. Alston Insurance Group dba Heritage Insurance is currently licensed by the Department of Financial Services (the "Department"), pursuant to the Florida Insurance Code, as an insurance agency.

2. On December 8, 2014, the Department issued an Administrative Complaint, attached hereto as "Exhibit A," against Alston Insurance Group dba Heritage Insurance, alleging that on September 15, 2014, in the Circuit Court of the Fifteenth Judicial Circuit in and for Palm Beach County, Florida, Case No. 2012CF013525, Corey Lamont Alston, the sole owner and managing member of Alston Insurance, pled guilty to one count of Grand Theft Greater Than \$20,000, a felony. Adjudication of guilt was withheld.

3. The Department notified Alston Insurance Group dba Heritage Insurance in the Administrative Complaint of the right to request a proceeding in accordance with sections

120.569 and 120.57, Florida Statutes, and that failure to answer the Administrative Complaint or request a proceeding within twenty-one (21) days would result in the imposition of a penalty.

4. In accordance with section 624.310(6), Florida Statutes, after attempts at service via certified mail were unsuccessful, the Department served the Administrative Complaint upon Alston Insurance Group dba Heritage Insurance by e-mail at the e-mail address on record with the Department, with the required delivery receipt received on December 19, 2014. The e-mail, e-mail attachment (Administrative Complaint), and delivery receipt are attached hereto as "Exhibit B," and are fully incorporated herein by reference.

5. Alston Insurance Group dba Heritage Insurance failed to answer the Administrative Complaint or request a proceeding in accordance with sections 120.569 and 120.57, Florida Statutes.

#### FINDINGS OF FACT

6. The factual allegations contained in the Administrative Complaint dated December 8, 2014, which is attached hereto as Exhibit A, and fully incorporated herein by reference, are hereby adopted as the Department's Findings of Fact in this case.

#### CONCLUSIONS OF LAW

7. Based upon the Findings of Fact adopted herein, the Department concludes that Alston Insurance Group dba Heritage Insurance violated the specific statutes and rules charged in each count of the Administrative Complaint, attached hereto as Exhibit A, and hereby adopts the violations charged in each count of the Administrative Complaint as the Conclusions of Law in this case.

PENALTY IMPOSED

8. The failure of Alston Insurance Group dba Heritage Insurance to answer the Administrative Complaint or request a proceeding, taken together with the Findings of Fact and Conclusions of Law adopted herein, constitutes grounds for the Chief Financial Officer to revoke the licenses of Alston Insurance Group dba Heritage Insurance.

IT IS THEREFORE ORDERED that:

(a) All licenses, appointments and eligibility for licensure heretofore issued to Alston Insurance Group dba Heritage Insurance, within the purview of the Department, are hereby revoked.

(b) Alston Insurance Group dba Heritage Insurance does not have the right to apply for another license or appointment under the Florida Insurance Code for a period of two (2) years from the effective date of revocation. The Department shall not thereafter grant a new license or appointment or reinstate eligibility to hold such license or appointment if it finds that the circumstance or circumstances for which the license was revoked still exist or are likely to recur.

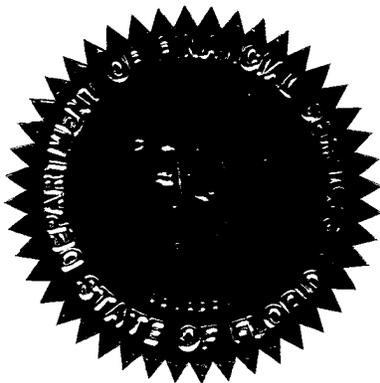
(c) During the period of revocation, Alston Insurance Group dba Heritage Insurance shall not engage in or attempt or profess to engage in any transaction or business for which a license or appointment is required under the Florida Insurance Code or directly or indirectly own, control, or be employed in any manner by any insurance agent or agency or adjuster or adjusting firm until the license is reinstated or, if revoked, a new license is issued.

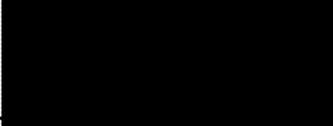
(d) Within ten (10) calendar days of the issuance of this Order of Revocation, Alston Insurance Group dba Heritage Insurance shall return all licenses issued to Alston Insurance Group dba Heritage Insurance pursuant to the Florida Insurance Code to the Department of

Financial Services, Bureau of Licensing, 200 East Gaines Street, Tallahassee, Florida 32399-0319.

(e) Any person who knowingly transacts insurance or otherwise engages in insurance activities in this state without a license, or while the license is suspended or revoked, commits a felony of the third degree.

DONE and ORDERED this 9<sup>th</sup> day of February, 2015.



  
Gregory Thomas  
Director, Agent & Agency Services

## NOTICE OF RIGHTS

Any party to these proceedings adversely affected by this Order is entitled to seek review within thirty (30) days of the rendition of this Order, pursuant to section 120.68, Florida Statutes, and Rule 9.190, *Florida Rules of Appellate Procedure*. Review proceedings must be instituted by filing a petition or notice of appeal with Julie Jones, the DFS Agency Clerk. Filing with the Agency Clerk may be accomplished via U.S. Mail, express overnight delivery, hand delivery, facsimile transmission, or electronic mail. The address for overnight delivery or hand delivery is Julie Jones, DFS Agency Clerk, Department of Financial Services, 612 Larson Building, 200 East Gaines Street, Tallahassee, Florida, 32399-0390. The fax number is (850) 488-0697. The email address is [Julie.Jones@myfloridacfo.com](mailto:Julie.Jones@myfloridacfo.com).

A copy of the petition or notice of appeal must also be filed with the appropriate district court of appeal within thirty (30) days of the rendition of this Order.

Copies Furnished To:

coreyalston@aol.com

Alston Insurance Group dba Heritage Insurance  
C/O Corey Alston  
8620 Northwest 48 Street  
Lauderhill, Florida 33351

Greg Thomas, Director  
Division of Agent & Agency Services  
200 East Gaines Street  
Tallahassee, Florida 32399

Complaint & Settlement  
Division of Legal Services  
200 East Gaines Street  
Tallahassee, Florida 32399-0333

**FILED**

DEC 08 2014

Docketed by AM



CHIEF FINANCIAL OFFICER  
JEFF ATWATER  
STATE OF FLORIDA

IN THE MATTER OF:

Case No.: 162501-14-AG

ALSTON INSURANCE GROUP, LLC, DBA  
HERITAGE INSURANCE

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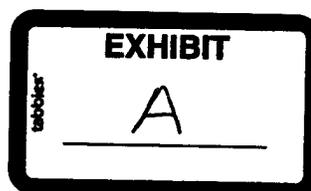
ADMINISTRATIVE COMPLAINT

Alston Insurance Group, LLC, dba Heritage Insurance  
C/O Corey Lamont Alston  
8620 Northwest 48 Street  
Fort Lauderdale, Florida 33351

Alston Insurance Group, LLC, dba Heritage Insurance (“Alston Insurance”), license number L082676, is hereby notified that the Chief Financial Officer of the State of Florida has caused to be made an investigation of its activities while licensed as an insurance agency in this state, as a result of which it is alleged:

GENERAL ALLEGATIONS

1. Pursuant to chapter 626, Florida Statutes, Alston Insurance is currently licensed in this state as an insurance agency.
2. At all times pertinent to the dates and occurrences referred to herein, Alston Insurance was licensed in this state as an insurance agency.
3. Pursuant to chapter 626, Florida Statutes, the Florida Department of Financial Services (the “Department”) has jurisdiction over Alston Insurance’s insurance license and appointments.



COUNT I

4. The above general allegations are hereby realleged and fully incorporated herein by reference.

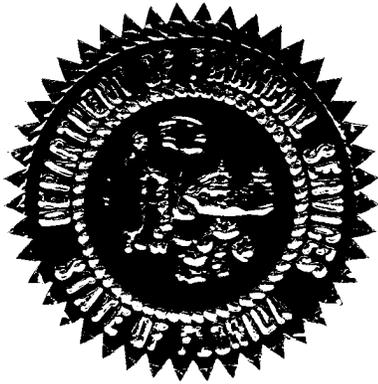
5. On September 15, 2014, in the Circuit Court of the Fifteenth Judicial Circuit in and for Palm Beach County, Florida, Case No. 2012CF013525, Corey Lamont Alston, the sole owner and managing member of Alston Insurance, pled guilty to one count of Grand Theft Greater Than \$20,000, a felony. Adjudication of guilt was withheld.

IT IS THEREFORE CHARGED that Alston Insurance has violated one or more of the following provisions of the Florida Statutes or *Florida Administrative Code*, which constitute grounds for the suspension or revocation of its license as an insurance agency in this state:

(a) Section 626.6115(3), Florida Statutes, which provides that the Department shall deny, suspend, revoke, or refuse to continue the license of any insurance agency if it finds, as to any insurance agency or as to any majority owner, partner, manager, director, officer, or other person who manages or controls such agency has had a license to practice or conduct any regulated profession, business, or vocation relating to the business of insurance by this state, any other state, any nation, any possession or district of the United States, any court, or any lawful agency thereof denied, suspended, or revoked.

WHEREFORE, Alston Insurance is hereby notified that the Chief Financial Officer intends to enter an Order revoking its license and appointments as an insurance agency or to impose such penalties as may be provided under the provisions of sections 626.611, 626.621, 626.641, 626.681, 626.691, and 626.9521, Florida Statutes, and under the other referenced sections of the Florida Statutes as set out in this Administrative Complaint.

DATED and SIGNED this 8<sup>th</sup> day of December, 2014.



  
\_\_\_\_\_  
Gregory Thomas  
Director, Agent & Agency Services

## NOTICE OF RIGHTS

You have the right to request a proceeding to contest this action by the Department pursuant to sections 120.569 and 120.57, Florida Statutes, and chapter 28-106, *Florida Administrative Code*. The proceeding request must be in writing, signed by you, and must be filed with the Department within twenty-one (21) days of your receipt of this notice. Completion of the attached Election of Proceeding form and a petition for administrative hearing are required. The request must be filed with Julie Jones, DFS Agency Clerk, at the Florida Department of Financial Services, 612 Larson Building, 200 East Gaines Street, Tallahassee, Florida 32399-0390. Your written response must be received by the Department no later than 5:00 p.m. on the twenty-first day after your receipt of this notice. Mailing the response on the twenty-first day will not preserve your right to a hearing.

**FAILURE TO ENSURE THAT YOUR WRITTEN RESPONSE IS RECEIVED BY THE DEPARTMENT WITHIN TWENTY-ONE (21) DAYS OF YOUR RECEIPT OF THIS NOTICE WILL CONSTITUTE A WAIVER OF YOUR RIGHT TO REQUEST A PROCEEDING ON THE MATTERS ALLEGED HEREIN AND A FINAL ORDER OF SUSPENSION OR REVOCATION WILL BE ENTERED AGAINST YOU.**

If you request a proceeding, you must provide information that complies with the requirements of Rule 28-106.2015, *Florida Administrative Code*. Specifically, your response must contain:

(a) The name, address, telephone number, and facsimile number (if any) of the respondent (for the purpose of requesting a hearing in this matter, you are the "respondent").

(b) The name, address, telephone number, and facsimile number of the attorney or qualified representative of the respondent (if any) upon whom service of pleadings and other papers shall be made.

(c) A statement requesting an administrative hearing identifying those material facts that are in dispute. If there are none, the petition must so indicate.

(d) A statement of when the respondent received notice of the administrative complaint.

(e) A statement including the file number of the administrative complaint.

If a hearing of any type is requested, you have the right to be represented by counsel or other qualified representative at your expense, to present evidence and argument, to call and cross-examine witnesses, and to compel the attendance of witnesses and the production of documents by subpoena.

If a proceeding is requested and there is no dispute of material fact, the provisions of section 120.57(2), Florida Statutes, apply. In this regard, you may submit oral or written evidence in opposition to the action taken by the Department or a written statement challenging the grounds upon which the Department has relied. While a hearing is normally not required in the absence of a dispute of fact, if you feel that a hearing is necessary, one will be conducted in Tallahassee, Florida, or by telephonic conference call upon your request.

However, if you dispute material facts which are the basis for the Department's action, you must request an adversarial proceeding pursuant to sections 120.569 and 120.57(1), Florida Statutes. These proceedings are held before a State Administrative Law Judge of the Division of Administrative Hearings. Unless the majority of witnesses are located elsewhere, the Department will request that the hearing be conducted in Tallahassee, Florida.

Failure to follow the procedure outlined with regard to your response to this notice may result in the request being denied. All prior oral communication or correspondence in this matter shall be considered free form agency action, and no such oral communication or correspondence

shall operate as a valid request for an administrative proceeding. Any request for an administrative proceeding received before the date of this notice shall be deemed abandoned unless timely renewed in compliance with the guidelines as set out above.

Mediation of this matter pursuant to section 120.573, Florida Statutes, is not available. No Department attorney will discuss this matter with you during the time frame in which you have to request a hearing.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Administrative Complaint and Election of Proceeding has been furnished to: Alston Insurance Group dba Heritage Insurance, C/O Corey Lamont Alston, at 8620 Northwest 48 Street, Fort Lauderdale, Florida 33351, by Certified Mail this 8<sup>th</sup> day of December, 2014.



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Leah L. Marino  
Managing Attorney  
Department of Financial Services  
Division of Legal Services  
612 Larson Building  
200 East Gaines Street  
Tallahassee, Florida 32399-0333  
(850) 413-4227

STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF LEGAL SERVICES

IN THE MATTER OF:

ALSTON INSURANCE GROUP dba  
HERITAGE INSURANCE \_\_\_\_\_/

CASE NO.: 162501-14-AG

ELECTION OF PROCEEDING

I have received and have read the Administrative Complaint filed by the Florida Department of Financial Services ("Department") against me, including the Notice of Rights contained therein, and I understand my options. I am requesting disposition of this matter as indicated below. **(CHOOSE ONE)**

1.  I do not dispute any of the Department's factual allegations and I do not desire a hearing. I understand that by waiving my right to a hearing, the Department may enter a final order that adopts the Administrative Complaint and imposes the sanctions sought, including suspending or revoking my licenses and appointments as may be appropriate.
  
2. I do not dispute any of the Department's factual allegations and I hereby elect a proceeding to be conducted in accordance with section 120.57(2), Florida Statutes. In this regard, I desire to **(CHOOSE ONE)**:
  - Submit a written statement and documentary evidence in lieu of a hearing; or
  - Personally attend a hearing conducted by a department hearing officer in Tallahassee; or
  - Attend that same hearing by way of a telephone conference call.
  
3.  I do dispute one or more of the Department's factual allegations. I hereby request a hearing pursuant to section 120.57(1), Florida Statutes, to be held before the Division of Administrative Hearings. I have attached to this election form the information required by Rule 28-106.2015, *Florida Administrative Code*, as specified in subparagraph (c) of the Notice of Rights. Specifically, I have identified the disputed issues of material fact.

**TO PRESERVE YOUR RIGHT TO A HEARING, YOU MUST FILE YOUR RESPONSE WITH THE DEPARTMENT OF FINANCIAL SERVICES WITHIN TWENTY-ONE (21) DAYS OF YOUR RECEIPT OF THE ADMINISTRATIVE COMPLAINT. THE RESPONSE MUST BE RECEIVED BY THE DEPARTMENT NO LATER THAN 5:00 P.M. ON THE TWENTY-FIRST DAY AFTER YOUR RECEIPT OF THE ADMINISTRATIVE COMPLAINT.**

The address for filing is: Julie Jones, DFS Agency Clerk, Florida Department of Financial Services, 612 Larson Building, 200 East Gaines Street, Tallahassee, Florida 32399-0390.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Date Administrative  
Complaint Received: \_\_\_\_\_

Phone No.: \_\_\_\_\_

**If you are represented by an attorney or qualified representative, please attach to this election form his or her name, address, telephone and fax numbers**

Fax No.: \_\_\_\_\_

E-mail \_\_\_\_\_

**Edgil, Kerry**

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**From:** Microsoft Outlook  
**To:** 'COREYALSTON@AOL.COM'  
**Sent:** Friday, December 19, 2014 2:43 PM  
**Subject:** Relayed: 162501-14-AG ALSTON INSURANCE GROUP DBA HERITAGE INSURANCE:

Delivery to these recipients or groups is complete, but no delivery notification was sent by the destination server:

'COREYALSTON@AOL.COM' ([COREYALSTON@AOL.COM](mailto:COREYALSTON@AOL.COM)) <<mailto:COREYALSTON@AOL.COM>>

Subject: 162501-14-AG ALSTON INSURANCE GROUP DBA HERITAGE INSURANCE:

