KNOW ALL MEN BY THESE PRESENTS:

That the _______________________________________________, organized under the laws of _______________________,
(Name of Firm) (State)
and with its principal place of business at _______________________________________________________________,
(Street & Number) (City) (State)
desiring to transact the business of a Reinsurance Intermediary in the State of Connecticut in conformity with the laws thereof,
does hereby make, constitute and appoint the Insurance Commissioner of said State or their successor in office, his/her true and
lawful attorney in and for the State of Connecticut, on whom all process of law, whether mesne or final, against said
______________________________________________________________________, may be served in any action or
(Name of Firm)
proceeding against said Firm in the State of Connecticut, subject to and in accordance with all the provisions of the laws of the
State of Connecticut now in force, and other such laws as may hereafter be enacted in relation thereto. And the said attorney is
hereby duly authorized and empowered, as the agent of said Firm, to receive and accept service of process in all cases as
provided by the laws of the State of Connecticut, and such service shall be deemed personal service on said Firm, and shall be
of the same legal force and validity as if served on said Firm; and said Firm hereby waives all claims of error by reason of such
service. This appointment shall continue in force so long as the said Firm remains a licensed Reinsurance Intermediary and
until the Statute of Limitations has run against any and all claims that may exist against said Firm because of its having done
business under said license.

IN WITNESS WHEREOF, I/we have hereunto signed my/our names and affixed my/our seal(s)
____________________________________________________________________________________________________
(Print Name of Firm)

By: _____________________________________________  By: __________________________________________
Signature                                                                                               Signature

________________________________________________          __________________________________________
Name of Person Signing                                                                          Name of Person Signing

STATE OF ____________________________    SS:
COUNTY OF __________________________

On this ______ day of __________, 20____, before me, a Notary Public/Commissioner of the Superior
Court for the State of _________________ duly appointed to take acknowledgement of Deeds and other instruments, personally
appeared ___________________________________________ and ___________________________________________ (who are personally known to me) and
(Name of Firm)
severally acknowledged the execution of the foregoing instrument by them subscribed; and being duly sworn, each for
themselves deposes and says, that they are respectively responsible persons of the Firm, and the signatures as such were duly
affixed and subscribed to the said instrument by the authority and direction of said Corporation.

_____________________________________________________
Notary Public/Commissioner of the Superior Court
My Commission Expires:_____________________________