



STATE OF CONNECTICUT – INSURANCE DEPARTMENT

**Non – Resident Individual
Reinsurance Intermediary
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS:

That _____ of the City/Town of _____ in the
(Name of Individual)

State of _____ 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 proceeding

(Name of Individual)

against said Reinsurance Intermediary 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 Intermediary, to receive and accept services 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 Intermediary, and shall be of the same legal force and validity as if served on said Intermediary; and said Intermediary hereby waives all claims of error by reason of such service. This appointment shall continue in force so long as the undersigned remains a licensed Reinsurance Intermediary and until the Statute of Limitations has run against any and all claims that may exist against them because of their having done business under said license.

IN WITNESS WHEREOF, the said _____ has hereunto set their hand and seal
(Name of Individual)

This _____ day of _____, 20 _____.

Signature L.S.

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 _____ to me known to be the individual described in, and who
(Name of Individual)

executed the above, instrument, and acknowledged that he/she signed and sealed the same as his/her free and voluntary act and deed for the uses and purposes therein mentioned.

Notary Public/Commissioner of the Superior Court

My Commission Expires:_____