

## **STATE OF CONNECTICUT – INSURANCE DEPARTMENT**

Non – Resident Firm (Other than Corporation) **Reinsurance Intermediary POWER OF ATTORNEY** 

## 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 Commissione	r of said State or their successor in offic	ce, his/her true and
lawful attorney in and for the State of Connecticut, on whom all proce	ess of law, whether mesne or final, again	nst said
· · ·	, may be served in an	y action or
(Name of Firm)		
proceeding against said Firm in the State of Connecticut, subject to ar State of Connecticut now in force, and other such laws as may hereaft hereby duly authorized and empowered, as the agent of said Firm, to provided by the laws of the State of Connecticut, and such service sha of the same legal force and validity as if served on said Firm; and said service. This appointment shall continue in force so long as the said F until the Statute of Limitations has run against any and all claims that business under said license.	ter be enacted in relation thereto. And the receive and accept service of process in all be deemed personal service on said F I Firm hereby waives all claims of error Firm remains a licensed Reinsurance Inter-	he said attorney is all cases as Firm, and shall be by reason of such termediary and
IN WITNESS WHEREOF, I/we have hereunto signed my/our name	• • •	

By:		By:
By: Signature		Signature
Name of	Person Signing	Name of Person Signing
STATE OF COUNTY OF		SS:
Court for the State of	dı	, 20, before me, a Notary Public/Commissioner of the Superior ly appointed to take acknowledgement of Deeds and other instruments, personall and (who are personally known to me) and
	(Name	of Firm) (who are personally known to me) and

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:\_\_\_\_