STATE OF CALIFORNIA – DEPARTMENT OF INSURANCE

APPOINTMENT OF AGENT FOR SERVICE OF PROCESS

CDI-021 (Rev. 11/2015)

Know All Men by These Presents:

That pursuant to the requirements of Article 3, Chapter 4, Part 2, Division 1 of the Insurance Code of the State of California, the _____ (Name of Insurer), a corporation formed under the laws of _____ and carrying on the business of insurance, has constituted, appointed and designated, and by these presents does constitute, appoint and designate _____ (Name of Natural Person) having his/her place of business at _____ (Street Address, Suite/Floor) in the City of _____, California _____ (Zip Code), its General Agent in said State of California.

That said _____ (Name of Natural Person), so appointed and designated as aforesaid, is in law a General Agent and is the principal agent of the said insurer in said State of California, on whom any notice provided by law or by any insurance policy, proof of loss, summons, or other process may be served in all actions or other legal proceedings against such insurer, and such service as aforesaid shall give jurisdiction over the person of such insurer.

And the said _____ (Name of Insurer) does hereby stipulate and agree, in consideration of the permission granted by the State of California to it to transact insurance business in this State, that if at any time it leaves this State, ceases to transact business in this State, or is without an agent for service of process in this State, then and in any case where such agent could be served, service may be made upon the Insurance Commissioner, and such service upon the Commissioner shall have the same force and effect as if made upon the insurer;

And such insurer does hereby further stipulate and agree that after being admitted to transact business in the State of California, it will continue to comply with the requirements as to its business set forth in the Insurance Code and other laws of the State of California;

And the said insurer further stipulates and agrees that before retiring from business in the State of California, it will reinsure its California business with an admitted insurer under a plan submitted to and approved by the Insurance Commissioner of the State of California.

This appointment and designation, and the powers delegated hereunder, shall terminate without notice to the appointee upon the filing with the Insurance Commissioner of a document appointing another person as agent for the said _____ (Name of Insurer) pursuant to the requirements of Article 3, Chapter 4, Part 2, Division 1 of the Insurance Code of the State of California.

In Witness Whereof, The said insurer has to these presents caused its name to be subscribed and attested by its President and Secretary at _____ State of _____ on the _____ day of _____ A.D. 20_____.

By: _____ (President) Attest: _____ (Secretary)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____)
County of _____)

On _____ before me, _____ (Notary Public)
personally appeared _____,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: _____ (Seal)

State of _____)
County of _____)

I, _____, the appointee named above to hereby certify under penalty of perjury that I am the individual named therein, that I maintain an office or residence at the address shown thereon, and that I shall be reasonably available during normal business hours at such place for service on me for the appointing company of papers, notice, proofs of loss, summons, writs or other process. I further agree that in the event the address or location of my said office or residence is changed during the existence of this appointment, I will promptly give notice thereof in writing to the Insurance Commissioner and to the appointing company.

Dated: _____ Signature: _____