

[POWER OF ATTORNEY]

Know All Men By These Presents:

That the \_\_\_\_\_

of the City of \_\_\_\_\_ in the State of \_\_\_\_\_

desiring to transact business in the State of Delaware in conforming with the laws thereof, does hereby make, constitute and appoint the Insurance Commissioner of Delaware its true and lawful Agent and Attorney in and for the State of Delaware, on whom all process of law, whether mense or final, in any action or proceeding in the State of Delaware against said Company, Corporation or Association, may be served, subject to and in accordance with all the provisions of the Laws of the State of Delaware now in force, and such other laws as may hereafter be enacted in relation thereto, with the same effect as if the Company, Corporation or Association existed in said State. And it is hereby stipulated and agreed that the said Agent and Attorney is hereby duly authorized and empowered as the agent of said Company, Corporation or Association, to receive and accept service of process in all cases as provided for by the laws of the State of Delaware, and such service shall be deemed personal service on said Company, Corporation or Association, and shall be as valid and binding service on said Company, Corporation or Association, as if served on said Company, Corporation or Association; and said Company, Corporation or Association hereby waives all claims of error by reason of such service. This appointment shall continue in force so long as any policy, certificate of membership or liability remains outstanding against the Company, Corporation or Association in the said State of Delaware. And said Company, Corporation or Association hereby further stipulates and agrees that in case of the absence from the State of Delaware of said Agent and Attorney, any process relating to said Company, Corporation or Association may be served upon some person in the office of the Insurance Commissioner of Delaware to be from time to time by said Insurance Commissioner designated, and shall have the same effect as if served upon the said Agent and Attorney, and shall be binding and valid service upon said Company, Corporation or Association.

In Witness Whereof, The said Company, Corporation or Association in accordance with a resolution of its Board of Directors duly passed on the \_\_\_\_\_ day of \_\_\_\_\_ A.D., L.S. \_\_\_\_\_, (a certified copy of which is hereto attached), has to these presents affixed its corporate seal, and caused the same to be subscribed and attached by its President and Secretary this \_\_\_\_\_ day of \_\_\_\_\_ A.D.,

\_\_\_\_\_  
President.

\_\_\_\_\_  
Secretary.

**CERTIFIED COPY OF A RESOLUTION DULY PASSED BY THE BOARD OF DIRECTORS**

of the \_\_\_\_\_

on the \_\_\_\_\_ day of \_\_\_\_\_ A.D.,

At a meeting of the Board of Directors of the \_\_\_\_\_

\_\_\_\_\_ held on the \_\_\_\_\_ day of

\_\_\_\_\_ A.D., a quorum being present, the following resolution was duly passed by said Board:

RESOLVED, That this Company, Corporation or Association hereby appoints the INSURANCE COMMISSIONER OF DELAWARE its true and lawful Agent and Attorney in and for the State of Delaware, on whom all process of law, whether mense or final, in any action or proceeding in the State of Delaware may be served, subject to and in accordance with all the provisions of the Laws of the State of Delaware now in force, and such other laws as may hereafter be enacted in relation thereto, with the same effect as if the Company, Corporation or Association existed in said State. And the said Agent and Attorney is duly authorized and empowered as the Agent and Attorney of said Company, Corporation or Association, to receive and accept service of process in all cases as provided for by the Laws of the State of Delaware, and such service shall be deemed personal service on said Company, Corporation or Association, and shall be as valid and binding service on said Company, Corporation or Association as if served on said Company, Corporation or Association; and said Company, Corporation or Association hereby waives all claims of error by reason of such service. This appointment and the authority of said Agent and Attorney shall continue in force and shall not be revoked so long as any policy, certificate of membership or liability remains outstanding against said Company, Corporation or Association in said State of Delaware. And this Company, Corporation or Association hereby further stipulates and agrees that in case of the absence from the State of Delaware of said Agent and Attorney, any process relating to said Company, Corporation or Association may be served upon some person in the office of the Insurance Commissioner of Delaware to be from time to time by said Insurance Commissioner designated, and shall have the same effect as if served upon the said Agent and Attorney, and shall be binding and valid service upon said Company, Corporation or Association. And the President and Secretary are hereby authorized to execute in the name of the Company, Corporation or Association and under its corporate seal, a certificate of authority of power of attorney to the said Insurance Commissioner of Delaware, in conformity with this Resolution and the Laws of said State of Delaware.

I hereby certify that the above is a true copy of the Vote or Resolution of the Directors of said Company, Corporation or Association, authorizing the appointment of an Agent and Attorney for the State of Delaware, as witness my hand and the seal of said Company, Corporation or Association,

L.S.

this \_\_\_\_\_

day of \_\_\_\_\_ A.D.,

\_\_\_\_\_  
Secretary.

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) ss.

On this \_\_\_\_\_ day of \_\_\_\_\_ A.D., , before me, the  
subscriber, a \_\_\_\_\_ for the State of \_\_\_\_\_  
duly appointed and qualified, personally appeared \_\_\_\_\_,  
President, and \_\_\_\_\_, Secretary of the  
\_\_\_\_\_, (who are personally  
known to me), and severally acknowledged the execution of the foregoing instrument by them  
subscribed; and being by me each duly sworn, \_\_\_\_\_ severally and each for himself,  
deposes and says, that they are respectively the said officers of the Company, Corporation or  
Association aforesaid, and that the seal affixed to said instrument is the corporate seal of said  
Company, Corporation or Association; and that the said corporate seal and their signatures as such  
officers, were duly affixed and subscribed to the said instrument by the authority and direction of  
said corporation.

\_\_\_\_\_ to and subscribe before me on the day )  
and year above written: as witness my hand and official seal. )

State of \_\_\_\_\_

Insurance Company  
of

\_\_\_\_\_

Appointment of

\_\_\_\_\_

As Agent and Attorney  
for the State of  
Delaware.

\_\_\_\_\_

Filed \_\_\_\_\_

\_\_\_\_\_