

10974		11595		13331		14338		14494		24139	
ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the	
Root Insurance Company In the state of OH		Merchants National Bonding, Inc. In the state of Iowa		Motorists Commercial Mutual Insurance Company In the state of North Dakota		Iowa Mutual Insurance Company In the state of Ohio		Merchants Bonding Company (Mutual) In the state of Iowa		Old Republic General Insurance Corporation In the state of IL	
Total Assets 299,629,180		Total Assets 96,187,923		Total Assets 946,469,063		Total Assets 113,511,795		Total Assets 610,077,798		Total Assets 2742350568.00	
Total Liabilities 241,820,613		Total Liabilities 50,106,575		Total Liabilities 638,154,653		Total Liabilities 64,687,984		Total Liabilities 225,938,891		Total Liabilities 2062334404.00	
Aggregate write-ins		Aggregate write-ins		Aggregate write-ins		Aggregate write-ins		Aggregate write-ins		Aggregate write-ins	
for special surplus funds 0		for special surplus funds 0		for special surplus funds 0		for special surplus funds 0		for special surplus funds 0		for special surplus funds 0.00	
Common Capital Stock 500,000		Common Capital Stock 300000		Common Capital Stock 5,000,000		Common Capital Stock 5,000,000		Common Capital Stock 0		Common Capital Stock 420000.00	
Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0.00	
Aggregate Write-ins for		Aggregate Write-ins for		Aggregate Write-ins for		Aggregate Write-ins for		Aggregate Write-ins for		Aggregate Write-ins for	
Other Than 882305		Other Than 0		Other Than 0		Other Than 0		Other Than 0		Other Than 0.00	
Special Surplus Funds		Special Surplus Funds		Special Surplus Funds		Special Surplus Funds		Special Surplus Funds		Special Surplus Funds	
Surplus Notes 0		Surplus Notes 0		Surplus Notes 0		Surplus Notes 0		Surplus Notes 0		Surplus Notes 135000000.00	
Gross Paid in and		Gross Paid in and		Gross Paid in and		Gross Paid in and		Gross Paid in and		Gross Paid in and	
Contributed Surplus 603639379		Contributed Surplus 6,088,655		Contributed Surplus 53,840,486		Contributed Surplus 3,000,000		Contributed Surplus 0		Contributed Surplus 216883687.00	
Unassigned funds (surplus) 551213117		Unassigned funds (surplus) 36,992,693		Unassigned funds (surplus) 255,349,249		Unassigned funds (surplus) 35,645,826		Unassigned funds (surplus) 384,138,907		Unassigned funds (surplus) 323932477.00	
Total Capital and Surplus 57808567		Total Capital and Surplus 46,081,348		Total Capital and Surplus 314,189,735		Total Capital and Surplus 43,645,826		Total Capital and Surplus 384,138,907		Total Capital and Surplus 680016164	
Total Liabilities, Capital		Total Liabilities, Capital		Total Liabilities, Capital		Total Liabilities, Capital		Total Liabilities, Capital		Total Liabilities, Capital	
And Surplus 299629180		And Surplus 96,187,923		And Surplus 952,344,388		And Surplus 108,333,810		And Surplus 610,077,798		And Surplus 2742350568	
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025	
Total Direct Premiums		Total Direct Premiums		Total Direct Premiums		Total Direct Premiums		Total Direct Premiums		Total Direct Premiums	
Earned 1572774		Earned 825,949		Earned 387,495,387		Earned 8,647,425		Earned 546,929		Earned 0.00	
Total Direct Losses		Total Direct Losses		Total Direct Losses		Total Direct Losses		Total Direct Losses		Total Direct Losses	
Incurred 988601		Incurred -42,560		Incurred 250,665,801		Incurred 2,129,723		Incurred (12,149)		Incurred -1946.00	
Total Accident and		Total Accident and		Total Accident and		Total Accident and		Total Accident and		Total Accident and	
Health Direct Premiums 0		Health Direct Premiums 0		Health Direct Premiums 0		Health Direct Premiums 0		Health Direct Premiums 0		Health Direct Premiums 0.00	
Earned		Earned		Earned		Earned		Earned		Earned	
Total Accident and		Total Accident and		Total Accident and		Total Accident and		Total Accident and		Total Accident and	
Health Direct Losses 0		Health Direct Losses 0		Health Direct Losses 0		Health Direct Losses 0		Health Direct Losses 0		Health Direct Losses 0.00	
Incurred		Incurred		Incurred		Incurred		Incurred		Incurred	
STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE	
I, Jon Godfreed, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfreed, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfreed, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfreed, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfreed, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfreed, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.	
IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).	
JON GODFREAD		JON GODFREAD		JON GODFREAD		JON GODFREAD		JON GODFREAD		JON GODFREAD	
Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance	
STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE	
COMPANY'S CERTIFICATE OF AUTHORITY		COMPANY'S CERTIFICATE OF AUTHORITY		COMPANY'S CERTIFICATE OF AUTHORITY		COMPANY'S CERTIFICATE OF AUTHORITY		COMPANY'S CERTIFICATE OF AUTHORITY		COMPANY'S CERTIFICATE OF AUTHORITY	
WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and	
WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,	
NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.	
IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2026		IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2026		IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2026		IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2026		IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2026		IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2026	
(SEAL)		(SEAL)		(SEAL)		(SEAL)		(SEAL)		(SEAL)	
JON GODFREAD		JON GODFREAD		JON GODFREAD		JON GODFREAD		JON GODFREAD		JON GODFREAD	
Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance		Commissioner of Insurance	
Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026	

24503		31577		33006		76503		92711		10936	
ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the		ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2025 of the	
Root Property & Casualty Insurance Company In the state of OH		Iowa American Insurance Company In the state of Ohio		Openly Insurance Company In the state of South Carolina		Lasso Healthcare Insurance Company In the state of Indiana		HCC Life Insurance Company In the state of Indiana		SENECA INSURANCE COMPANY, INC. In the state of NEW YORK	
Total Assets 550,805,699		Total Assets 10,460,151		Total Assets 21,617,254		Total Assets 21067119		Total Assets 1803183627		Total Assets 709,906,123	
Total Liabilities 407,546,059		Total Liabilities 241,333		Total Liabilities 6,811,579		Total Liabilities 1027598		Total Liabilities 1013596059		Total Liabilities 502,315,253	
Aggregate write-ins		Aggregate write-ins		Aggregate write-ins		Aggregate write-ins		Aggregate write-ins		Aggregate write-ins	
for special surplus funds 0		for special surplus funds 0		for special surplus funds 0		for special surplus funds 1500000		for special surplus funds 0		for special surplus funds 0	
Common Capital Stock 4,200,000		Common Capital Stock 1,000,000		Common Capital Stock 2,500,000		Common Capital Stock 0		Common Capital Stock 2500000		Common Capital Stock 4,800,000	
Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0		Preferred Capital Stock 0	
Aggregate Write-ins for Other Than 220,576		Aggregate Write-ins for Other Than 0		Aggregate Write-ins for Other Than 0		Aggregate Write-ins for Other Than Special Surplus 0		Aggregate Write-ins for Other Than 0		Aggregate Write-ins for Other Than 0	
Special Surplus Funds Surplus Notes 0		Special Surplus Funds Surplus Notes 0		Special Surplus Funds Surplus Notes 0		Special Surplus Funds Surplus Notes 0		Special Surplus Funds Surplus Notes 0		Special Surplus Funds Surplus Notes 0	
Gross Paid in and Contributed Surplus 242,207,611		Gross Paid in and Contributed Surplus 5,000,000		Gross Paid in and Contributed Surplus 23,995,351		Gross Paid in and Contributed Surplus 18251044		Gross Paid in and Contributed Surplus 337040367		Gross Paid in and Contributed Surplus 26,275,566	
Unassigned funds (surplus) -103,368,547		Unassigned funds (surplus) 3,953,311		Unassigned funds (surplus) 11,689,676		Unassigned Funds 288477		Unassigned Funds 450047201		Unassigned funds (surplus) 164,996,718	
Total Capital and Surplus 143,259,640		Total Capital and Surplus 9,953,311		Total Capital and Surplus 14,805,675		Total Capital and Surplus 0		Total Capital and Surplus 789587568		Total Capital and Surplus 0	
Total Liabilities, Capital And Surplus 550,805,699		Total Liabilities, Capital And Surplus 10,194,644		Total Liabilities, Capital And Surplus 21,617,254		Total Liabilities, Capital And Surplus 21067119		Total Liabilities, Capital And Surplus 1803183627		Total Liabilities, Capital And Surplus 698,387,537	
NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025		NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2025	
Total Direct Premiums Earned 0		Total Direct Premiums Earned 0		Total Direct Premiums Earned 13,043,764		Total Direct Premiums Earned 0		Total Life and Annuity Premiums Written 170		Total Direct Premiums Earned 34,877	
Total Direct Losses Incurred 0		Total Direct Losses Incurred (240,527)		Total Direct Losses Incurred 11,206,924		Total Direct Losses Incurred 0		Total Life and Annuity Direct Losses Paid 0		Total Direct Losses Incurred 3,302	
Total Accident and Health Direct Premiums Earned 0		Total Accident and Health Direct Premiums Earned 0		Total Accident and Health Direct Premiums Earned 0		Total Accident and Health Direct Premiums Earned 0		Total Accident and Health Direct Premiums Written 5880658		Total Accident and Health Direct Premiums Earned 0	
Total Accident and Health Direct Losses Incurred 0		Total Accident and Health Direct Losses Incurred 0		Total Accident and Health Direct Losses Incurred 0		Total Accident and Health Direct Losses Incurred 0		Total Accident and Health Direct Losses Paid 8653829		Total Accident and Health Direct Losses Incurred 0	
STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE	
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.		I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in this office.	
IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).		IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).		IN TESTIMONY WHEREOF, I have hereto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2026 (SEAL).	
JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance	
STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY		STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY	
WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and		WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2025 conformable to the requirements of the laws of this State regarding the business of insurance and	
WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,		WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law aforesaid,	
NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.		NOW THEREFORE, I, JON GODFREAD, Commissioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2027.	
IN TESTIMONY WHEREOF, I have hereto set my hand and seal at Bismarck this first day of March, A.D., 2026 (SEAL)		IN TESTIMONY WHEREOF, I have hereto set my hand and seal at Bismarck this first day of March, A.D., 2026 (SEAL)		IN TESTIMONY WHEREOF, I have hereto set my hand and seal at Bismarck this first day of March, A.D., 2026 (SEAL)		IN TESTIMONY WHEREOF, I have hereto set my hand and seal at Bismarck this first day of March, A.D., 2026 (SEAL)		IN TESTIMONY WHEREOF, I have hereto set my hand and seal at Bismarck this first day of March, A.D., 2026 (SEAL)		IN TESTIMONY WHEREOF, I have hereto set my hand and seal at Bismarck this first day of March, A.D., 2026 (SEAL)	
JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance		JON GODFREAD Commissioner of Insurance	
Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026		Published May 5, 12, 19, 2026	