Capital

Total Direct

(May. 22 & 29; Jun. 5, 2025)

PUBLIC NOTICE

16063 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the

Unitrin Auto And Home Insurance Company In the state of New York

Total Assets
Total Liabilities
Aggregate
write-ins
for special 27,378,846 4,160,719

surplus funds Common Capital 4,225,000 Preferred Capi- 0 tal Stock

Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in

and Contributed Surplus 18,201,887 Unassigned 791,240 funds (surplus) Total Capital and 23,218,127 Surplus Total Liabilities

27,378,846 Capital And Surplus **NORTH DAKOTA BUSINESS** ONLY

FOR THE YEAR 2024 Total Direct Premiums Earned Total Direct Losses Incurred

Total Accident and Health Direct Premiums Earned Total Accident and Health Direct 0 Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of
Insurance of the State of North Da-

kota, do hereby certify that the fore-going 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. 2025 JON GODFREAD
Commissioner of Insurance
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 exin this office a sworn statement ex-hibiting its condition and business for the year ending December 31, 2024 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

filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-NOW THEREFORE, I, JON GOD-

FREAD, 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 represennis 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.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 JON GODFREAD

Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

34339 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the
Farmers Group Property And Casualty Insurance Company In the state of Rhode Island

Total Assets
Total Liabilities
Aggregate
write-ins
for special 331,904,559 35,401,961

ion special surplus funds Common Capital 3,000,000 Stock Preferred Capi- 0 tal Stock

Aggregate Write-ins for Other Than

Other Than
Special Surplus
Funds
Surplus Notes 0
Gross Paid in and 192,546,568
Contributed
Surplus
Unassigned funds (surplus)
Total Capital and 296,502,598
Surplus
Surplus
296,502,598

Surplus Total Liabilities, Capital And Surplus 331,904,559

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024 Total Direct 0 Premiums Losses Incurred

Total Accident 0 and Health Direct Premiums
Earned
Total Accident and Health Direct Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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.

IN TESTIMONY WHEREOF, I have
because set my hand and affixed

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

Commissioner of Insurance
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

duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement ex-

hibiting its condition and business for the year ending December 31, 2024 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 filed in this office a duly certified copy of its charter with certificate of

PUBLIC NOTICE

organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GOD-FREAD, 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 represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April,

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD Commissioner of Insurance

(Jun. 5 & 12 & 19, 2025)

22268 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the

Infinity Insurance Company In the state of Indiana Total Assets 1,018,176,369 Total Liabilities

974,514,681 Aggregate write-ins for special surplus funds Common Capital 3,000,000 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than Special Surplus

Funds

Surplus Notes

And Surplus

Gross Paid in and 29,766,341 Contributed Surplus Unassigned 10,895,347 funds (surplus) Total Capital and 43,661,688 Surplus Total Liabilities, 1,018,176,369

0

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums 0 Total Direct 0 Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident Health Direct Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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.

IN TESTIMONY WHEREOF, I have
becomes not my hand and officed

hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL) JON GODFREAD

Commissioner of Insurance
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 exin this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024

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 afore-

said, NOW THEREFORE, I, JON GOD-FREAD, 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,

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

43044 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024**

of the Response Insurance Company In the state of Illinois Total Assets Total Liabilities 29,747,581 40,734 Aggregate write-ins 0 for special surplus funds Common Capital 5,000,000

Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed 71,483,242 Surplus Unassigned -46,776,395 funds (surplus) Total Capital and 29,706,847 -46,776,395

Surplus Total Liabilities, 29,747,581 Capital And Surplus NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024 Total Direct Premiums 0 0 Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident 0 Health Direct Losses Incurred

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,
so officially filled by the Company in

as officially filed by the Company in IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, **PUBLIC NOTICE**

the first day of March, A.D. 2025 JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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 ex-hibiting its condition and business for the year ending December 31, 2024 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 afore-NOW THEREFORE, I, JON GOD-

FREAD, 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.

IN TESTIMONY WHEREOF, I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 JON GODFREAD

Commissioner of Insurance (May. 22 & 29; Jun. 5, 2025)

> 13986 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the Frankenmuth Insurance Company In the state of Michigan Total Assets Total Liabilities 2,008,096,397 1,169,786,467 Aggregate write-ins 250,000 for special surplus funds Common Capital 100,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes 0 Gross Paid in and 2,300,100 Contributed Surplus Unassigned 735,759,830

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

2,008,096,397

funds (surplus)
Total Capital and 838,309,930

Surplus Total Liabilities,

And Surplus

Capital

Total Direct Premiums 53,769 Earned Total Direct 39.982 Losses Incurred Total Accident 0 and Health Direct Premiums Earned Total Accident 0 Health Direct Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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.
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. 2025 (SEAL) JON GODFREAD

COMMISSIONER OF INSURANCE
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation
duly expeniend under the lawe of its

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, 2024 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 afore-

NOW THEREFORE, I, JON GOD-FREAD, 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 represen-tatives, 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.
IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025

JON GODFREAD

Commissioner of Insurance (Jun. 5 & 12 & 19, 2025)

> ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the

Farmers Property And Casualty Insurance Company
In the state of Rhode Island Total Assets 5,057,687,105 2,576,569,666 Total Liabilities Aggregate write-ins 0 for special surplus funds Common Capital 4,200,000 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes Gross Paid in and 1,099,902,428 Contributed

Surplus Unassigned 1,377,015,011 funds (surplus) Total Capital and 2,481,117,439 Surplus Total Liabilities, 5.057.687.105 Capital

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct Premiums 0 Earned Total Direct Losses 12,366,527

And Surplus

PUBLIC NOTICE

Total Accident and 0 Health Direct Premiums Earned Total Accident and Health Direct Losses Incurred

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Da-

kota, do hereby certify that the fore-going 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. 2025 **JON GODFREAD**

Commissioner of Insurance
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, 2024 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 afore-NOW THEREFORE, I, JON GOD-FREAD. Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and represen-

tatives, 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 IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD

(Jun. 5 & 12 & 19, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the of the Unitrin Safeguard Insurance Com-

pany In the state of Wisconsin Total Assets Total Liabilities 20.170.417 10,708,112 Aggregate write-ins 0 surplus funds Common Capital 3,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Surplus Notes Gross Paid in 0 and Contributed 6,721,267 Surplus Unassigned -258,962 funds (surplus) Total Capital and 9,462,305

Total Liabilities 20,170,417 Capital And Surplus **NORTH DAKOTA BUSINESS**

FOR THE YEAR 2024 **Total Direct** 0 Premiums Earned Total Direct 0 Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident and Health Direct 0

Surplus

Losses Incurred STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of
Insurance of the State of North Da-

kota, do hereby certify that the fore-going 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. 2025

JON GODFREAD
Commissioner of Insurance
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, 2024 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 afore-

NOW THEREFORE, I, JON GOD-FREAD, 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 A.D. 2026.
IN TESTIMONY WHEREOF, I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD
Commissioner of Insurance

(May. 22 & 29; Jun. 5, 2025)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the Bristol West Insurance Company In the state of Ohio

283,418,420 212,862,786 **Total Assets** Total Liabilities Aggregate 0 write-ins for special surplus funds Common Capital 6,000,000 Stock Preferred Capi- 0 tal Stock

0

Aggregate Write-ins for Other Than

Funds

Special Surplus

PUBLIC NOTICE

Surplus Notes Gross Paid in 0 39,000,000 and Contributed Surplus Unassigned 25,555,634 funds (surplus) Total Capital and 70,555,634 Surplus Total Liabilities,

And Surplus **NORTH DAKOTA BUSINESS** ONLY FOR THE YEAR 2024

283,418,420

Premiums 0 Total Direct Losses 18,889 Incurred Total Accident and 0 Health Direct Premiums Earned Total Accident and Health Direct Losses Incurred STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER
OF INSURANCE I, Jon Godfread, Commissioner of Insurance of the State of North Da-

kota, do hereby certify that the fore-going 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. 2025 JON GODFREAD Commissioner of Insurance
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 ex-hibiting its condition and business for the year ending December 31, 2024 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 afore-NOW THEREFORE, I. JON GOD-NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursu-ant to the provisions of said laws, do hereby certify that the above named company is fully empowered through

business of authorized insurance in the state according to the laws thereof, until the 30th day of April IN TESTIMONY WHEREOF. I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

its authorized agents and represen-tatives, to transact its appropriated

Commissioner of Insurance (Jun. 5 & 12 & 19, 2025)

JON GODFREAD

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the Wellfleet New York Insurance Com-

pany In the state of New York Total Assets 188,960,868 Total Liabilities 163,106,768 Aggregate 0 write-ins for special surplus funds Common Capital 3,001,981 Stock Preferred Capital Stock Aggregate Write-ins for

Other Than Special Surplus Funds Surplus Notes Gross Paid in 64.900.003 and Contributed Surplus

Unassianed ·42.047.884 funds (surplus)
Total Capital and 25,854,100 Surplus Total Liabilities, 188.960.868 Capital And Surplus

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct

Premiums Earned Total Direct 0 Incurred Total Accident and Health Direct Premiums Earned Total Accident and Health Direct

Losses Incurred 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 fore-going 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. 2025 JON GODFREAD

JON GODFREAD
Commissioner of Insurance
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 domicille has filed

state or country of domicile, has filed in this office a sworn statement ex-hibiting its condition and business for the year ending December 31, 2024 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 afore-NOW THEREFORE, I, JON GOD-

FREAD, 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 represen-tatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, IN TESTIMONY WHEREOF, I have

hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD Commissioner of Insurance

(Jun. 5 & 12 & 19, 2025)

PUBLIC NOTICE

22543 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the SECURA Insurance Company In the state of Wisconsin Total Assets Total Liabilities 1,909,920,545 1,202,346,040

0

125,000,000

1,909,920,545

8,061,560

surplus funds Common Capital 3,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes

Aggregate write-ins

Capital

Total Direct

Premiums

Total Direct

Losses Incurred

Earned

Gross Paid in and Contributed 1,175,000 Surplus Unassigned 578,399,505 funds (surplus) Total Capital and 707,574,505 Surplus Total Liabilities

And Surplus **NORTH DAKOTA BUSINESS** ONLY FOR THE YEAR 2024

3,046,071 Losses Incurred Total Accident and Health Direct Premiums Earned Total Accident and 0 Health Direct

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,
or efficielly filed by the Company in

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. 2025 (SEAL).
JON GODFREAD
Commissioner of Insurance
STATE OF NORTH DAKOTA
OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY

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, 2024 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

filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-NOW THEREFORE, I, JON GOD-FREAD, 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

tatives, 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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

Commissioner of Insurance (May. 22 & 29; Jun. 5, 2025)

17530

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the SECURA Select Insurance Compa-In the state of Wisconsin Total Assets Total Liabilities 7,762,717 42,823 Aggregate write-ins 0 for special

Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes 0 Gross Paid in 4,500,000

Common Capital 3,000,000

surplus funds

and Contributed Surplus Unassigned 219,894 funds (surplus) Total Capital and 7,719,894 Surplus Total Liabilities,

And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

7,762,717

Total Direct Premiums 0 Farned 0 osses Incurred Total Accident and Health Direct Premiums Earned Total Accident 0 Health Direct

Losses Incurred

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,
se officially filed by the Company in as officially filed by the Company in

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. 2025

JON GODFREAD Commissioner of Insurance
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, 2024 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

Continued on next page