# **Public Notices**

# Abstract of Statement of Insurance Companies Doing Business in North Dakota

ABSTRACT OF STATEM FOR THE YEAR ENDI DECEMBER 31, 202 of the	NG	
Alliance Insurance Company Inc.		
In the state of Kansas	04 740 774	
Total Assets		
Total Liabilities		
Aggregate write-ins for	â	
special surplus funds	0	
Common Capital Stock		
Preferred Capital Stock	0	
Aggregate write-ins for Other than	_	
Special Surplus Funds	0	
Surplus Notes	0	
Gross paid in and		
Contributed Surplus		
Unassigned Funds		
Total Capital And Surplus		
Total Liabilities, Capital		
And Surplus		
NORTH DAKOTA BUSINESS ONLY		
FOR THE YEAR 2023		

Total Life and Annuity Premiums 1,448,085 Total Life and Annuity Direct Losses .879.985 Total Accident and Health Direct Premiums Total Accident and Health Direct Losses

# 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. IN TESTIMONY WHEREOF, I have hereunto set my

hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

Sioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF

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, 2023

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

nsurance 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

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

sioner of Insurance May 8, 15 & 22, 2024

92738 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023
of the American Equity Investment Life Insurance Company
In the state of Iowa
Total Assets
Aggregate write-ins for
spēcial surplus funds
Preferred Capital Stock 0 Aggregate write-ins for Other than
Special Surplus Funds0
Surplus Notes
Gross paid in and Contributed Surplus1,619,100,037 Unassigned Funds2,058,339,494
Total Capital And Surplus
And Surplus
Total Life and Annuity Premiums
Written
Total Life and Annuity Direct Losses
Paid
Written0 Total Accident and Health Direct Losses Paid0
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 May, A.D. 2024 (SEAL). JON GODFREAD

STATE OF NORTH DAKOTA

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE CO

# ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

10127

of the		
Allied Insurance Company of America		
In the state of Ohio		
Total Assets		
Total Liabilities		
Aggregate write-ins for		
special surplus funds0		
Common Capital Stock4,200,000		
Preferred Capital Stock 0		
Aggregate write-ins for Other than		
Special Surplus Funds0		
Surplus Notes0		
Gross paid in and		
Contributed Surplus		
Unassigned Funds2,921,195		
Total Capital And Surplus		
Total Liabilities, Capital		
And Surplus		
NORTH DAKOTA BUSINESS ONLY		
FOR THE YEAR 2023		

## FOR THE YEAR 202 Total Life and Annuity Premiums

184,261 Total Life and Annuity Direct Losses .193,345 Total Accident and Health Direct Premiums

# Total Accident and Health Direct Losses

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. IN TESTIMONY WHEREOF, I have hereunto set my

hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

SOUFREAD issioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF

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, 2023

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 surance law aforesaid,

Insurance law atoresaid, 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

### IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL JON GODFREAD

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

of the

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2023

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. IN TESTIMONY WHEREOF, I have hereunto set my

hand and affixed the seal of this office at Bismarck, the

OF INSURANCE

COMPANY'S CERTIFICATE OF

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, 2023 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

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

Total Liabilities

Surplus Notes.

And Surplus.

Paid

Gross paid in and

Contributed Surplus

Unassigned Funds..... Total Capital And Surplus

Total Life and Annuity Premium

Written ..... Total Life and Annuity Direct Losses

Total Accident and Health Direct Premiums

Total Accident and Health Direct Losses

rst day of May, A.D. 2024 (SEAL).

OFFICE OF THE CO

JON GODFREAD

Total Liabilities, Capital

Aggregate write-ins for

special surplus funds

Common Capital Stock..... Preferred Capital Stock ..... Aggregate write-ins for Other than Special Surplus Funds....

ioner of Insurance

May 8, 15 & 22, 2024

23450

.339,316,682 .250,051,536

4,200,000

22.550.000

62,515,146 89,265,146

339,316,682

205,224

0

## ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the

Allied Property and Casualty Insurance Company		
In the state of Iowa		
Total Assets		
Total Liabilities		
Aggregate write-ins for		
special surplus funds0		
Common Capital Stock		
Preferred Capital Stock 0		
Aggregate write-ins for Other than		
Special Surplus Funds0		
Surplus Notes0		
Gross paid in and		
Contributed Surplus		
Unassigned Funds14,978,181		
Total Capital And Surplus		
Total Liabilities, Capital		
And Surplus		
NORTH DAKOTA BUSINESS ONLY		
FOR THE YEAR 2023		

Total Life and Annuity Premiums 117,487 Total Life and Annuity Direct Losses .-108,102 Total Accident and Health Direct Premiums

Total Accident and Health Direct Losses

## 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. IN TESTIMONY WHEREOF, I have hereunto set my

hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF

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, 2023 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.

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

ABSTRACT OF STATEMENT

FOR THE YEAR ENDING DECEMBER 31, 2023

of the

American Family Life Assurance Company

of Columbus (AFLAC) In the state of Nebraska

Aggregate write-ins for

special surplus funds... Common Capital Stock Preferred Capital Stock

Special Surplus Funds.

Total Capital And Surplus

Total Liabilities, Capital

Aggregate write-ins for Other than

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Life and Annuity Premiums

Total Accident and Health Direct Premiums

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. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). JON GODFREAD

Total Accident and Health Direct Losses

Total Life and Annuity Direct Losses

Total Assets .

Total Liabilities

Surplus Notes

And Surplus

Writter

Paid

Paid.

Gross paid in and Contributed Surplus Unassigned Funds.

## 2024 (SEAL

JON GODFREAD oner of Insurance

May 8, 15 & 22, 2024

60380

16,242,640,675 13,362,078,482

.7,025,039

130.000.000

.....637,200,053 .2,106,337,101

.2.880.562.193

. 16.242.640.675

1,912,541

.. 145.964

.52,034,354

.. 27.159.924

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the AMCO Insurance Company

19100

In the state of Iowa Total Assets ...... Total Liabilities ..... .659,647,977 .460,243,601 Aggregate write-ins for special surplus funds... Common Capital Stock..... Preferred Capital Stock ..... Aggregate write-ins for Other that ..3,000,000 Special Surplus Funds. Surplus Notes Gross paid in and Contributed Surplus 177.486.674 Unassigned Funds...... Total Capital And Surplus Total Liabilities, Capital 18 917 702 199,404,376 659,647,977

### NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023

And Surplus

Total Life and Annuity Premiu 3,580,107 Total Life and Annuity Direct Losses ..1,300,524 Paid Total Accident and Health Direct Premiums

Total Accident and Health Direct Losses

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. IN TESTIMONY WHEREOF, I have hereunto set my here and efficient the certed of the file of the theorem.

hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

# trist day of May, A.D. 2024 (SEAL). 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 the office o surver attempt or bibling its applications this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 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 urance 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 2025 IN TESTIMONY WHEREOF, I have hereunto set r

hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL JON GODFREAD

AB

American Mode

In the state of C Total Assets .....

**Total Liabilities** 

Aggregate write special surplus

Common Capita Preferred Capit

Aggregate write

Surplus Notes

Gross paid in a

Contributed Su

Unassigned Fu Total Capital An

Total Liabilities,

Total Life and A

Total Life and A

Total Accident a

Total Accident a

I, Jon Godfread, of North Dakota a true Abstract

Company in this IN TESTIMONY

hand and affixe

v of Ma

NORTH

OFFIC

And Surplus

pecial Surplus

sioner of Insurance May 8, 15 & 22, 2024

## ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the

12548

### .2,434,221,275 .2,352,169,681 Aggregate write-ins for special surplus funds... Common Capital Stock..... Preferred Capital Stock ...... Aggregate write-ins for Other than 2,700,000 Special Surplus Funds. Surplus Notes Gross paid in and Contributed Surplus 55.221.888 Unassigned Funds...... Total Capital And Surplus Total Liabilities, Capital 24 129 706 82,051,594 And Surplus plus.....2,434,221,275 NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2023 Total Life and Annuity Premiums 153,821,079 Total Life and Annuity Direct Losses .102,941,849 Total Accident and Health Direct Premiums

Total Accident and Health Direct Losses

# STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

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 anu a... first day of May, A.D. acc JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE OF INSURANCE CONV'S CERTIFICATE OF hand and affixed the seal of this office at Bismarck, the

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, 2023 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

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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL JON GODFREAD ner of Insurance

May 8, 15 & 22, 2024

Unassigned Funds...... Total Capital And Surplus Total Liabilities, Capital 4 009 581 20,340,129 21,139,766 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Life and Annuity Premiu 3,629,383 Total Life and Annuity Direct Losses

19690

..21,139,766

.799,637

.5,000,000

11.330.548

.. 1,472,044 Total Accident and Health Direct Premiums Writ Total Accident and Health Direct Losses

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023

of the

American Economy Insurance Company

In the state of Indiana

Aggregate write-ins for special surplus funds...

Special Surplus Funds

Common Capital Stock..... Preferred Capital Stock ...... Aggregate write-ins for Other than

Total Assets

Total Liabilities.

Surplus Notes

Gross paid in and

Contributed Surplus

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. IN TESTIMONY WHEREOF, I have hereunto set my

hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL).

Tirst day of May, A.D. 2024 (SEAL). 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 the office a course attornant orbibilities its expeditions this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023

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 nsurance 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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D. 2024 (SEAL JON GODFREAD

ioner of Insurance May 8, 15 & 22, 2024

23469	42722	60739
BSTRACT OF STATEMENT	ABSTRACT OF STATEMENT	ABSTRACT OF STATEMENT
FOR THE YEAR ENDING	FOR THE YEAR ENDING	FOR THE YEAR ENDING
DECEMBER 31, 2023	DECEMBER 31, 2023	DECEMBER 31, 2023
of the	of the	of the
ern Home Insurance Company	American Modern Property and Casualty	American National Insurance Company
Ohio	Insurance Company	In the state of Texas
	In the state of Ohio	Total Assets
	Total Assets	Total Liabilities
e-ins for	Total Liabilities	Aggregate write-ins for
funds0	Aggregate write-ins for	special surplus funds 0
tal Stock5,000,000	special surplus funds0	Common Capital Stock
tal Stock 0	Common Capital Stock5,000,000	Preferred Capital Stock 0
e-ins for Other than	Preferred Capital Stock 0	Aggregate write-ins for Other than
s Funds0	Aggregate write-ins for Other than	Special Surplus Funds0
0	Special Surplus Funds0	Surplus Notes 0
and	Surplus Notes 0	Gross paid in and
Irplus103,771,315	Gross paid in and	Contributed Surplus 0
inds106,735,008	Contributed Surplus125,700,000	Unassigned Funds
nd Surplus	Unassigned Funds25,035,773	Total Capital And Surplus1,247,496,791
, Capital	Total Capital And Surplus 105,664,227	Total Liabilities, Capital
	Total Liabilities, Capital	And Surplus
H DAKOTA BUSINESS ONLY	And Surplus	NORTH DAKOTA BUSINESS ONLY
FOR THE YEAR 2023	NORTH DAKOTA BUSINESS ONLY	FOR THE YEAR 2023
Annuity Premiums	FOR THE YEAR 2023	Total Life and Annuity Premiums
	Total Life and Annuity Premiums	Written
Annuity Direct Losses	Written2,707,391	Total Life and Annuity Direct Losses
	Total Life and Annuity Direct Losses	Paid2,389,307
and Health Direct Premiums	Paid	Total Accident and Health Direct Premiums
0	Total Accident and Health Direct Premiums	Written
and Health Direct Losses	Written0	Total Accident and Health Direct Losses
0	Total Accident and Health Direct Losses	Paid
ATE OF NORTH DAKOTA	Paid0	STATE OF NORTH DAKOTA
CE OF THE COMMISSIONER	STATE OF NORTH DAKOTA	OFFICE OF THE COMMISSIONER
OF INSURANCE	OFFICE OF THE COMMISSIONER	OF INSURANCE
, Commissioner of Insurance of the State	OF INSURANCE	I, Jon Godfread, Commissioner of Insurance of the State
a, do hereby certify that the foregoing is	I, Jon Godfread, Commissioner of Insurance of the State	of North Dakota, do hereby certify that the foregoing is
t of Statement, as officially filed by the	of North Dakota, do hereby certify that the foregoing is	a true Abstract of Statement, as officially filed by the
is office.	a true Abstract of Statement, as officially filed by the	Company in this office.
Y WHEREOF, I have hereunto set my	Company in this office.	IN TESTIMONY WHEREOF, I have hereunto set my
ed the seal of this office at Bismarck, the	IN TESTIMONY WHEREOF, I have hereunto set my	hand and affixed the seal of this office at Bismarck, the
y, A.D. 2024 (SEAL).	hand and affixed the seal of this office at Bismarck, the	first day of May, A.D. 2024 (SEAL).
AD	first day of May, A.D. 2024 (SEAL).	JON GODFREAD
of Insurance	JON GODFREAD	Commissioner of Insurance
ATE OF NORTH DAKOTA	Commissioner of Insurance	STATE OF NORTH DAKOTA

first day of May, A.D. 2024 (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 exhibiting its condition and business for the year ending December 31, 2023 conformable to the requirements of the laws of this State

WHEREAS, the said company has filed in this office of a duly certified copy of its charter with certificate of organization in compliance with the requirements of

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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL

JON GODFREAD Commissioner of Insurance

May 8, 15 & 22, 2024

state according to the laws thereof, until the 30th day of April, A.D. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) JON GODFREAD

oner of Insurance

urance law aforesaid.

May 8, 15 & 22, 2024

18988

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER AUTHORITY WHEREAS, the above corporation duly organized under

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, 2023 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 rance 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 names 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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D. 2024 (SEAL)

JON GODFREAD Commissioner of Insurance

May 8, 15 & 22, 2024

61190

OF INSURANCE COMPANY'S CERTIFICATE OF

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, 2023 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 irance 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 2025

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL) JON GODFREAD

> issioner of Insurance May 8, 15 & 22, 2024

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, 2023 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 irance law aforesaid

STATE OF NORTH DAKOTA

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. 2025.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D. 2024 (SEAL) JON GODFREAD

sioner of Insurance May 8, 15 & 22, 2024

# OF INSURANCE

ner of Insurance STATE OF NORTH DAKOTA

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, 2023 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 nsurance 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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL

### JON GODFREAD

nissioner of Insurance May 8, 15 & 22, 2024

87726

	10872
ABSTRACT OF STATEMENT	10072
FOR THE YEAR ENDING	
DECEMBER 31, 2023	
of the	
American Strategic Insurance Corp	A
In the state of Florida Total Assets2,941	In
Total Liabilities	
Aggregate write-ins for special surplus funds	A
special surplus funds	0 sp
Common Capital Stock5	,000,000 C
Preferred Capital Stock	
Aggregate write-ins for Other than	A
Special Surplus Funds	0 S
Surplus Notes	
Gross paid in and	G
Contributed Surplus906	
Unassigned Funds153	
Total Capital And Surplus758	
Total Liabilities, Capital	To
Total Liabilities, Capital And Surplus2,941	,296,719 A
NORTH DAKOTA BUSINESS ONLY	,
FOR THE YEAR 2023	
Total Life and Annuity Premiums	To
Written 11	,724,779 W
Total Life and Annuity Direct Losses	To
Paid6	,788,564 Pa
Total Accident and Health Direct Premiums	To
Written	0 W
Total Accident and Health Direct Losses	To
Paid	0 P
STATE OF NORTH DAKOTA	
OFFICE OF THE COMMISSIONER	
OF INSURANCE	
I, Jon Godfread, Commissioner of Insurance of	the State I,
of North Dakota, do hereby certify that the for	

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

In and and another first day of May, A.D. 202. JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE OF INSURANCE

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, 2023 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

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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL

JON GODFREAD nissioner of Insurance

May 8, 15 & 22, 2024

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2023** of the uto-Owners Insurance Compare the state of Michigan total Assets 24,140,090,124 otal Liabilities .10,296,583,477 ggregate write-ins for pecial surplus funds... 3.000.000 Common Capital Stock..... Preferred Capital Stock ...... Aggregate write-ins for Other than .1,250,000 pecial Surplus Funds.. urplus Notes. ross paid in and contributed Surplus...... Inassigned Funds...... otal Capital And Surplus 13,839,256,648 13,843,506,648 otal Liabilities, Capital nd Surplus 24,140,090,125 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 otal Life and Annuity Premiums 53,365,235 otal Life and Annuity Direct Losses .. 30,766,718 aid otal Accident and Health Direct Premiums otal Accident and Health Direct Losses 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. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (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 exhibiting its condition and business for the year ending December 31, 2023 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 conv of its chater with certificate of

a duly certified copy of its charter with certificate of organization in compliance with the requirements of urance 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 IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D. JON GODFREAD

ner of Insurance May 8, 15 & 22, 2024

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2023 of the	
Auto-Owners Life Insurance Company n the state of Michigan	Banne In the s
Total Assets	Total A
Fotal Liabilities	Total L
special surplus funds	Aggreg specia
Common Capital Stock	Comm
Preferred Capital Stock 0	Preferr
Aggregate write-ins for Other than	Aggree
Special Surplus Funds0 Surplus Notes0	Specia Surplu
Gross paid in and	Gross
Contributed Surplus	Contrit
Jnassigned Funds	Unassi
Total Capital And Surplus585,393,751 Total Liabilities, Capital	Total C Total L
And Surplus	And St
NORTH DAKOTA BUSINESS ONLY	
FOR THE YEAR 2023	<b>-</b>
Total Life and Annuity Premiums Vritten2,284,872	Total L Writter
Fotal Life and Annuity Direct Losses	Total L
Paid	Paid
Total Accident and Health Direct Premiums	Total A
Vritten	Writter Total A
Paid0	Paid
STATE OF NORTH DAKOTA	
OFFICE OF THE COMMISSIONER	
OF INSURANCE , Jon Godfread, Commissioner of Insurance of the State	I. Jon C
, John Gouricau, Commissioner of misurance of the State	1, 0011 0

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 nand and anixoun first day of May, A.D. 2020 JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE CANY'S CERTIFICATE OF

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 med in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 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 dubt actified come of the obstate with excitants of

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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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D. 2024 (SEAL)

DΝ	ĠOD	FŔE/	AC	)	
om	missio	oner	of	Insurance	

Co

May 8, 15 & 22, 2024

ABSTRACT OF STATE FOR THE YEAR END DECEMBER 31, 20 of the	ING
er Life Insurance Company	
state of Maryland	
Assets	10.385.805.949
Liabilities	
egate write-ins for	
al surplus funds	0
non Capital Stock	
rred Capital Stock	
egate write-ins for Other than	
al Surplus Funds us Notes	0
us Notes	0
s paid in and	

94250

Surplu Gross Contributed Surplus...... Unassigned Funds..... Total Capital And Surplus ... 2 051 213 433 ..-1,420,561,984 .....637,007,874 Total Liabilities, Capital And Surplus 10,385,805,949 NORTH DAKOTA BUSINESS ONLY

# FOR THE YEAR 2023 Total Life and Annuity Premiums

4,198,393 Total Life and Annuity Direct Losses Paid

..7,175,000 Total Accident and Health Direct Premiums .49,813

Total Accident and Health Direct Losses Paid 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. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (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 exhibiting its med in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2023 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 duk actified come of the chotce with exciting the office

a duly certified copy of its charter with certificate of organization in compliance with the requirements of rance 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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D. 2024 (SEAL)

GODI KLAD	
missioner of Insurance	
	May 8, 15 & 22, 2024

ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2023** of the Brighthouse Life Insurance Compa In the state of Delaware Total Assets 189.265.213.629 Total Liabilities. 184,642,469,713 Aggregate write-ins for special surplus funds... Common Capital Stock..... Preferred Capital Stock ..... Aggregate write-ins for Other than 75,000,000 Special Surplus Funds..... Surplus Notes. 811,670,000 Gross paid in and Contributed Surplus....... Unassigned Funds......... Total Capital And Surplus .... 4.935.279.527 ...4,622,743,916 Total Liabilities, Capital And Surplus 189,265,213,629 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Life and Annuity Premiums 86,786,961 Total Life and Annuity Direct Losses ..64,996,919 Paid

Total Accident and Health Direct Premiums \M/ritto 47.910 Total Accident and Health Direct Losses .69,770 Paid

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. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of May, A.D. 2024 (SEAL). Inst day of May, A.D. 2024 (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

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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

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of May, A.D. 2024 (SEAL)

## JON GODFREAD

sioner of Insurance May 8, 15 & 22, 2024

### 19658 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2023** of the Bristol West Insurance Company In the state of Ohio Total Assets 255,703,040 Total Liabilities. 186,042,546 Aggregate write-ins for special surplus funds... Common Capital Stock..... Preferred Capital Stock ..... Aggregate write-ins for Other thar .6,000,000 Special Surplus Funds.. Surplus Notes. Gross paid in and Contributed Surplus...... Unassigned Funds...... Total Capital And Surplus. 39.000.000 ..24,660,494 Total Liabilities, Capital And Surplus 255,703,040 NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2023 Total Life and Annuity Premiums 2,659,269 Total Life and Annuity Direct Losses .1,336,418 Total Accident and Health Direct Premiums Writter Total Accident and Health Direct Losse

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. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the

Tirst day of May, A.D. 2024 (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

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a duly certified copy of its charter with certificate of

organization in compliance with the requirements of

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

tate according to the laws thereof, until the 30th day

IN TESTIMONY WHEREOF, I have hereunto set my

hand and seal at Bismarck this first day of May, A.D., 2024 (SEAL)

May 8, 15 & 22, 2024

urance law aforesaid

JON GODFREAD

issioner of Insurance