#### **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,

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

Infinity Insurance Company In the state of Indiana

1,018,176,369 974,514,681 Total Assets

Total Liabilities 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

Funds
Surplus Notes 0
Gross Paid in
and 29,766,341
Contributed
Surplus
Unassigned 10,895,347
funds (surplus)
Total Capital and 43,661,688
Surplus

Surplus Total Liabilities, Capital And Surplus

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024 Total Direct

1,018,176,369

Premiums Earned Total Direct Losses 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

0

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 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

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)

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 Aggregate write-ins for special surplus funds Common Capital 3,000,000 Stock Preferred Capi- 0 tal Stock

tal Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 125,000,000

Contributed Surplus Unassigned (Surplus)
Total Capital and 707,574,505

Surplus Total Liabilities, Capital And Surplus

1,909,920,545

#### NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums 8,061,560 Earned Total Direct 3,046,071 Losses 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 foregoing is a true Abstract of Statement, as officially filed by the Company in this office. this office. IN TESTIMONY WHEREOF, I have

#### **PUBLIC NOTICE**

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 domicile, 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, 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)

#### 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 Capi-0 tal Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes 0 Gross Paid in 71,483,242

Surplus Unassigned -46,776,395 funds (surplus)
Total Capital and 29,706,847 Surplus Total Liabilities, 29,747,581 And Surplus

Contributed

#### **NORTH DAKOTA BUSINESS** ONLY FOR THE YEAR 2024

Total Direct Premiums 0 Earned Total Direct 0 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

JO 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

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 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

JON GODFREAD

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

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

of the
Alpha Property And Casualty Insurance Company
In the state of Wisconsin

Total Assets 20,439,301 Total Liabilities 5,048,516 Aggregate write-ins for special surplus funds Common Capital 4,200,000 Stock Preferred Capi- 0 tal Stock Aggregate

0 Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 8,100,000 and Contributed

Surplus Unassigned 3,090,785 funds (surplus) Total Capital and 15,390,785

Surplus Total Liabilities, 20.439.301 And Surplus **NORTH DAKOTA BUSINESS** 

FOR THE YEAR 2024 Total Direct Premiums 0 Total Direct 0

#### **PUBLIC NOTICE**

Total Accident 0 Health Direct Premiums **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 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)

#### 10239 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the SECURA Supreme Insurance Company In the state of Wisconsin Total Assets Total Liabilities 211,648,364 128,249,961 Aggregate write-ins surplus funds Common Capital 6,000,000 Stock Preferred Capi-tal Stock Aggregate Write-ins for Other Than Special Surplus Surplus Notes Gross Paid in and Contributed 11,960,000 Surplus Unassigned 65,438,403 funds (surplus) Total Capital and 83,398,403

#### 211,648,364 Capital And Surplus **NORTH DAKOTA BUSINESS** ONLY

FOR THE YEAR 2024 Total Direct 8.061.560 Premiums Total Direct 3,046,071 Losses Incurred Total Accident and Health Direct Earned Total Accident and Health Direct 0 Losses Incurred

Surplus Total Liabilities

# 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,

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 Unitrin Safeguard Insurance Com-

In the state of Wisconsin Total Assets Total Liabilities 20,170,417 10,708,112 Aggregate 0 for special surplus funds Common Capital 3,000,000 Stock Preferred Capi- 0

tal Stock

#### **PUBLIC NOTICE**

Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed 6,721,267 Surplus Unassigned -258,962 funds (surplus) Total Capital and 9,462,305 Surplus Total Liabilities 20,170,417 Capital And Surplus

#### NORTH DAKOTA BUSINESS ONLY 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 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 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 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 represen-

ns 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

(SEAL) JON GODFREAD Commissioner of Insurance

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

#### ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024** of the Trisura Insurance Company

In the state of Oklahoma 530613569 335955342 **Total Assets** Total Liabilities Aggregate write-ins 0 for special surplus funds Common Capital 4200000 Stock Preferred Capi-tal Stock 0 Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and Contributed 228123947 Surplus Unassigned -37665722 funds (surplus) Total Capital and 194658225 Surplus Total Liabilities Capital And Surplus 530613567

## NORTH DAKOTA BUSINESS ONLY

**FOR THE YEAR 2024** Total Direct Premiums 350563 Earned Total Direct 50079 Losses Incurred **Total Accident** Health Direct Premiums Earned Total Accident 0 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

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 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

#### **PUBLIC NOTICE**

Commissioner of Insurance (May. 15 & 22 & 29, 2025)

#### 34347 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024**

of the

Colonial American Casualty And Surety Company In the state of Illinois Total Assets 20,211,233 Total Liabilities 1,998,408 Aggregate write-ins for special surplus funds Common Capital 5,000,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 5,000,000 and

## NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

funds (surplus)
Total Capital and 18,212,825
Surplus
Total Liabilities,

8,212,825

20,211,233

Total Direct 0 Premiums Earned Total Direct Losses 2,697 Incurred Total Accident and 0 Health Direct Premiums Total Accident and 0 Health Direct Losses Incurred

Contributed Surplus

Unassigned

Capital And 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 fore-going is a true Abstract of Statement, as officially filed by the Company in

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

JON GODFREAD Commissioner of Insurance

#### (May. 8 & 15 & 22, 2025) ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

Financial Pacific Insurance Compa-

In the state of California 273.525.451 Total Assets Total Liabilities 179,529,724 Aggregate 0 write-ins for special surplus funds Common Capital 3,003,000 Stock Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in 28.513.974 and Contributed Surplus 62,478,753 Unassigned funds (surplus)
Total Capital and 93,995,727

#### 273,525,451 And Surplus NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Surplus

Total Liabilities

Total Direct Premiums 67,189,029 Earned Total Direct osses 46,950,121 Incurred Total Accident Health Direct Premiums Earned Total Accident and 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 Da-

kota, do hereby certify that the fore-going is a true Abstract of Statement, as officially filed by the Company in this office.

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 GODFHEAD
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

51,493,170 Surplus Total Liabilities,

#### **NORTH DAKOTA BUSINESS** ONLY FOR THE YEAR 2024

248,444,067

Earned Total Direct Losses 1,283,670 Incurred Total Accident 0 and Health Direct Premiums Earned Total Accident

# 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-

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-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

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

#### 26247 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024**

Insurance Company
In the state of New York **Total Assets** 288,524,520 105,277,153 Total Liabilities Aggregate write-ins

Stock Preferred Capital Stock Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes Gross Paid in and 0 172,270,401 Contributed Surplus Unassigned 5,976,939 funds (surplus) Total Capital and 183,247,367 Surplus Total Liabilities, 288.524.520 Capital And Surplus

#### **NORTH DAKOTA BUSINESS FOR THE YEAR 2024**

653 0 Health Direct Premiums Earned Total Accident 0 Health Direct Losses Incurred

#### STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

hereunto set my hand and affixed the seal of this office at Bismarck,

### **PUBLIC NOTICE**

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 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

Commissioner of Insurance

(May. 8 & 15 & 22, 2025)

#### 39306 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the
The Fidelity And Deposit Company
Of Maryland
In the state of Illinois 248,444,067 45,108,495 Total Assets Total Liabilities 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 Gross Paid in and 146.842.402 Contributed Surplus Unassigned funds (surplus) Total Capital and 203,335,572

Capital

And Surplus

#### Total Direct Premiums 1,348,006

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, 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

its authorized agents and represen-tatives, to transact its appropriated business of authorized insurance

(May. 8 & 15 & 22, 2025)

of the American Guarantee And Liability

for special surplus funds Common Capital 5,000,027

Total Direct Premiums 2,950,264 Earned Total Direct Losses Total Accident and

I, Jon Godfread, Commissioner of Insurance of the State of North Da-

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 Continued on next page