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 or guard to the most on in this office a sworn statement ex 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 organization in compliance with the requirements of insurance law

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursu-to the provisions of said laws, 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 ap-propriated 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

(Jun. 27; Jul. 4 & 11, 2025)

80802 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of	the	,	
Sun Life Assura Canada	nce		Of
In the state of Mic	•		
Total Assets Total Liabilities Aggregate		31,405,46 15,383,88	
write-ins for special	0		
surplus funds Common Capi- tal Stock	0		
Preferred Capi- tal Stock	0		
Aggregate Write-ins for Other Than	-5939	978417	
Special Surplus Funds			
Surplus Notes Gross Paid in	1,41	0,000,000	
and Contributed	0		
Surplus Unassigned Funds	0		
Total Capital and Surplus	816	,021,583	
Total Liabilities, Capital And Surplus	19,0	31,405,46	6
NORTH DAKOTA BUSINESS ONLY			
FOR THE	YEA	R 2024	
Total Life and Annuity Premi- ums Written	2,10	3,817	
Total Life and Annuity Direct Losses Paid	1,10	7,458	
Total Accident and Health Direct	3,20	9,801	
Premiums Written			

and Health Direct Losses Paid STATE OF NORTH DAKOTA

2,005,196

OFFICE OF THE COMMISSIONER OF INSURANCE 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 the office

this office. IN TESTIMONY WHEREOF, I have the seal of this office at Bismarck, the first day of March, A.D. 2025

JON GODFREAD

Total Accident

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

OFFICE OF THE COMMISSIONER OF INSURANCE Tc Pl Ei To Lc 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 Tc

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 domicile, has filed in this office a sworn statement ex-hibiting its condition and business for the year ending December 31, 2024 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

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 ap-propriated business of authorized 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. 27; Jul. 4 & 11, 2025) 16691 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the Great American Insurance Company In the state of Ohio

In the state of Ohio	
Total Assets Total Liabilities Aggregate	13,441,770,429 10,139,555,351
write-ins for special	53,160,920
surplus funds Common Capi- tal Stock	15,440,600
Preferred Capi- tal Stock	0
Aggregate Write-ins for Other Than Special Surplus	0
Funds Surplus Notes Gross Paid in	0
and Contributed	911,548,324
Surplus Unassigned	2,322,065,234
funds (surplus) Total Capital and Surplus	3,302,215,078
Total Liabilities, Capital And Surplus	13,441,770,429

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums 111,432,387 Earned Total Direct Losses Incurred 53,070,086 **Total Accident** and Health Direct 294.369 Premiums Earned Total Accident 118,455 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

an IN TESTIMONY WHEREOF, I have He Pr Ea hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 JON GODFREAD

Total Direct Premiums Earned	60,505,326	
Total Direct Losses Incurred	56,529,193	
Total Accident and Health Direct	0	
Premiums Earned Total Accident and Health Direct Losses Incurred	0	
STATE OF NORTH DAKOT		

OF NER

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 (SEAL) JON GODFREAD

Commissioner 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, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHERERS, 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 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 ap-propriated 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

(Jun. 27; Jul. 4 & 11, 2025)

10111

	10111			
ABSTRACT OF STATEMENT				
FOR THE YEAR ENDING DECEMBER 31, 2024				
of the				
American Banker	s Insurance Com			
pany Of Florida				
In the state of Flo	rida			
Total Assets	2,858,441,278			
Total Liabilities	2,289,388,328			
Aggregate	_			
write-ins	0			
for special				
surplus funds Common Capi-	5,083,164			
tal Stock	5,005,104			
Preferred Capi-	0			
tal Stock				
Aggregate				
Write-ins for	0			
Other Than				
Special Surplus				
Funds Surplus Notes	0			
Gross Paid in	0			
and	265,075,599			
Contributed	200,010,000			
Surplus				
Unassigned	298,894,187			
funds (surplus)				
Total Capital and	569,052,950			
Surplus Total Liabilities,				
Capital	2,858,441,278			
And Surplus	2,000,441,270			
	TA BUSINESS			
ONLY FOR THE YEAR 2024				
Total Direct				

FOR THE	YEAR 202
tal Direct	
emiums	5,093,294
rned	
tal Direct	
SSES	2,081,687
curred tal Accident	
d	0
alth Direct	0
emiums	
rned	

urplus Notes ross Paid in	0			
nd ontributed	65,658,698			
urplus nassigned ınds (surplus)	17,341,997			
otal Capital and urplus	86,500,772			
apital apital nd Surplus	157,679,328			
NORTH DAK	OTA BUSINES			
FOR THE YEAR 2024				
otal Direct remiums arned	19,256			
otal Direct	-18 100			

18,100 0 0 Health Direct

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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 (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 ex-hibiting its condition and business for hibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the 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 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 ap-proprieted business of authorized propriated 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

(Jul. 11 & 18 & 25, 2025)

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Su ar Course ar Tc Pi E Losses Incurred

Earned Total Accident and

Losses Incurred

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 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 ap-propriated 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

(SFÁL) JON GODFREAD

Commissioner of Insurance

(Jul. 4 & 11 & 18, 2025)

94358 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024**

USABLE LIFE In the state of Arkansas Total Assets Total Liabilities 539,396,217 294,924,577 Aggregate write-ins 0 for special surplus funds Common Capi-4.925.000 tal Stock Preferred Capi-0 tal Stock Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed 37,624,496 Surplus Unassigned 201,922,144 Funds Total Capital and 244,471,640 201,922,144 Surplus Total Liabilities, 539,396,217 Capital And Surplus

NORTH DAKOTA BUSINESS ONLY

FOR THE YEAR 2024 Total Life and Annuity Premi-

161,345 ums Written Total Life and Annuity Direct Losses Paid 239,784 Total Accident 1,527,965 and Health Direct Premiums Written Total Accident and Health Direct 702,461 Losses Paid

STATE OF NORTH DAKOTA

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 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

NOW THEREFORE, I, JON GOD-FREAD, Commissioner of Insurance of the State of North Dakota, pursuof 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, 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

(Jul. 11 & 18 & 25, 2025)

91596 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the New York Life Insurance & Annuity Corporation In the state of Delaware 204,816,149,635 **Total Assets**

Total Liabilities	196,399,403,954
Aggregate write-ins	528,131,646
for special	020,101,010
surplus funds	05 000 000
Common Capi- tal Stock	25,000,000
Preferred Capi-	0
tal Stock	
Aggregate Write-ins for	0
Other Than	0
Special Surplus	
Funds	0
Surplus Notes Gross Paid in	0
and	4,457,575,310
Contributed	
Surplus Unassigned	3,406,038,725
funds (surplus)	0,400,000,720
Total Capital and	8,416,745,681
Surplus Total Liabilities,	
Capital	204,816,149,635
And Surplus	, , , ,,

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Accident and Health Direct 0 Losses Incurred

Ea Tot

Lo

Inc Tot

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, ac 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

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 ap-propriated 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 (SFÁL)

JON GODFREAD Commissioner of Insurance

(Jul. 4 & 11 & 18, 2025)

21881 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the National Surety Corporation In the state of Illinois Total Assets Total Liabilities 157,679,328 71,178,556 Aggregate 0 write-ins for special surplus funds 3,500,077 Common Capital Stock Preferred Capi-tal Stock 0 Aggregate Write-ins for 0 Other Than Special Surplus Funds



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