PUBLIC NOTICE

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

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 the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL)

JON GODFREAD

 OON 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 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 represen-tatives, to transact its appropriated business of authorized insurance 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. 26; Jul. 3 & 10, 2025)

37885 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the XL Specialty Insurance Company In the state of Delaware

Total Assets	3,440,477,638	
Total Liabilities	2,652,387,818	
Aggregate write-ins for special	0	
surplus funds Common Capital Stock	5,812,500	
Preferred Capi- tal Stock Aggregate	0	
Write-ins for Other Than	0	
Special Surplus Funds		
Surplus Notes	0	
Gross Paid in and Contributed	609,190,317	
Surplus Unassigned funds (surplus)	173,087,003	
Total Capital and Surplus	788,089,820	
Total Liabilities, Capital And Surplus	3,440,477,638	
	DTA BUSINESS	
ONLY FOR THE YEAR 2024		
Total Direct		
Premiums Earned	2,973,099	
Total Direct	1 005 015	

Losses 1.205.615 Incurred Total Accident 0 and Health Direct Premiums Earned Total Accident and 0

PUBLIC NOTICE

Gross Paid in and Contributed	133,193,818
Surplus Unassigned funds (surplus)	48,235,456
Total Capital and Surplus	186,429,274
Total Liabilities, Capital And Surplus	572,167,714
	OTA BUSINESS
	NLY YEAR 2024
Total Direct Premiums Earned	1,847,243

Total Direct Premiums	1,847,243
Earned	.,,
Total Direct	
Losses	372,168
Incurred	
Total Accident	
and	0
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 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)

(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 ex-hibiting its condition and business for the very ending December 21, 2024 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 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 Commissioner of Insurance

(Jun. 26; Jul. 3 & 10, 2025)

21741 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 esurance Insurance Company Of New Jersey In the state of Illinois **Total Assets** 13,302,700 otal Liabilities 2,072,468 Aggregate write-ins 0 for special surplus funds Common Capital 2,800.000 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than 0 Special Surplus unds Surplus Notes 0 Gross Paid in and 7,897,441 Contributed Surplus Unassigned funds (surplus) 832,791

PUBLIC NOTICE

r		
FOR THE YEAR ENDING DECEMBER 31, 2024 of the		
Western National In the state of Mir	Assurance	
Total Assets Total Liabilities Aggregate	197,379,085 145,642,181	
write-ins for special	0	
surplus funds Common Capital Stock	3,000,000	
Preferred Capi- tal Stock	0	
Aggregate Write-ins for Other Than Special Surplus Funds	0	
Surplus Notes Gross Paid in	0	
and Contributed Surplus	0	
Unassigned	48,736,905	
funds (surplus) Total Capital and Surplus	51,736,905	
Total Liabilities, Capital And Surplus	197,379,085	

NORTH DAKOTA BUSINESS ONLY

FOR THE	YEAR 2024
Total Direct	
Premiums	49,753,672
Earned Total Direct	
Losses	23,243,102
Incurred Total Accident and Health Direct	0
Premiums Earned Total Accident and Health Direct Losses Incurred	0

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

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 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

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, 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 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. 26; Jul. 3 & 10, 2025)

19445 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the National Union Fire Insurance Com-

pany Of Pittsburgh, Pa In the state of PA

20,719,180,886 15,304,879,076

PUBLIC NOTICE

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 berguito eet my band and seal at

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

JON GODFREAD Commissioner of Insurance

(Jun. 26; Jul. 3 & 10, 2025)

30210 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the Esurance Property And Casualty Insurance Company In the state of Illinois 26,767,954 558,431 Total Assets Total Liabilities

Aggregate write-ins for special 0 surplus funds Common Capital 3,003,000 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes 0 Gross Paid in and Contributed 22,919,093 Surplus Unassigned 287,430 funds (surplus) Total Capital and 26,209,523 Surplus Total Liabilities 26,767,954 Capital And Surplus

NORTH DAKOTA BUSINESS ONLY

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

Los STATE OF NORTH DAKOTA

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 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

SFAL JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE Ea ar He

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

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 (SFÁL)

PUBLIC NOTICE

JAMESTOWN SUN | THURSDAY, JULY 3, 2025 | CLASSIFIEDS | A11

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-**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

(Jun. 26; Jul. 3 & 10, 2025)

FOR THE Y DECEMB	19429 DF STATEMENT EAR ENDING ER 31, 2024 the
	Company Of The
Total Assets Total Liabilities Aggregate	174,448,245 132,788,940
write-ins for special surplus funds	0
Common Capital Stock	
Preferred Capi- tal Stock Aggregate	0
Write-ins for Other Than Special Surplus	0
Funds Surplus Notes	0
Gross Paid in and Contributed	17,320,615
Surplus Unassigned	19,333,190
funds (surplus) Total Capital and Surplus	41,659,305
Total Liabilities, Capital And Surplus	174,448,245
	OTA BUSINESS
	NLY YEAR 2024
Total Direct Premiums Earned	101,884
Total Direct Losses Incurred	-171,942
Total Accident and Health Direct	0
Premiums Earned Total Accident and Health Direct Losses Incurred	0
STATE OF NO	ORTH 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 the 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 (SEAL) (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

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-

PUBLIC NOTICE

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.

as officially life by the company 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)

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 war anding December 31, 2004

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 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,

IN TESTIMONY WHEREOF, I have

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

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

AXA XL Insurance Company Amer-

0

0

0

0

NORTH DAKOTA BUSINESS

ONLY

FOR THE YEAR 2024

0

0

0

9,454

Unassigned -15,029,221 funds (surplus) Total Capital and 72,443,319

82.472.540

-15,029,221

78,168,837

78,168,837 5,725,518

19518

JON GODFREAD Commissioner of Insurance

(Jun. 26; Jul. 3 & 10, 2025)

In the state of Delaware

Common Capital 5,000.000

Total Assets Total Liabilities

Aggregate

for special surplus funds

Stock Preferred Capi-

Special Surplus

Gross Paid in

Surplus Total Liabilities,

And Surplus

Total Direct

Total Direct

Total Accident

Health Direct

Health Direct

Losses Incurred

Premiums

Earned Total Accident

and

Premiums

Farned

_osses

Incurred

and

and Contributed

Surplus

Capital

write-ins

tal Stock

Funds Surplus Notes

Aggregate Write-ins for

Other Than

A D 2026

icas

JON GODFREAD Commissioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF

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 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 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 the year ending December 31, 2024 conformable to the requirements of

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 corrections in continue to the same time of the the control of the same time of the same 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

(SEÁL)

JON GODFREAD Commissioner of Insurance

(Jun. 26; Jul. 3 & 10, 2025)

24554 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the		
L Insurance America, Inc. the state of Delaware		
otal Assets otal Liabilities ggregate	572,167,714 385,738,440	
rite-ins or special	0	
urplus funds Common Capital	5,000,000	

Stock Preferred Capi- 0 tal Stock Aggregate Write-ins for Other Than 0

Special Surplus Funds Surplus Notes

0

Total Capital and	11,230,232
Surplus	
Total Liabilities,	
Capital	13,302,700
And Surplue	

NORTH DAKOTA BUSINESS

0	
FOR THE	YEAR 2024
Total Direct	
Premiums	0
Earned	
Total Direct	
Losses	0
Incurred	
Total Accident	0
and	0
Health Direct	
Premiums	
Earned Total Accident	
and	0
Health Direct	0
Losses Incurred	
Losses incurreu	
STATE OF NO	

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 (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

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, 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. 26; Jul. 3 & 10, 2025)

24465 ABSTRACT OF STATEMENT

Total Assets Total Liabilities Aggregate write-ins for special 638,526,654 surplus funds Common Capital 4,478,750 Stock Preferred Capi-0 tal Stock Aggregate Write-ins for Other Than 0 Special Surplus Funds Surplus Notes Gross Paid in 0 and Contributed 3,909,878,052 Surplus Unassigned 861,418,355 funds (surplus) Total Capital and 5,414,301,811 Surplus Total Liabilities,

20,719,180,887 Capital And Surplus NORTH DAKOTA BUSINESS

ONLY

FOR THE	YEAR 2024
Total Direct	0 400 700
Premiums Earned	9,490,762
Total Direct	
Losses Incurred	2,192,018
Total Accident	
and	0
Health Direct Premiums	
Earned	
Total Accident and	0
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 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 (SFAL)

JON GODFREAD

Commissioner of Insurance STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'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 ex-hibiting its condition and business for the vagr ending December 24, 2024 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 afore-

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

JON GODFREAD

Commissioner of Insurance

(Jun. 26; Jul. 3 & 10, 2025)

40312 ABSTRACT OF STATEMENT FOR THE YEAR ENDING **DECEMBER 31, 2024**

of the Pioneer Specialty Insurance Company In the state of Minnesota Total Assets Total Liabilities 215,669,362 164,882,436 Aggregate write-ins 0 for special surplus funds Common Capital 3,056,311 Stock Preferred Capi- 0 tal Stock Aggregate Write-ins for 0 Other Than Special Surplus Funds Surplus Notes Gross Paid in and 0 1,476,003 Contributed Surplus Unassigned 46,254,611 funds (surplus) Total Capital and 50,786,925 Surplus Total Liabilities, 215.669.362 Capital And Surplus

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

Total Direct Premiums Earned	49,753,673
Total Direct Losses	23,243,100
Incurred	23,243,100
Total Accident and Health Direct	0
Premiums Farned	
Total Accident and Health Direct Losses Incurred	0

STATE OF NORTH DAKOTA 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, or officially filed but the foreas 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

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

Losses

and

Incurred Total Accident

Health Direct

Premiums

Earned

Commissioner of Insurance

(Jun. 26; Jul. 3 & 10, 2025)

19399 ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 of the		
AIU Insurance Company In the state of NY		
Total Assets Total Liabilities	133,488,536 58,450,030	
Aggregate write-ins for special	0	
surplus funds Common Capital Stock	5,627,800	
Preferred Capi- tal Stock	0	
Aggregate Write-ins for Other Than Special Surplus	0	
Funds Surplus Notes	0	
Gross Paid in and Contributed	13,985,059	
Surplus Unassigned	55,425,647	
funds (surplus) Total Capital and	75,038,506	
Surplus Total Liabilities, Capital And Surplus	133,488,536	
NORTH DAKOTA BUSINESS ONLY		
FOR THE YEAR 2024		
Total Direct Premiums Earned	38,213	
Total Direct	0.010	

-2,813

0

STATE OF NORTH DAKOTA 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 (SFAL)

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 ex-hibiting its condition and business for the ware and incompared a 2000 nibiting 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 conv of its charter with certificate of

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, 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. 26; Jul. 3 & 10, 2025)

```
20583
    ABSTRACT OF STATEMENT
FOR THE YEAR ENDING
DECEMBER 31, 2024
of the
XL Reinsurance America Inc.
In the state of New York
Total Assets
                           2,857,83,255
1,917,569,252
Total Liabilities
Aggregate
write-ins
                           0
for special
surplus funds
Common Capital 5,000,000
Stock
Preferred Capi-
tal Stock
                           0
Aggregate
Write-ins for
Other Than
                           0
Special Surplus
Funds
Surplus Notes
                           0
```

