GOVERNMENT OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE

ATTORNEY IN-FACT APPOINTMENT

I/We,_____of_____,
(Name of applicant) (state or jurisdiction)

irrevocably appoint the Commissioner of Insurance of the Commonwealth of Puerto Rico as our Attorney in Fact to receive service of legal process issued against us upon causes of action arising in Puerto Rico out of transactions under our nonresident license in the Commonwealth of Puerto Rico. This appointment is made in compliance with Section 9.280 of the Puerto Rico Insurance Code.

Service upon the Commissioner of Insurance of the Commonwealth of Puerto Rico as our attorney in Fact shall constitute legal service upon us.

_____

(Name of applicant)

CORPORATE SEAL

By: _____

Date: _____

_____

_____

_____

Sworn to before me this_____ day of _____,20____.

_____

Notary Public