



COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE

APPOINTMENT OF MANAGER TO COUNTERSIGN POLICIES

Pursuant to the authority delegated by _____
(Insurer's Name)
organized under the laws of _____ to _____,
(Name of State)
_____ through its President, _____,
said insurer hereby designates and appoints _____,
(Name of Appointee)
whose signature appears hereinafter _____, a
(Signature of Appointee)
resident of Puerto Rico, as its MANAGER for the sole purpose of countersigning its policies,
rider and endorsements in the Commonwealth of Puerto Rico.

Witness the seal of said corporation, and the signature of this President this _____
day of _____, 20__.

SEAL

(Name of Corporation)

(Signature of President)

(County or State)

(City or County)

On this _____ day of _____, 20__,
before me personally appeared _____, whose
signature appears to the above foregoing instrument, and who, being by me duly sworn, deposes
and says that the signature to the above instrument is genuine, that the seal affixed is the seal of
the corporation referred to therein and was affixed by order of its board of directors, and that this
is the genuine act and deed of said corporation.

In Witness Whereof, I have hereunto set my hand and official seal at _____
_____, the day and year above written.

SEAL

(Official Title)

Important Note

The official character of the officer who took the above acknowledgement must be certified by the Secretary of State or by a county clerk or other officer performing similar duties, or by a U.S. Consul.