

AFFIDAVIT OF COMPLIANCE

Pursuant to the requirements of 4 CMC § 7102, Commonwealth Insurance Act of 1983, the _____, an insurer domiciled in the state of _____, does hereby make affidavit that no person may transact the business of insurance in the Commonwealth of the Northern Mariana Islands without complying with all application provisions of the aforesaid insurance law.

IN WITNESS WHEREOF, said insurer has caused this instrument to be executed in its name and behalf, by its proper authorized officers this ____ day of _____, 201 ____.

(SEAL)

By: _____

By: _____