



**FILED**

**AUG 16 2018**

**OFFICE OF  
INSURANCE REGULATION**

Docketed by: 1038

**OFFICE OF INSURANCE REGULATION**

**DAVID ALTMAIER**  
COMMISSIONER

IN THE MATTER OF:

CASE NO.: 231405-18-CO

Application for the Indirect Acquisition of  
NGM INSURANCE COMPANY,  
OLD DOMINION INSURANCE COMPANY,  
MAIN STREET AMERICA ASSURANCE COMPANY, and  
MAIN STREET AMERICA PROTECTION INSURANCE  
COMPANY by AMERICAN FAMILY INSURANCE MUTUAL  
HOLDING COMPANY

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**CONSENT ORDER**

THIS CAUSE came on for consideration upon the filing by AMERICAN FAMILY INSURANCE MUTUAL HOLDING COMPANY (hereinafter referred to as "APPLICANT") with the FLORIDA OFFICE OF INSURANCE REGULATION (hereinafter referred to as the "OFFICE") of an application for the approval of the indirect acquisition of 100% of the issued and outstanding voting securities of NGM INSURANCE COMPANY (hereinafter referred to as "NGM"), OLD DOMINION INSURANCE COMPANY (hereinafter referred to as "OLD DOMINION"), MAIN STREET AMERICA ASSURANCE COMPANY (hereinafter referred to as "MSA ASSURANCE"), and MAIN STREET AMERICA PROTECTION INSURANCE COMPANY (hereinafter referred to as "MSA PROTECTION") (hereinafter collectively referred to as "DOMESTIC INSURERS"), pursuant to Section 628.461, Florida Statutes, via a proposed merger with MAIN STREET AMERICA GROUP MUTUAL HOLDINGS, INC. (hereinafter referred to as "MSA HOLDINGS"), pursuant to Section 628.715, Florida Statutes (hereinafter

referred to as the "Application"). Following a complete review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the OFFICE hereby finds as follows:

1. The OFFICE has jurisdiction over the subject matter and of the parties to this proceeding.

2. APPLICANT has applied for and, subject to the present and continuing satisfaction of the requirements, terms, and conditions established herein, has satisfactorily met all of the conditions precedent to the granting of approval by the OFFICE for the proposed indirect acquisition of 100% of the issued and outstanding voting securities of the DOMESTIC INSURERS by APPLICANT.

3. NGM is a licensed property and casualty insurer, legally domiciled in Florida, and is authorized to transact property and casualty insurance in this state through a subsisting Certificate of Authority issued by the OFFICE. NGM is owned 100% by MAIN STREET AMERICA GROUP, INC. (hereinafter referred to as "MSA GROUP, INC."), a Florida corporation, which is owned 100% by MSA HOLDINGS, a Florida mutual insurance holding company owned by the policyholders of NGM and the policyholders of its predecessor that were assumed by MSA Insurance Company.

4. OLD DOMINION, MSA ASSURANCE, and MSA PROTECTION are licensed property and casualty insurers, legally domiciled in Florida, and owned 100% by Main Street America Financial Corporation, a New Hampshire corporation which is owned 100% by NGM.

5. The Application represents that APPLICANT is a Wisconsin mutual insurance holding company formed on January 1, 2017, through the mutual holding company conversion

of its subsidiary, American Family Mutual Insurance Company. Said representation is material to the issuance of this Consent Order.

6. The Application represents that on May 3, 2018, APPLICANT and MSA HOLDINGS entered into an Agreement and Plan of Merger (hereinafter referred to as the "Merger Agreement"). Pursuant to the terms of the Merger Agreement, APPLICANT and MSA HOLDINGS will combine their businesses through the proposed merger, in which MSA HOLDINGS will merge with and into APPLICANT, with APPLICANT continuing as the surviving corporation (hereinafter referred to as "Merger"). Immediately following the merger, pursuant to the terms of Merger Agreement, each membership interest of MSA HOLDINGS will be converted into and become a membership interest in APPLICANT. There will be no consideration paid as a result of the Merger. Upon closing of the Merger, MSA HOLDINGS will cease to exist, and APPLICANT will directly own 100% of MSA GROUP, INC. and its subsidiaries, including the DOMESTIC INSURERS. Said representations are material to the issuance of this Consent Order.

7. The Application and Merger Agreement additionally represent prior to the closing of the Merger, that MSA HOLDINGS shall have the right to appoint two individuals to the post-Merger Board of Directors of APPLICANT. One such individual will be the current Chief Executive Officer of MSA HOLDINGS; the other has yet to be appointed (hereinafter referred to as "MSA Designee").

8. On July 24, 2018, the OFFICE convened a public hearing in Tallahassee, Florida, for the purpose of obtaining public comment and additional information from the parties involved in the proposed Merger, pursuant to the requirement set forth in Section 628.715(2)(b), Florida Statutes (hereinafter referred to as "Hearing"). Notice of the Hearing was published in

the Florida Administrative Register on July 17, 2018. Upon conclusion of the Hearing, the record of the Hearing was held open for 10 days until August 3, 2018, to allow for additional comment. All documents and exhibits delivered during the Hearing, and any public comments up to the closing of the record, were posted on the OFFICE's website at <https://www.flor.com/Sections/PandC/AmericanFamilyHearing.aspx>.

9. Section 628.715(2)(b), Florida Statutes, provides, in part, that the OFFICE shall give such approval unless it finds such plan or agreement: (1) is inequitable to the policyholders of any domestic insurer involved in the merger or the members of any domestic mutual insurance holding company involved in the merger; or (2) would substantially reduce the security of and service to be rendered to policyholders of a domestic insurer in this state.

10. The OFFICE has considered, and relied upon, the materials submitted by APPLICANT in its Application, the documents and exhibits submitted as part of the public Hearing record, the fact that no responsive public comments were received during the hold-open period, and a letter from Florida's Insurance Consumer Advocate indicating no objection to the proposed transaction. The OFFICE additionally reviewed and considered two fairness opinions submitted by the Boards of Directors of APPLICANT and MSA HOLDINGS.

11. Based upon the requirements in paragraph 9 above, and the consideration of the materials referred to in paragraph 10 above, the OFFICE finds that the proposed Merger of MSA HOLDINGS with and into APPLICANT, resulting in the indirect acquisition of 100% ownership of the DOMESTIC INSURERS, is not inequitable to the policyholders of any of the DOMESTIC INSURERS involved in the Merger or to the members of MSA HOLDINGS, and would not substantially reduce the security of, and service to be rendered to, policyholders of the DOMESTIC INSURERS in this state.

12. APPLICANT, MSA GROUP, INC., and the DOMESTIC INSURERS have made material representations that, except as disclosed in the Application, none of the officers and directors of APPLICANT, and none of the post-Merger officers and directors of MSA GROUP, INC., or the DOMESTIC INSURERS, have been found guilty of, or have pleaded guilty or nolo contendere to, a felony or misdemeanor, other than a minor traffic violation, without regard to whether a judgment of conviction was entered by the court.

13. APPLICANT, MSA GROUP, INC., and the DOMESTIC INSURERS have further represented that they have submitted complete background information on each of the individuals referenced in paragraph 12 above. If said information has not been provided to the OFFICE, or if the sources utilized by the OFFICE in its investigation process reveal that the representations made in paragraph 12 above are inaccurate, any such individual shall be removed as officer or director of said company within 30 days of receipt of notification from the OFFICE and replaced with a person or persons acceptable to the OFFICE.

14. If, upon receipt of notification from the OFFICE, pursuant to paragraph 13 above, APPLICANT, MSA GROUP, INC., or the DOMESTIC INSURERS do not timely take the required corrective action, APPLICANT, MSA GROUP, INC., and the DOMESTIC INSURERS agree that such failure to act would constitute an immediate serious danger to the public and the OFFICE may immediately suspend, revoke, or take other administrative action as it deems appropriate upon the Certificates of Authority of the DOMESTIC INSURERS without further proceedings, pursuant to Sections 120.569(2)(n) and 120.60(6), Florida Statutes.

15. APPLICANT represents that, except as disclosed in the Application, there are no present plans or proposals to make any substantive changes to the DOMESTIC INSURERS, including liquidating them, selling any of their assets (except for transactions such as investment

portfolio transactions in the ordinary course of business), merging or consolidating them with any person or persons, or making any other major change in the business operations of the DOMESTIC INSURERS. Said representation is material to the issuance of this Consent Order.

16. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS affirm and represent that all information, explanations, representations, statements, and documents provided to the OFFICE in connection with this Application, including all attachments and supplements thereto, are true and correct and fully describe all transactions, agreements, ownership structures, understandings, and control with regard to the acquisition and future operations of the DOMESTIC INSURERS. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS further agree and affirm that said information, explanations, representations, statements, and documents, including all attachments and supplements thereto, are material to the issuance of this Consent Order and have been relied upon by the OFFICE in its determination to enter into this Consent Order.

17. Any material changes to the information submitted in the Application filing shall be reported to the OFFICE for its review during the pendency of the Merger closing. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS acknowledge that if the OFFICE determines that any of these reported changes would have a material negative impact to the DOMESTIC INSURERS' financial condition or operation, the OFFICE may rescind its approval as granted in this Consent Order by written notice to APPLICANT, MSA HOLDINGS, MSA GROUP, INC., or the DOMESTIC INSURERS.

18. Within 10 business days after the closing of the Merger, as defined in the Merger Agreement, APPLICANT shall submit, or cause to be submitted, to the OFFICE all documents evidencing completion of the Merger, including, but not limited to, confirmation that the

Members of APPLICANT and MSA HOLDINGS have approved the Merger, and Executed Articles of Merger of APPLICANT and MSA HOLDINGS. Further, APPLICANT, MSA HOLDINGS, MSA GROUP, INC., or the DOMESTIC INSURERS shall notify the OFFICE within 3 business days should closing not occur, as defined in the Merger Agreement.

19. APPLICANT, MSA GROUP, INC., or the DOMESTIC INSURERS shall, no later than 60 days after the closing of the Merger, provide to the OFFICE all of the following:

- a. Complete background information (including Biographical Affidavit, fingerprint cards, and background investigative report) for the MSA Designee;
- b. Executed Amended Bylaws of each of the DOMESTIC INSURERS; and
- c. Complete background information (including Biographical Affidavit, fingerprint cards, and background investigative report) for the replacement Chief Financial Officer and/or Treasurer of NGM, due to the retirement of Edward Kuhl, who retired during the pendency of the Application.

20. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS acknowledge that consummation of the proposed Merger is subject to obtaining the appropriate regulatory approvals in addition to satisfying other terms and conditions of the Merger Agreement. Accordingly, in the event that the Merger Agreement is not consummated, the provisions of this Consent Order shall terminate automatically and have no effect.

21. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS agree that this Consent Order, and the OFFICE's approval of the proposed Merger described herein, shall become null and void should the proposed Merger fail to receive the other requisite regulatory approvals.

22. The DOMESTIC INSURERS shall each maintain an information security program for the security and protection of confidential and proprietary information under their control that complies with all applicable laws and regulations regarding information security. The DOMESTIC INSURERS agree that they shall continually monitor and enhance their information security programs in order to mitigate data security breaches. The DOMESTIC INSURERS further agree that they shall notify the OFFICE within 5 business days of identifying a data breach.

23. The DOMESTIC INSURERS shall, no later than 15 days after the end of the month in which closing of the Merger is completed, file an update to their Holding Company Registration Statements as required by Section 628.801, Florida Statutes, and Rule 69O-143.046, Florida Administrative Code.

24. Pursuant to Sections 628.461(3)(f)-(g), Florida Statutes, APPLICANT or any other party meeting the definition of "ultimate controlling person" as defined in Section 628.801(2), Florida Statutes, shall file with the OFFICE the Enterprise Risk Report required by Section 628.801(2), Florida Statutes, and any and all additional information necessary to evaluate the enterprise risk of the DOMESTIC INSURERS and the DOMESTIC INSURERS' affiliates.

25. Pursuant to Section 624.10(3), Florida Statutes, APPLICANT is a controlling entity and, as such, shall comply with Section 628.461(12)(b), Florida Statutes, should APPLICANT choose to divest its controlling interest in the DOMESTIC INSURERS.

26. Any prior orders, consent orders, or corrective action plans that the DOMESTIC INSURERS have entered into with the OFFICE prior to the closing of the Merger shall apply and remain in full force and effect for the DOMESTIC INSURERS, except where provisions of



such orders, consent orders, or corrective action plans have expired; have been superseded by subsequent orders, consent orders, or corrective action plans; or are inconsistent with this Consent Order.

27. NGM, OLD DOMINION, MSA ASSURANCE, and MSA PROTECTION shall report to the OFFICE, Property & Casualty Financial Oversight, any time that it is named as a party defendant in a class action lawsuit within 15 days after the class is certified. NGM, OLD DOMINION, MSA ASSURANCE, and MSA PROTECTION shall include a copy of the complaint at the time it reports the class action lawsuit to the OFFICE.

28. Executive Order 13224 prohibits any transactions by U.S. persons involving the blocked assets and interests of terrorists and terrorist support organizations. The DOMESTIC INSURERS shall maintain and adhere to procedures necessary to detect and prevent prohibited transactions with those individuals and entities, which have been identified at the Treasury Department's Office of Foreign Assets Control website, <http://www.treas.gov/ofac>.

29. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS affirm that all representations made herein are true and all requirements set forth herein are material to the issuance of this Consent Order.

30. Within 60 days from the date of the execution of this Consent Order, APPLICANT shall submit, or cause to be submitted, to the OFFICE a certification evidencing compliance with all of the requirements of this Consent Order. Any exceptions shall be so noted and contained in the certification. Exceptions noted in the certification shall also include a timeline defining when the outstanding requirements of the Consent Order will be complete. Said certification shall be submitted to the OFFICE via electronic mail and directed to the

attention of the Assistant General Counsel representing the OFFICE in this matter and as named in this Consent Order.

31. The deadlines set forth in this Consent Order may be extended by written approval of the OFFICE. Approval of any deadline extension is subject to statutory or administrative regulation limitations. Additionally, the various reporting requirements and any other provision or requirement set forth in this Consent Order may be altered or terminated by written approval of the OFFICE.

32. Each party to this action shall bear its own costs and fees.

33. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS agree that, upon execution of this Consent Order, failure to adhere to one or more of the terms and conditions contained herein may result, without further proceedings, in the OFFICE suspending, revoking, or taking other administrative action as it deems appropriate upon the Certificates of Authority of the DOMESTIC INSURERS in this state, in accordance with Sections 120.569(2)(n) and 120.60(6), Florida Statutes.

34. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS expressly waive a hearing in this matter, the making of findings of fact and conclusions of law by the OFFICE, and all further and other proceedings herein to which they may be entitled by law or rules of the OFFICE. APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS also hereby knowingly and voluntarily waive all rights to challenge or to contest this Consent Order in any forum available to them, now or in the future, including the right to any administrative proceeding, state or federal court action, or any appeal.

35. The parties agree that this Consent Order shall be deemed to be executed when the OFFICE has signed and docketed a copy of this Consent Order bearing the signatures of the authorized representatives of APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS, notwithstanding the fact that the copy may have been transmitted to the OFFICE electronically. Further, APPLICANT, MSA HOLDINGS, MSA GROUP, INC., and the DOMESTIC INSURERS agree that the signatures of their authorized representatives as affixed to this Consent Order shall be under the seal of a Notary Public.

WHEREFORE, subject to the terms and conditions set forth above, the Application for the merger of MAIN STREET AMERICA GROUP MUTUAL HOLDINGS, INC. with and into AMERICAN FAMILY INSURANCE MUTUAL HOLDING COMPANY, and the indirect acquisition of 100% of the issued and outstanding voting securities of NGM INSURANCE COMPANY, OLD DOMINION INSURANCE COMPANY, MAIN STREET AMERICA ASSURANCE COMPANY, and MAIN STREET AMERICA PROTECTION INSURANCE COMPANY by AMERICAN FAMILY INSURANCE MUTUAL HOLDING COMPANY, pursuant to Sections 628.715 and 628.461, Florida Statutes, is APPROVED.

FURTHER, all terms and conditions contained herein are hereby ORDERED.

DONE and ORDERED this 16 day of August, 2018.



David Altmaier  
David Altmaier, Commissioner  
Florida Office of Insurance Regulation

By execution hereof, AMERICAN FAMILY INSURANCE MUTUAL HOLDING COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind AMERICAN FAMILY INSURANCE MUTUAL HOLDING COMPANY to the terms and conditions of this Consent Order.



[Corporate Seal]

AMERICAN FAMILY INSURANCE MUTUAL  
HOLDING COMPANY

By: [Signature]

Print Name: David C. Holman

Title: Chief Strategy Officer, Secretary

Date: August 16, 2018

STATE OF Wisconsin

COUNTY OF Dane

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 2018

by David C. Holman as Chief Strategy Officer, Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for American Family Insurance Mutual Holding Company  
(Company Name)

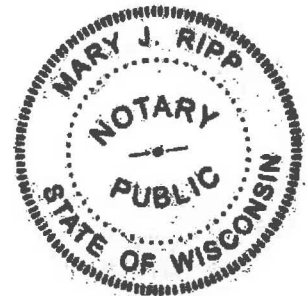
Mary J. Ripp  
(Signature of the Notary)

Mary J. Ripp  
(Print, Type or Stamp Commissioned Name of Notary)

Personally Known X OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

My Commission Expires 2/8/19



By execution hereof, MAIN STREET AMERICA GROUP MUTUAL HOLDINGS, INC. consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind MAIN STREET AMERICA GROUP MUTUAL HOLDINGS, INC. to the terms and conditions of this Consent Order.



MAIN STREET AMERICA GROUP MUTUAL HOLDINGS, INC.

By: B. R. Fox

Print Name: Bruce R. Fox

Title: Secretary

Date: 8/16/2018

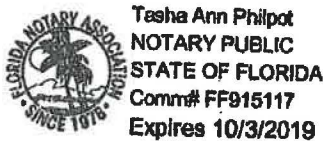
STATE OF FLORIDA

COUNTY OF DUVAL

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 2018

by Bruce R. Fox as Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for Main Street America Group Mutual Holdings, Inc.  
(Company Name)



Tasha Ann Philpot  
(Signature of the Notary)

Tasha Philpot  
(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ☒ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

My Commission Expires 10/3/2019



By execution hereof, MAIN STREET AMERICA GROUP, INC. consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind MAIN STREET AMERICA GROUP, INC. to the terms and conditions of this Consent Order.



[Corporate Seal]

MAIN STREET AMERICA GROUP, INC.

By: B. R. Fox

Print Name: Bruce R. Fox

Title: Secretary

Date: 8/16/2018

STATE OF FLORIDA

COUNTY OF Duval

The foregoing instrument was acknowledged before me this 16th day of August, 2018

by Bruce R. Fox as Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for Main Street America Group, Inc.  
(Company Name)



Tasha Ann Philpot  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# FF915117  
Expires 10/3/2019

Tasha Philpot  
(Signature of the Notary)

Tasha Philpot  
(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ☒ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

My Commission Expires 10/3/2019

By execution hereof, NGM INSURANCE COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind NGM INSURANCE COMPANY to the terms and conditions of this Consent Order.



[Corporate Seal]

NGM INSURANCE COMPANY

By: B. R. Fox

Print Name: Bruce R. Fox

Title: Senior Vice President, General Counsel & Secretary

Date: 8/16/2018

STATE OF FLORIDA

COUNTY OF DUVAL

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 2018

by Bruce R. Fox as Senior Vice President, General Counsel & Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for NGM Insurance Company.  
(Company Name)



Tasha Ann Philpot  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# FF915117  
Expires 10/3/2019

Tasha Philpot

(Signature of the Notary)

Tasha Philpot

(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced \_\_\_\_\_

My Commission Expires 10/3/2019

By execution hereof, OLD DOMINION INSURANCE COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind OLD DOMINION INSURANCE COMPANY to the terms and conditions of this Consent Order.



[Corporate Seal]

OLD DOMINION INSURANCE COMPANY

By: [Signature]

Print Name: Bruce R. Fox

Title: Secretary

Date: 8/16/2018

STATE OF FLORIDA

COUNTY OF DUVAL

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 2018

by Bruce R. Fox as Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for Old Dominion Insurance Company  
(Company Name)



Tasha Ann Philpot  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# FF915117  
Expires 10/3/2019

[Signature]  
(Signature of the Notary)

Tasha Philpot  
(Print, Type or Stamp Commissioned Name of Notary)

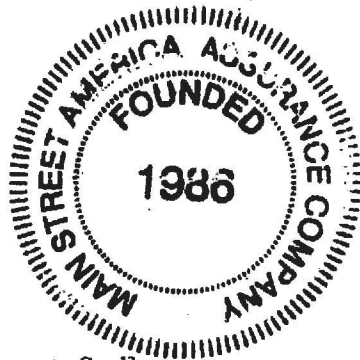
Personally Known ☒ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

My Commission Expires 10/3/2019



By execution hereof, MAIN STREET AMERICA ASSURANCE COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind MAIN STREET AMERICA ASSURANCE COMPANY to the terms and conditions of this Consent Order.



[Corporate Seal]

MAIN STREET AMERICA ASSURANCE  
COMPANY

By: Bruce R. Fox

Print Name: Bruce R. Fox

Title: Secretary

Date: 8/16/2018

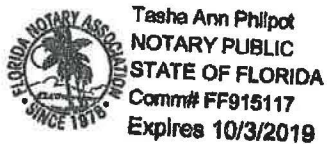
STATE OF FLORIDA

COUNTY OF DAVAL

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 2018

by Bruce R. Fox as Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for Main Street America Assurance Company  
(Company Name)



Tasha Philpot  
(Signature of the Notary)

Tasha Philpot  
(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced \_\_\_\_\_

My Commission Expires 10/3/2019

By execution hereof, MAIN STREET AMERICA PROTECTION INSURANCE COMPANY consents to entry of this Consent Order, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that he or she has the authority to bind MAIN STREET AMERICA PROTECTION INSURANCE COMPANY to the terms and conditions of this Consent Order.



[Corporate Seal]

MAIN STREET AMERICA PROTECTION  
INSURANCE COMPANY

By: B. R. Fox

Print Name: Bruce R. Fox

Title: Secretary

Date: 8/16/2018

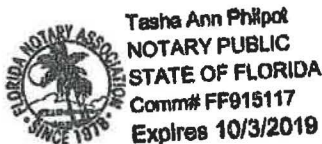
STATE OF FLORIDA

COUNTY OF DWAL

The foregoing instrument was acknowledged before me this 16<sup>th</sup> day of August, 2018

by Bruce R. Fox as Secretary  
(name of person) (type of authority, e.g. officer, trustee, attorney in fact)

for Main Street America Protection Insurance Company  
(Company Name)



Tasha Philpot  
(Signature of the Notary)

Tasha Philpot  
(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ☒ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

My Commission Expires 10/3/2019

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Main Street America Assurance Company  
Main Street America Protection Insurance Company  
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