

CARNEY
BADLEY
SPELLMAN

Timothy J. Parker

FILED

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2012 SEP 13 17:13:11

Timothy J. Parker
Partner, P.S.
Chief Hearing Officer

September 13, 2012

VIA EMAIL AND U.S. MAIL

Ms. Patricia Petersen
Chief Hearing Officer
Office of the Insurance Commissioner
P.O. Box 40255
Olympia, WA 98504-0255

Re: Sagicor Life Insurance Company Acquisition of PEMCO Life Insurance Company
No. 12-0203

Dear Ms. Petersen:

Pursuant to your request, enclosed is the Texas Department of Insurance's February 14, 2012, no further action letter relating to Sagicor's notice regarding movement of records to locations outside Texas.

Very truly yours,

CARNEY BADLEY SPELLMAN, P.S.

Timothy J. Parker

TJP:cw

Enclosure

cc: Ms. Robin Aronson (w/enclosure)
Mr. Ronald Pastuch (w/enclosure)
Mr. James T. Odiorne (w/enclosure)

Pursuant to U.S. Treasury Circular 230, this communication is not intended or written by Carney Badley Spellman, P.S. to be used, and it may not be used by you or any other person or entity, for the purpose of (i) avoiding any penalties that may be imposed on you or any other person or entity under the United States Internal Revenue Code, or (ii) promoting, marketing, or recommending to another party any transaction or matter that is addressed herein.



Texas Department of Insurance

Financial Regulation Division—Financial Analysis Section, Mail Code 303-1A
333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104
512-322-5002 telephone • 512-322-5082 fax • www.tdi.texas.gov

February 14 2012

Ms. Kasi M. Moeskau
Sneed, Vine & Perry
901 Congress Avenue
Austin, Texas 78701

RE: Filing Reviewed

| | |
|-----------------------------|--------------------------------|
| Company name: | Sagicor Life Insurance Company |
| Affiliate: | |
| Description of transaction: | Chapter 803 Application |
| Date Filing Received: | December 1, 2011 |
| HCS#: | 40322 |

Dear Ms. Kasi M. Moeskau:

The referenced transaction was reviewed in accordance with the provisions of the Texas Insurance Code and Texas Administrative Code. The Commissioner will take no further action on the transaction at this time.

The Texas Department of Insurance is no longer stamping the documents with a Holding Company Section (HCS) number. Please maintain a copy of your filing and this letter for review by the Texas Department of Insurance Examiners.

More information concerning the requirements of holding company filings and related fees can be found on our website at:
<http://www.tdi.texas.gov/financial/faholdingcomp.html>.

Sincerely,

A handwritten signature in black ink, appearing to read "Chris Osuna".

Chris Osuna
Phone: 512-322-5004
Email: chris.osuna@tdi.state.tx.us

SNEED, VINE & PERRY
A PROFESSIONAL CORPORATION
ATTORNEYS AT LAW
901 CONGRESS AVENUE
AUSTIN, TEXAS 78701

TELEPHONE (512) 476-6955

TELECOPIER (512) 476-1825

Writer's Direct Dial:
(512) 494-3190

Writer's e-mail address:
kmoeskau@sneedvine.com

November 30, 2011

VIA Hand Delivery

Chris Osuna MC 303-1A
Financial Analysis and Examinations
Texas Department of Insurance
Hobby 3, 3rd Floor, Room 320-C
333 Guadalupe
Austin TX 78701

RECEIVED

NOV 30 2011

**TEXAS DEPT. OF INSURANCE
MAILROOM**

Re: Sagicor Life Insurance Company
TDI No. 2655

Notice of Intent of Eligible Insurer to Move its Books, Records, Accounts, and/or
Principal Office(s) Outside the State of Texas

Dear Mr. Osuna:

Please find enclosed the following:

1. Form TDI/BR-93, Notice of Intent of Eligible Insurer to Move Its Books, Records, Accounts, and/or Principal Office(s) Outside the State of Texas; and
2. Copy of the Transaction Fee Transmittal Form and our firm check in the amount of \$150.00 filed with the Cashier's Office in payment of the required filing fee for moving books, records, accounts and/or principal office(s).

If you have questions or need additional information, please contact me.

Sincerely,



Kasi M. Moeskau

Enclosures

cc: Bart Catmull



Texas Department of Insurance
 Financial, Financial Analysis, Mail Code 303-1A
 333 Guadalupe St. • P. O. Box 149104, Austin, Texas 78714-9104
 512-322-5002 telephone • 512-322-6082 fax • www.tdi.state.tx.us

FEE TRANSMITTAL FORM

Division Code 541

| | |
|---|---|
| Mail payments with this form and copy of cover letter to: Texas Department of Insurance Attention: Cashier MC 9999 P.O. Box 149104, Austin, Texas 78714-9104 | Physical Delivery of payments & letter to: Texas Department of Insurance- Cashier's Office Tower I, 8th Floor Cashier's Window 333 Guadalupe St, Austin, Texas 78701 |
|---|---|

Mail the Transaction/Form B filing documents with a copy of the check and a copy of this completed form to the Financial Analysis Division address in the above letterhead.

Date: **November 30, 2011**

Attach copy of cover letter

Required:

Name of Insurance Company(s): Saglor Life Insurance Company
 (or attach list)

TDI#(s): 2855

NAIC#(s): 60445

Name of payor (If different): Sneed, Vine & Perry, P.C.

Assigned Analyst (if known): Chris Osuna MC 303-1A

Contact Name: Karl M. Moeskau

Phone: 512/494-3190

E-Mail: kmoeskau@sneedvine.com

FAX#: 512/476-1825

Check#: 35322

Amt: \$ 150.00

Comments: Notice of Intent of Eligible Insurer to Move its Books, Records, Accounts, and/or Principal Office(s) Outside the State of Texas

| Type of Transaction/Form | Type | CRE# | Fee Amount | | Quantity | Total |
|---------------------------------|-----------|------|------------|-------|----------|----------|
| Other HMO Filing Fees | Info only | 0557 | \$50 | | x | |
| Form A | HMO | 0553 | \$500+ | | x | |
| | Life | 0261 | \$500+ | | x | |
| | P&C | 0309 | \$500+ | | x | |
| Form B | HMO | 0554 | \$150 | \$75 | x | |
| | Life | 0262 | \$150 | \$75 | x | |
| | P&C | 0310 | \$150 | \$75 | x | |
| Other Holding Co. Transactions: | HMO | 0555 | \$250 | \$125 | x | |
| | Life | 0263 | \$250 | \$125 | x | |
| | P&C | 0311 | \$250 | \$125 | x | |
| Move Books & Records (Sec. 803) | HMO | 0558 | \$150 | \$75 | x | |
| | Life | 0279 | \$150 | \$75 | x | 1 150.00 |
| | P&C | 0328 | \$150 | \$75 | x | |

* 1/2 fee applies to insurers with gross premium receipts of less than \$450,000 based on preceding annual statement. (TAC Rule 7.1301 Regulatory Fees)

<http://www.tdi.state.tx.us/forms/finanalysis/fin483cashier.pdf>

35322

SNEED, VINE & PERRY
A PROFESSIONAL CORPORATION
OPERATING ACCOUNT
- P.O. BOX 1409
AUSTIN, TEXAS 78767

DATE
11/30/11

AMOUNT
*****\$150.00

PAY *ONE HUNDRED FIFTY AND 00/100 DOLLARS*

TO THE
ORDER
OF

TEXAS DEPARTMENT OF INSURANCE
STATE OF TEXAS

FROST NATIONAL BANK
AUSTIN, TEXAS 78752
30-9-1140

Sandra Lugo
TWO SIGNATURES REQUIRED IF OVER \$500.00

ED Details on back

⑈035322⑈ ⑆114000093⑆ 591060872⑈

**GUIDELINES FOR APPROVAL FOR MOVING BOOKS AND RECORDS OUT OF THE
STATE OF TEXAS UNDER
TEXAS INSURANCE CODE SECTION 803 (formerly ARTICLE 1.28)**

Requirements:

- Eligible Insurer must comply with Section 803.002 (formerly Art. 1.28(1)(b));
- Eligible insurer must be in compliance with the HC Act, Section 823 (formerly Article 21.49-1);
- Eligible Insurer must complete Form TDI BR-93 or equivalent language from 28 TAC § 7.25;
- We must receive one application per domestic company;
- PO Box locations are not acceptable for physical address;
- Form TDI/SOP and Form TDI/SOP-CP must be completed appointing a person in Texas other than the Commissioner of Insurance to accept service of process on their behalf;
- If the ultimate controlling person is an individual, Form TDI/SOP-CP does not have to be completed;
- These forms must be signed by President and Secretary or Asst. Secretary and must be notarized;
- These forms must contain a zip code for Attorney-for-Service;
- Filing fee of \$150.00 if Section 803 (formerly Art. 1.28) application filed alone; if filed with agreement, then there is an additional \$250.00 filing fee (or half that amount, if gross premium receipts for prior year are less than \$450,000).
-
- Section (e) of § 7.25 must be completed if agreement with affiliate is already on file;
- Sections (e) & (f) of § 7.25 must be completed if no previous agreement on file;
- Sections (e),(f) & (g) of § 7.25 must be completed when an Agreement is with a non-affiliate;

NOTES: If non-affiliated entity is an agency or a MGA, no Section 803 (formerly Article 1.28) application is required pursuant to Section 803.001 – 803.004 (formerly Article 1.28 § (1)(a)).

No Section 803 (formerly Art. 1.28) applications can be approved if any legal actions are pending or if company is not in compliance with Holding Company Act.

There is a 30-day deemer for this type of filing. The 30 days commences once TDI determines that all required items have been filed and that the application is complete. If additional information is needed, it must be requested within 30 days of notice.

Amended Section 803 (formerly Article 1.28) Applications

A. If the previous Section 803 (formerly Art. 1.28) application is being amended to just change locations (same affiliates but at different locations), the following must be filed:

- File notice of intent (Section d of TDI BR93 Form)
- Filing fee

B. If the previous Section 803 (formerly Art. 1.28) application is being amended to reflect new or different affiliates and their locations, the following must be filed:

- Complete Notice of Intent (all parts) (§ 7.25 (d)(e)(f) and (g – if applicable)
- Filing fee

All notice of intent filings should be mailed to Financial Analysis and Examinations, MC 303-1A, Texas Department of Insurance, P.O. Box 149099, Austin, Texas 78714-9099.

FORM TDI/BR-93
28 TEXAS ADMINISTRATION CODE § 7.25
NOTICE OF INTENT OF ELIGIBLE INSURER
TO MOVE ITS BOOKS, RECORDS, ACCOUNTS, AND/OR
PRINCIPAL OFFICE(S) OUTSIDE THE STATE OF TEXAS

- 7.25 (d) Contents of Notice of Intent to Relocate Records
(e) Additional Information Required for the Relocation and Possession of Records with a Person Other than the Eligible Insurer
(f) Agreement Between Eligible Insurer and Person to Maintain Records
(g) Requirements and Restrictions Applicable to Nonaffiliated Person Maintaining Records

(d) Contents of Notice of Intent to Relocate Records

1. Sagicor Life Insurance Company

Name of Company

2. Street address of Eligible Insurer's principal office(s). *(If there is more than one principal office, identify the activities that are performed at each principal office as an attachment to this form).*

4343 N. Scottsdale Road, Suite 300, Scottsdale, Arizona 85251 – accounting, tax, administration, human resources, compliance, legal, systems, new business, sales, underwriting, policyowner customer service and claims.

4010 W. Boy Scout Blvd., Suite 800, Tampa, Florida 33607 – corporate, new business, agent appointment, underwriting, investments and accounting.

Number & Street (Do not use a P.O. Box)

City, State, Zip

3. Street address of the location(s) of the Eligible Insurer's records before the proposed relocation of records. *(If there is more than one location, identify the records that are maintained at each location as an attachment to this form).*

4343 N. Scottsdale Road, Suite 300 Scottsdale, Arizona 85251

4. Street address of the Eligible Insurer's principal office(s) after the proposed relocation of records. *(If there is more than one principal office, identify the activities that will be performed at each principal office as an attachment to this form).*

4343 N. Scottsdale Road, Suite 300, Scottsdale, Arizona 85251 – accounting, tax, administration, human resources, compliance, legal, systems, new business, sales, underwriting, policyowner customer service and claims.

4010 W. Boy Scout Blvd., Suite 800, Tampa, Florida 33607 – corporate, new business, agent appointment, underwriting, investments and accounting.

5. Street address of the proposed location(s) of the Eligible Insurer's records and a detailed description of the records that will be maintained at these location(s).

4010 Boy Scout Boulevard, Tampa, Florida 33607 – Investment, corporate and agent records will be maintained at this location. All other records will be maintained at 4343 N. Scottsdale Road as previously reported.

6. Mailing address of Eligible Insurer after relocation for Texas Department of Insurance purposes.

4343 N. Scottsdale Road, Suite 300 Scottsdale, Arizona 85261

7. The anticipated effective date of the proposed relocation of the Eligible Insurer's records:
Upon approval
-

8. Description of the Eligible Insurer's affiliation with an Insurance Holding Company System or Health Maintenance Organizations or Health Care Providers.

Sagicor Life Insurance Company is a member of the Sagicor Financial Corporation holding company system.

9. If Eligible Insurer is affiliated with an Insurance Holding Company System, a statement that the Eligible Insurer has made the necessary filings required by Insurance Code Section 823 (formerly Article 21.49-1). **The Eligible Insurer has made the necessary filings required by Insurance Code Section 823.**

10. If Eligible Insurer is affiliated with an Insurance Holding Company System, a statement that the Eligible Insurer is in compliance with the Insurance Code Section 823 (formerly Article 21.49-1). **The Eligible Insurer is in compliance with the Insurance Code Section 823.**

11. If Eligible Insurer is a Health Maintenance Organization that is not affiliated with an Insurance Holding Company System, but is affiliated with other Health Maintenance Organizations or Health Care Providers, the Health Maintenance Organization must furnish the information as set forth in 28 TEX. ADMIN. CODE § 7.210. **Not Applicable.**

12. Description of any actual, proposed, or contemplated financial involvement with respect to the relocation of the records by an officer, director or employee or a person who is the beneficial owner, directly or indirectly, of 10% or more of the voting securities of the Eligible Insurer or affiliated Insurance Holding Company System or Health Maintenance Organization. **None.**

13. An analysis of the benefits to the Eligible Insurer anticipated as a result of the relocation of the records, including the impact on the location being abandoned. **The Eligible Insurer will realize administrative efficiencies since these records will be maintained in the same office as the employees responsible for preparation and oversight of such documents. No location will be abandoned. The current location of the records to be relocated will continue to be a location for other company records.**

14. Description of the impact of the relocation of the records on policyholders and claimants. **There will be no impact on policyholders and claimants as a result of the relocation.**

15. A Service of Process form executed by the Eligible Insurer (Form TDI/SOP). Not Applicable.
16. A Service of Process form executed by a controlling person of the Eligible Insurer (Form TDI/SOP-CP). Not Applicable.
17. If the records of the Eligible Insurer will be maintained by a person other than the Eligible Insurer, state the name of the person who will be maintaining the records of the Eligible Insurer. Not applicable.
18. If a person is named in paragraph 17 above, provide the information in subsection (e) below.

Note: The Texas Department of Insurance may require additional information to complete application.

Sagicor Life Insurance Company
Name of Company

By: [Signature]

Title: COO

Sworn to this 29th day of November, 2011.

Roberta L Honeycutt
Notary Public, State of Florida
Roberta L Honeycutt
Printed Name of Notary
My Commission Expires: 12/22/2011

