

RISK PURCHASING GROUP FORM

APPOINTMENT OF ATTORNEY TO ACCEPT SERVICE AND DESIGNATION

The _____ (“the Group”), a risk purchasing group which chartered under the laws of the State of _____, having notified the Insurance Commissioner of Oklahoma of its intention to do business in Oklahoma as a risk purchasing group pursuant to the Federal Liability Risk purchasing Act of 1986, hereby appoints the Insurance Commissioner of Oklahoma, any successor in office, and any authorized deputy its true and lawful attorney, in for the State of _____, upon whom all legal documents or process in any proceeding against it may be served. Such service of process shall be of the same legal force and validity as if served personally upon the Group.

The Group designates:

Name _____

Address _____

City _____ State _____ Zip Code _____

as its officer, agent or other person to whom shall be forwarded all legal documents or process served upon the Insurance Commissioner of Oklahoma, any successors in office, or any authorized deputy, for the Group. This designation shall continue in full force and effect until superseded by a new written designation filed with the Insurance Commissioner of Oklahoma.

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This appointment and designation is made pursuant to a resolution by the Group’s governing body authorizing it, and a certified copy of the resolution is attached hereto. This appointment shall be binding upon any person or corporation which as successor acquires the Group’s assets or assumes its liabilities, by merger or consolidation or otherwise.

This appointment may be withdrawn only upon a written notice of termination and, in any event, shall not be terminated by the Group or its successor so long as any contracts or liabilities or duties arising out of contracts entered into by the Group while it was doing business in this State are in effect.

IN WITNESS OF THIS APPOINTMENT AND DESIGNATION, the Group, in Accordance with the resolution of its Board of Directors duly passed on _____, 20____, has affixed its corporate seal, and caused the same to be subscribed and attested in its name by its President and Secretary, at the City of _____ in the State of _____ on _____, 20____.

Name of Risk Purchasing Group

By: _____ President

_____ Secretary

State of _____)

ss:

County of _____)

Sworn before me this _____ day of _____, 20____.

Notary Public _____ Notary # _____

My Commission Expires _____