



STATE OF MAINE
Bureau of Insurance
Financial Analysis Division

34 State House Station
Augusta, ME
04333-0034

Reorganization/Demutualization Requirements for Insurance Companies
(Please note: this form is not for Insurance Agencies)

Regarding the company's Reorganization/Demutualization, please submit the following documentation along with the Bureau checklist to the attention of Barbra Garboski in the Financial Analysis Division:

- Effective date of transaction.
- Form B -- Insurance Holding Company System registration statement, which is the amendment disclosing the transaction.
- Certified copy of Decision and Order or approval from the domiciliary regulator.
- Certificate of Compliance.
- Policyholder information (the material that will be sent to all policyholders notifying them of the reorganization/demutualization and name change).
- Request for a name reservation, which reserves the name for one year. (\$25.00 fee)
- Certified copy of the amended by-laws reflecting the name change. (\$25.00 fee)
- Certified copy of the Amended Articles of Incorporation reflecting the name change. (\$25.00 fee)
- *Financial statements reflecting capital common stock requirements.
- Current Maine Certificate of Authority reflecting prior name in order for us to re-issue a new Certificate of Authority reflecting new name.

If you need further assistance please contact me by phone at (207) 624-8489, by Email at Barbra.L.Garboski@maine.gov or by mail at the address in our letterhead.

Please make check payable to: Treasurer, State of Maine.

This form and other forms along with more information about the Bureau, including our Maine Laws and Regulations can be found on our web site at www.maine.gov/insurance.

****The "new stock company" must maintain \$2.5 million in capital common stock to retain its Authority to write business in Maine in accordance with Title 24-A, M.R.S.A., § 410.***

For your convenience, we have prepared a checklist coversheet (next page) to include with your filing.



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Attention: Barbra Garboski
(207) 624-8489
Barbra.I.garboski@maine.gov

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Augusta, ME
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REORGANIZATION/DEMUTUALIZATION CHECKLIST

**PLEASE CHECK OFF, NUMBER AND ATTACH THIS CHECKLIST WITH YOUR
REORGANIZATION/DEMUTUALIZATION**

Company Name: _____

<input checked="" type="checkbox"/>	Reorganization/Demutualization Requirements
	1. Effective date of transaction.
	2. Form B -- Insurance Holding Company System registration statement, which is the amendment disclosing the transaction.
	3. Certified copy of Decision and Order or approval from the domiciliary regulator.
	4. Certificate of Compliance.
	5. Policyholder information (the material that will be sent to all policyholders notifying them of the reorganization/demutualization).
	6. Amended by-laws reflecting the name change. (\$25.00 fee).
	7. Amended Articles of Incorporation to reflect the name change. (\$25.00 fee).
	8. Financial statements reflecting capital common stock requirements. (refer to Title 24-A MRSA §410)
	9. Current Maine Certificate of Authority reflecting prior name.

Please explain any open items

Make check payable to: Treasurer, State of Maine

Return to Barbra Garboski at the address above for regular mail or for courier delivery send to: 124 Northern Avenue, Gardiner, ME 04345

If you have any questions with this filing please contact Barbra Garboski at the telephone number or email address above.