

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

STATE OF ALASKA

DEPARTMENT OF COMMERCE, COMMUNITY AND ECONOMIC

DEVELOPMENT

DIVISION OF INSURANCE

550 W. 7<sup>th</sup> AVENUE, SUITE 1560

ANCHORAGE, ALASKA 99501-3567

Order No. SR 12-06 (a)	)	Suspension of Certificate
In the Matter of	)	of Authority No. F-862;
<b>ABILITY INSURANCE</b>	)	Order under the Provisions
<b>COMPANY</b>	)	Of AS 21.09.140 (a)(3)
NAIC NO. 71471	)	
_____	)	

**WHEREAS**, a Certificate of Authority to transact the business of insurance in the State of Alaska was issued to **ABILITY INSURANCE COMPANY**, domiciled in the State of Nebraska.

**WHEREAS**, on December 12, 2012 the Director of the Nebraska Department of Insurance placed **ABILITY INSURANCE COMPANY** under an Order of Supervision as the Nebraska Department of Insurance had reasonable cause to believe that the company was in such condition as to render the continuation of its business hazardous to its policyholders and the general public.

STATE OF ALASKA  
 DEPARTMENT OF COMMERCE, COMMUNITY AND ECONOMIC  
 DEVELOPMENT  
 DIVISION OF INSURANCE  
 550 W. 7<sup>th</sup> AVENUE, SUITE 1560  
 ANCHORAGE, ALASKA 99513-3567  
 PHONE: (907) 269-7900

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29

**IT IS HEREBY ORDERED**, pursuant to the provisions of AS 21.09.140 (a) (3), that Certificate of Authority No. F-862 issued to **ABILITY INSURANCE COMPANY** to transact the business of insurance in the State of Alaska shall be suspended until such time as it has returned to full compliance with Alaska Statutes unless terminated sooner as permitted by statute. Pursuant to AS 21.09.160 (b), this suspension shall automatically suspend the authority of all of its agents to act as agents of **ABILITY INSURANCE COMPANY**. **IT IS FURTHER ORDERED** that during this period of suspension, **ABILITY INSURANCE COMPANY** shall continue to file the annual statement and pay fees and any taxes due as provided by AS 21.09.170 (b).

**IT IS FURTHER ORDERED** that Certificate of Authority No. F-862 will continue to be held in safekeeping by **ABILITY INSURANCE COMPANY** until such time as this order is replaced by an Order of Revocation, the Certificate of Authority is surrendered or the Certificate of Authority expires.

This Order is effective the 8<sup>th</sup> day of January 2013

Dated this 8<sup>th</sup> day of January 2013.



BRET S. KOLB, DIRECTOR  
DIVISION OF INSURANCE

CERTIFICATE OF DISTRIBUTION

I hereby certify that copies of the documents(s) listed below were distributed to the listed parties and files by mail or by personal delivery. An original document has been forwarded to the insurer at the address listed and another original is in the Juneau office of the Division of Insurance for official filing.

Order signed by Director of Insurance on January 8, 2013, Order # SR 12-06 (a), in the Matter of **ABILITY INSURANCE COMPANY**

Frederick Yosua, Jr., President  
Ability Insurance Company  
222 South 15<sup>th</sup> Street, Suite 12028  
Omaha, Nebraska 68102

Bruce R. Ramage, Director  
Nebraska Department of Insurance  
P.O. Box 82089  
Lincoln, Nebraska 68501-2089

Donald C. Thomas  
Alaska Life and Health Insurance Guaranty Association  
1007 W. Third Ave. , Suite 400  
Anchorage, Alaska 99501

Agents of record: None

Financial Examiner's file of the Division of Insurance in Anchorage.

Date: January 8, 2013

Signed: Carla Riley