



STATE OF HAWAII
INSURANCE DIVISION
DEPARTMENT OF COMMERCE & CONSUMER AFFAIRS
P. O. BOX 3614
HONOLULU, HAWAII 96811-3614
335 MERCHANT ST., 2ND FLOOR
HONOLULU, HAWAII 96813

(Name of Purchasing Group)

**POWER OF ATTORNEY TO ACCEPT SERVICE OF PROCESS
AND LEGAL DOCUMENTS**

KNOW ALL MEN BY THESE PRESENTS:

That _____, a

(Name of purchasing group)

_____, organized & existing under the laws of

(Describe corporate status)

_____ (“Group”) and authorized to transact the business of

(Name of domiciliary state)

a “Purchasing Group”, as that term is defined in the Federal Liability Risk Retention Act of 1986 (15 U. S. C. Section 3901 et seq.), as amended from time to time, and desiring to transact the business of a purchasing group within the State of Hawaii and to do so in conformity with the laws of said State, does, by these presents, make, constitute, designate and appoint the insurance commissioner of the State of Hawaii or any official who shall hereafter be charged with supervision of the business of insurance in Hawaii, and his successors in office, or any person duly designated by the commissioner to accept service of process or legal documents, the true and lawful attorney of such Group in and for the State of Hawaii, upon whom all lawful process or legal documents, whether mesne or final, in any action or proceeding against said Group may be served, and said Group, in consideration of the privilege of doing business in the State of Hawaii as aforesaid, does hereby stipulate and agree that any lawful process or legal document against said Group which may be served upon said attorney, shall be of the same legal force and validity, and shall be as valid and binding upon said Group, as if such process or legal document has been served upon said Group in any other manner provided by the laws of the said State of Hawaii. Any claim or error by reason of such acceptance of service is hereby

waived. This appointment shall be irrevocable and shall be binding upon the Group, and its successors and assigns. The Group waives the right to revoke this authorization or power granted to the insurance commissioner of the State to accept service on its behalf. Said authority to represent said Group for the acceptance of service of process or legal document shall continue in full force and effect so long as there is in force any contract or certificate insuring any member of the Group in the State of Hawaii or so long as any liability shall remain outstanding against said Group within the State of Hawaii.

The Group hereby designates the following person as the person to whom legal documents and process against it served shall be forwarded by the insurance commissioner:

IN WITNESS WHEREOF, the Group has caused its corporate name to be hereunto subscribed by its duly authorized officer, attested by its secretary, and its corporate seal to be hereto affixed, at the _____, on the _____ day of _____, 20____, all in accordance with a resolution of its Board of Directors (certified copy whereof is hereto attached) duly adopted on the _____ day of _____, 20____.

(CORPORATE SEAL)

By _____
Its:

Attest:

Secretary

NOTE: A COMPLETED, APPROPRIATELY SIGNED, AND SEALED POWER OF ATTORNEY FORM AND A CORRESPONDING BOARD OF DIRECTORS RESOLUTION ADOPTING SUCH POWER OF ATTORNEY ARE NECESSARY TO COMPLETE THIS PORTION OF THE FILING PROCESS REQUIRED BY THE STATE OF HAWAII.