

**BEFORE THE DIVISION OF INSURANCE
DEPARTMENT OF LABOR AND REGULATION
STATE OF SOUTH DAKOTA**

**IN THE MATTER OF MILLERS
INSURANCE COMPANY**

**ORDER REVOKING
CERTIFICATE OF AUTHORITY**

MILLERS INSURANCE COMPANY (hereinafter "the Company"), whose address of record is Po Box 2269, Fort Worth, Tx 761132269, is an insurance company holding a Certificate of Authority to transact business in the State of South Dakota.

The South Dakota Division of Insurance has received information that the Company's Certificate of Authority has been suspended or revoked by its state of domicile.

Pursuant to SDCL §§ 58-6-44(4) and 58-6-45, a hearing is not required to revoke the Certificate of Authority of an insurer where the insurer's certificate of authority to transact insurance therein is suspended or revoked by its state of domicile.


Therefore, pursuant to SDCL § 58-6-45, it is hereby ORDERED that the Company's Certificate of Authority is revoked in South Dakota as of the date of the Director's signature below; and it is further

ORDERED that, pursuant to SDCL § 58-6-61, this Order automatically revokes authority of any insurance producers to act as insurance producers of the Company in this state; and it is further

ORDERED that this Order may not be used by any person for any competitive purpose or used in a manner that would violate SDCL Chapter 58-33.

This Order may be appealed to the Circuit Court and South Dakota Supreme Court pursuant to SDCL Chapter 1-26.

Dated this 11th day of January, 2016.



Larry Deiter, Director
South Dakota Division of Insurance
Department of Labor and Regulation

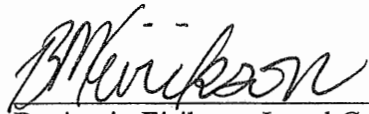
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NOTICE OF ENTRY OF ORDER

NOTICE IS HEREBY GIVEN that attached hereto is a true and correct copy of the Order Revoking Certificate of Authority, a final administrative decision as entered by Larry Deiter, Director of the South Dakota Division of Insurance, Department of Labor and Regulation, dated January 11, 2016.

Dated this 11 day of January, 2016.



Benjamin Eirikson, Legal Counsel
South Dakota Division of Insurance
124 S. Euclid Ave., 2nd Floor
Pierre, SD 57501

**BEFORE THE DIVISION OF INSURANCE
DEPARTMENT OF LABOR AND REGULATION
STATE OF SOUTH DAKOTA**

**IN THE MATTER OF MILLERS
INSURANCE COMPANY**

CERTIFICATE OF SERVICE

I, Benjamin Eirikson, the undersigned, do hereby certify that on this 11 day of January, 2016, a true and correct copy of the above Order Revoking Certificate of Authority and Notice of Entry of Order with respect to the above-entitled action was sent U.S. Certified Mail thereon, to the following:

MILLERS INSURANCE COMPANY
PO BOX 2269
FORT WORTH, TX 761132269

I, Benjamin Eirikson, the undersigned, do further certify that on this ___ day of January, 2016, a true and correct copy of the above Order Suspending Certificate of Authority and Notice of Entry of Order with respect to the above-entitled action was sent U.S. Certified Mail thereon, to any appointed insurance producers of the Company pursuant to SDCL §§ 58-6-50 and 58-6-60.

Dated this 11 day of January, 2016 in Pierre, South Dakota.



Benjamin Eirikson, Legal Counsel
South Dakota Division of Insurance
124 S. Euclid Ave., 2nd Floor
Pierre, SD 57501