FILED

JUN 2 9 2023

INSURANCE REGULATION
Docketed by:



OFFICE OF INSURANCE REGULATION

MICHAEL YAWORSKY COMMISSIONER

IN THE MATTER OF:

CASE NO.: 310776-23

CASTLE KEY INDEMNITY COMPANY

CONSENT ORDER

THIS CAUSE came on for consideration as the result of CASTLE KEY INDEMNITY COMPANY's ("CASTLE KEY") failure to timely file its "Commercial and Personal Residential Property Supplemental Quarterly Report" with the FLORIDA OFFICE OF INSURANCE REGULATION ("OFFICE") as required by Section 624.424(10)(a), Florida Statutes, and Rule 690-137.009, Florida Administrative Code. Following a complete review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the OFFICE hereby finds as follows:

- 1. The OFFICE has jurisdiction over the subject matter and the parties herein.
- 2. CASTLE KEY is an insurer authorized to transact business in Florida and subject to regulation by the OFFICE, pursuant to the Florida Insurance Code.
- 3. Rule 69O-137.009, Florida Administrative Code, requires each insurer that issues personal lines or commercial lines residential property insurance policies to file Form OIR-D0-1185, "Quarterly Supplemental Reporting," with the OFFICE on a quarterly basis in conjunction with financial reports.

- 4. CASTLE KEY failed to file its first quarter 2023 "Quarterly Supplemental Reporting" form with the OFFICE, which was due on May 15, 2023.
- 5. On May 23, 2023, CASTLE KEY filed its first quarter 2023 "Quarterly Supplemental Reporting" form with the OFFICE.
- 6. Section 624.4211(1), Florida Statutes, provides that if the OFFICE finds that one or more grounds exist for the discretionary revocation or suspension of a certificate of authority issued under Chapter 624, Florida Statutes, the OFFICE may, in lieu of such revocation or suspension, impose a fine upon the insurer.
- 7. The OFFICE finds that CASTLE KEY has violated Sections 624.424(1) and 624.424(10)(a), Florida Statutes, and Rule 690-137.009, Florida Administrative Code. The OFFICE deems the violation as non-willful, warranting a fine in the amount of \$1,000 for the violation pursuant to Section 624.4211(2), Florida Statutes.
- 8. CASTLE KEY agrees that within 10 days of the execution of this Consent Order, CASTLE KEY shall pay an administrative fine in the amount of \$1,000 U.S. Dollars ("USD") to the OFFICE. CASTLE KEY shall send its payment to the address reflected on the invoice attached hereto as "Exhibit A."
- 9. Any deadlines, reporting requirements, other provisions, or requirements set forth in this Consent Order may be altered or terminated by written approval of the OFFICE. Such approval must be requested in writing prior to any proposed deviation from the terms of this Consent Order.
- 10. CASTLE KEY agrees that, upon execution of this Consent Order, failure to adhere to one or more of the terms and conditions contained herein may result, without further proceedings, in the OFFICE suspending, revoking, or taking other administrative action as it

deems appropriate upon CASTLE KEY's certificate of authority in this state in accordance with Sections 120.569(2)(n) and 120.60(6), Florida Statutes.

- 11. CASTLE KEY additionally agrees that, upon execution of this Consent Order, failure to adhere to one or more of the terms and conditions contained herein may be considered willful and subject CASTLE KEY to the appropriate penalties and fines.
- 12. CASTLE KEY additionally agrees that any future violations of the statutes or rules named herein may be deemed willful, subjecting CASTLE KEY to penalties as the OFFICE deems appropriate.
- 13. CASTLE KEY expressly waives a hearing in this matter, the making of findings of fact and conclusions of law by the OFFICE, and all further and other proceedings herein to which it may be entitled by law or rules of the OFFICE. CASTLE KEY hereby knowingly and voluntarily waives all rights to challenge or to contest this Consent Order in any forum available to it, now or in the future, including the right to any administrative proceeding, state or federal court action, or any appeal.
 - 14. Except as noted above, each party to this action shall bear its own costs.
- 15. The parties agree that this Consent Order shall be deemed to be executed when the OFFICE has signed and docketed a copy of this Consent Order bearing the notarized signature of the authorized representative of CASTLE KEY.

WHEREFORE, the agreement between CASTLE KEY INDEMNITY COMPANY and the FLORIDA OFFICE OF INSURANCE REGULATION, the terms and conditions of which are set forth above, is APPROVED.

All terms and conditions contained herein are hereby ORDERED.

DONE AND ORDERED this 29 day of June, 2023.

Michael Yaworsky, Commissioner

Office of Insurance Regulation

By execution hereof, CASTLE KEY INDEMNITY COMPANY, consents to entry of this Consent Order, agrees without reservation to all the above terms and conditions, and shall be bound by all provisions herein. The undersigned represents that they have the authority to bind CASTLE KEY INDEMNITY COMPANY, to the terms and conditions of this Consent Order.

	CASTLE KEY INDEMNITY COMPANY kathryn R. brey By:
[Corporate Seal]	Print Name: Kathryn R. Irey
	Title: Chief Executive Officer
	Date:06/27/2023
STATE OF Virginia	
COUNTY OF Hampton City	
The foregoing instrument was acknown or \(\mathbb{\text{\sigma}} \) online notarization, this \(\frac{27th}{3} \)	owledged before me by means of □ physical presence day of _ June 2023, by Kathryn R. Irey
as Chief Executive Officer	for Castle Key Indemnity Company
(type of authority: e.g., officer, trustee, a	attorney-in-fact) (company name)
Natasha A Stromley	Matashet stromby
Electronic Notary Public	(Signature of the Notary)
Natasha A Stromley Electronic Notary Public Commonwealth of Virginia Registration No. 7678888 Ny Commission Expires: 09/30/2024	Natasha A Stromley Commission #: 7678888
My Commission Expires: 09/30/2024	(Print, Type or Stamp Commissioned Name of Notary)
	Remotery notarized online using two-way audio-video communication
Personally Known OR Pr	roduced Identification X
Type of Identification Produced	Oriver's License
My Commission Expires	9/30/2024

COPIES FURNISHED TO:

ROBERT LAWRENCE ZEMAN GENERAL COUNSEL Allstate Insurance Company 3100 Sanders Road, Suite 201 Northbrook, Illinois 60062 Telephone: (847) 402-2745 Email: Bob.Zeman@allstate.com

SHERYL PARKER
DEPUTY COMMISSIONER
Market Regulation
Florida Office of Insurance Regulation
200 East Gaines Street
Tallahassee, Florida 32399

ALEXANDER CIUPALO, ESQ. ASSISTANT GENERAL COUNSEL Florida Office of Insurance Regulation 200 East Gaines Street Tallahassee, Florida 32399 Telephone: (850) 413-4187 Email: Alex.Ciupalo@floir.com

EXHIBIT A



MICHAEL YAWORSKY
INSURANCE COMMISSIONER

INVOICE

ROBERT LAWRENCE ZEMAN ATTN: GENERAL COUNSEL ALLSTATE INSURANCE COMPANY 3100 SANDERS ROAD, SUITE 201 NORTHBROOK, ILLINOIS 60062

INVOICE DATE:

June 20, 2023

INVOICE #:

OIR 23-024116

Invoice requested by Alex Ciupalo for matter 310776-23. Invoice prepared by K. Embry (850-413-5002).

Description	Units	Rate	Price
1105J: FINE	1.00	\$1,000.00	\$1,000.00
P&C Market Regulation			
1249J: ADMINISTRATIVE COSTS	1.00	\$1,000.00	\$1,000.00
Legal Case 310776-23			

TOTAL:

\$2,000.00

PAYMENT DUE UPON RECEIPT:

\$2,000.00

Pay by Wire (ACH) Instructions:

- 1. Do not alter the amount due
- 2. Include the OIR invoice number in the body of the wire payment
- 3. Include company name

Bank: WELLS FARGO, N.A.

1 INDEPENDENT DRIVE, JACKSONVILLE, FL 32202

Account Title: STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DFS -

OFFICE OF INSURANCE REGULATION – LOCATION 4300430

Account Number: 4834783854

ACH and Incoming Wire and ABA/Routing Number: 121000248

Pay by Check Instructions:

- 1. Do not alter the amount due
- 2. Make check payable to the Florida Office of Insurance Regulation
- 3. Include a copy of this invoice to ensure your payment is applied correctly

Mail check and a copy of this invoice to:

Florida Department of Financial Services

Revenue Processing Section

P.O. Box 6100

Tallahassee, FL 32314-6100

Please contact Lisa Stinson at (850) 413-2458 or Lisa. Stinson@floir.com if you have any questions regarding your invoice.