



**Florida Office of Insurance Regulation**

**DISCLAIMER OF CONTROL - INVESTMENT COMPANIES**

I, \_\_\_\_\_, the undersigned, on behalf of \_\_\_\_\_ (entity disclaiming control) represent that said entity holds the shares of \_\_\_\_\_ ("company"), solely for investment purposes, and does not and will not exercise or attempt to exercise any influence or control, either directly or indirectly, over the business operations, affairs, or activities of the company, or any other entity owned or controlled by the company and licensed by the Florida Office of Insurance Regulation ("Office"), without the advance written consent of the Office. I further represent that \_\_\_\_\_ (entity disclaiming control) does not have, and will not seek, influence or representation on the Board of Directors of the company, or equivalent organizational body.

I understand that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in Section 775.082 or Section 775.083, Florida Statutes.

By: \_\_\_\_\_

Witnessed By: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_