FILED

JUL 09 2025

INSURANCE REGULATION
Docketed by:

OFFICE OF INSURANCE REGULATION

MICHAEL YAWORSKY
COMMISSIONER

Index: OIR 2025-96
CASE NO.: 400724-24-CO

IN THE MATTER OF:

ATHENE ANNUITY AND LIFE COMPANY
_____/

CONSENT ORDER

THIS CAUSE came for consideration upon the filing of a request by ATHENE ANNUITY AND LIFE COMPANY ("ATHENE"), which was formerly known as Athene Annuity & Life Assurance Company ("Athene Assurance"), to use previously approved Athene Assurance forms with the new name without re-filing same for approval pursuant to section 627.410, Florida Statutes. Following a complete review of the record, and upon consideration thereof, and being otherwise fully advised in the premises, the FLORIDA OFFICE OF INSURANCE REGULATION ("OIR"), hereby finds as follows:

1. The OIR has jurisdiction over the subject matter and the parties herein.

2. ATHENE is a foreign life and health insurer domiciled in the state of Iowa and is authorized to transact insurance business in Florida.

3. Effective October 11, 2024, Athene Assurance merged with and into ATHENE. All contractual obligations of Athene Assurance under a Policy, Certificate, Contract, or Agreement previously issued in Florida will now be provided by ATHENE. In all other respects, the coverage under a Policy, Certificate, Contract, or Agreement previously issued in Florida remains the same.

4. In conjunction with the request to use previously approved Athene Assurance forms, ATHENE has filed with the OIR a "Merger Endorsement" (form number END-AADE (09/24)), which reflects the merger of Athene Assurance with and into ATHENE. The endorsement is attached as Exhibit A.

5. As a material condition to approval of the above request, ATHENE, by execution of this Consent Order, certifies to the OIR that all policy forms previously utilized by Athene Assurance in Florida comply with applicable provisions of the Florida Insurance Code. ATHENE further certifies that the only change required to achieve compliance prospectively is the substitution of the name ATHENE in lieu of Athene Assurance and the only change in the forms is the name, address, or logo. If the above certification is not correct, ATHENE acknowledges that such misrepresentations may be considered willful, and penalties assessed accordingly.

6. There are no previously approved Group Life Policies in the name of Athene Assurance impacted by the merger. ATHENE will not write any new business on any Athene Assurance form not listed on Exhibit B. Additionally, the company is prohibited from writing any new business on any policy forms listed in Exhibit C.

7. ATHENE shall mail to each of its insureds a copy of the Merger Endorsement. ATHENE may continue to sell the old policy forms, with the Merger Endorsement, for a period of 90 days after the date this Consent Order is executed by the OIR. After 90 days from the date this Consent Order is executed by the OIR, ATHENE shall only sell policy forms containing the new company name and is not authorized to sell previously approved policies containing the old information with a merger and name change endorsement affixed.

8. ATHENE shall pay costs in the amount of $3,000 U.S. Dollars within 30 days of the date this Consent Order is executed by the OIR. ATHENE shall send payment for the administrative costs to the payment address on the attached invoice.

9. ATHENE shall continue to comply with all statutes and applicable rules of the OIR governing form filings and rate filings.

10. ATHENE agrees that any deadlines, reporting requirements, other provisions, or requirements set forth in this Consent Order may be altered or terminated by written approval of the OIR. Such written approval by the OIR is subject to statutory or administrative regulation limitations.

11. ATHENE 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 OIR suspending, revoking, or taking other administrative action as it deems appropriate upon ATHENE's Certificate of Authority in this state in accordance with sections 120.569(2)(n) and 120.60(6), Florida Statutes.

12. ATHENE expressly waives a hearing in this matter, the making of findings of fact and conclusions of law by the OIR, and all further and other proceedings herein to which it may be entitled by law or rules of the OIR. ATHENE hereby knowingly and voluntarily waives all rights of any kind 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.

13. ATHENE affirms that all requirements set forth herein are material to the issuance of this Consent Order.

14. Except as set forth in this Consent Order, each party to this section shall bear its own costs and fees.

15. The parties agree that this Consent Order shall be deemed to be executed when the OIR has executed a copy of this Consent Order bearing the signature of the authorized representative of ATHENE, notwithstanding the fact that the copy may have been transmitted to the OIR electronically. Further, ATHENE agrees that the signature of its authorized representative, as affixed to the Consent Order, shall be under the seal of a Notary Public.

WHEREFORE, the agreement between ATHENE ANNUITY AND LIFE COMPANY and the FLORIDA OFFICE OF INSURANCE REGULATION, the terms and conditions of which are set forth above, is APPROVED, and the request to use the previously approved Athene Annuity & Life Assurance Company forms, without re-filing same for approval pursuant to section 627.410 is APPROVED.

FURTHER, all terms and conditions contained herein are hereby ORDERED.

DONE AND ORDERED this 8 day of JULY, 2025.

Michael Yaworsky, Commissioner
Office of Insurance Regulation

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

ATHENE ANNUITY AND LIFE COMPANY

(Corporate Seal-if any)

By: _____

Print Name: Blaine Doerrfeld

Title: SVP + Secretary

Date: 5/27/25

STATE OF Iowa

COUNTY OF Dallas

The foregoing instrument was acknowledged before me by means of ☑ physical presence or ☐ online notarization, this 27 day of May 2025, by Blaine Doerrfeld (name of person signing for company) as SVP + Secretary (type of authority; e.g., officer, trustee, attorney in fact) for Athene Annuity and Life Company (company name)

_____
(Signature of the Notary)

JENNIFER ARCENEAUX
Commission Number 840102
My Commission Expires
06/13/2025

Jennifer Arceneaux
(Print, Type or Stamp Commissioned Name of Notary)

Personally Known ✓ OR Produced Identification _____

Type of Identification Produced _____

My Commission Expires: 06/13/2025

COPIES FURNISHED TO:

GRANT KVALHEIM
PRESIDENT
Athene Annuity and Life Company
7700 Mills Civic Parkway
West Des Moines, IA 50266
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JAMES DUNN
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Life & Health Product Review
Office of Insurance Regulation
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CARSON GAINES
ASSISTANT GENERAL COUNSEL
Office of Insurance Regulation
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Tallahassee, Florida 32399
Telephone: (850) 413-4139
Email: Carson.Gaines@floir.com

Exhibit A

[Attached to and made a part of Policy No. [123456789] Insured: [John Doe]]

Athene Annuity and Life Company

Home Office: [7700 Mills Civic Parkway, West Des Moines, Iowa 50266]
Administrative Office: [7700 Mills Civic Parkway, West Des Moines, Iowa 50266]
Administrative Phone Number: [888-266-8489]

MERGER ENDORSEMENT

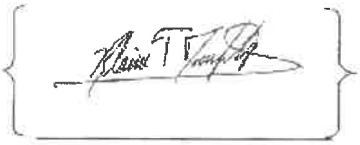
This Endorsement is made part of and should be attached to your policy, contract or certificate.

In accordance with the merger by and between ATHENE ANNUITY & LIFE ASSURANCE COMPANY and ATHENE ANNUITY AND LIFE COMPANY effective October 11, 2024, and pursuant to the necessary regulatory approvals, your insurance company is now ATHENE ANNUITY AND LIFE COMPANY (the "Company") and the home office is located at [7700 Mills Civic Parkway, West Des Moines, Iowa 50266]. The state of domicile of the Company is Iowa.

All references in your policy, contract or certificate to "ATHENE ANNUITY & LIFE ASSURANCE COMPANY" are hereby changed to "ATHENE ANNUITY AND LIFE COMPANY." No terms, conditions or benefits of your policy, contract or certificate have changed. ATHENE ANNUITY AND LIFE COMPANY is responsible for all benefits payable under your policy, contract or certificate. Your rights as an owner are not affected.

If you have any questions, you may call or write to the Company at the Administrative Office listed above. All future premium payments, notices, claims, actions, and any other correspondence with the Company should be sent to the Administrative Office.

Signed for the Company at its offices in West Des Moines, Iowa.



[Blaine T. Doernfeld]
[Secretary]

Exhibit B

Athene Annuity and Life Company In-force Policy Form Listing				
Form Number	Form Name	Type	Approval Date	Approval Number
AN3005FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	10/28/1998	98.12735
AN3008FL	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	2/29/2000	00-721
AN3006FL	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	2/29/2000	00-720
AN3007-FL	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	2/29/2000	00-719
IIC-PEIA-302-10-0	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	9/17/2002	02-09595
IIC-PEIA-302-10-4	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	6/14/2002	02-05466
IIC-PEIA-302-10-8	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	1/15/2003	02-14514
IIC-PEIA-0508-10B(FL)-CP	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	12/17/2010	10-21075
IIC-PMYGA-1107(FL)-CP	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	12/17/2010	10-21075
IIC-PEIA-603-10-0	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	8/8/2003	03-10369
IIC-PEIA-302-10-4	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	6/14/2002	02-05466
AN3015FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	12/14/2004	04-12242
AN3021FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	8/4/2006	06-08774
AN3022FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	8/4/2006	06-08774
AN3023FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	8/4/2006	06-08774
AN3024FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	8/27/2007	08-15399
MYGL-C-FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	7/6/2012	12-09486
MYGC-C-FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	8/10/2012	12-12362
BFIA-C-FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	9/10/2012	12-12606
BFIA-C10-FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	9/10/2012	12-12606
SPIA-C	Single Premium Indexed Annuity	Individual Non-Variable Annuities	9/26/2012	12-15501
APPL-C-FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	1/31/2013	12-20390
APPL-EL-FL	Single Premium Deferred Annuity	Individual Non-Variable Annuities	1/31/2013	12-20390
IIC-PEIA-603-10-0	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	8/8/2003	03-10369
IIC-PEIA-603-10-8	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	4/9/2004	04-03072
IIC-PEIA-603-10-4	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	4/9/2004	04-03072

ATHENE ANNUITY AND LIFE COMPANY

LIFE FORMS STATE LIST – FLORIDA

Name of Form	Form Number	Type of Form	FL Log Number	Approval Date
Whole Life Insurance Policy	AAL1-FL 12-13	Contract	13-16064	9/13/2013
Waiver of Premium Rider	AAL-R1 12-13	Rider	13-16064	9/13/2013
Individual Life Insurance – Application for Conversion or Exchange	AAL-APP1-FL	Application	13-16064	9/13/2013
Policy Schedule	AAL1S-NF21	Policy Schedule	21-026520	10/7/2021
Authorization to Obtain and Disclose Information (HIPAA)	Athene-HIPAA2-FL	Disclosure	19-112853	4/16/2019
Application for Policy Change or Reinstatement	CFA3001PCR(02-12)FL	Application	12-05195	4/19/2012
Application for Insurance Part II	App-P2(06-04)FL	Application	04-03889	5/10/2004
Tobacco Questionnaire	048-1172i 0302 FL	Questionnaire	03-13154	10/28/2003
Application for Reinstatement	421 (REV. 7/14)	Application	14-16802	9/29/2014

Exhibit C

Athene Annuity and Life Company In-force Policy Form Listing – No Approval Date/Approval Number				
Form Number	Form Name	Type	Approval Date	Approval Number
FPA (8-75)	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	N/A	N/A
FPDA-NQ(12-81)	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	N/A	N/A
LS088	Single Premium Deferred Annuity	Individual Non-Variable Annuities	N/A	N/A
L7005	Flexible Premium Annuity	Individual Non-Variable Annuities	N/A	N/A
L7008	Single Premium Deferred Annuity	Individual Non-Variable Annuities	N/A	N/A
L7078FL	Flexible Premium Deferred Annuity	Individual Non-Variable Annuities	N/A	N/A
VLS0FL	Flexible Premium Adjustable Variable Life Insurance Policy	Individual Non-Variable Annuities	N/A	N/A
048-327(1-84)	Term Life Policy	Group Non-Variable Life Insurance	N/A	N/A
I-88291	Term Life Policy	Group Non-Variable Life Insurance	N/A	N/A
L3014	Term Life Policy	Group Non-Variable Life Insurance	N/A	N/A
L-339	Term Life Policy	Group Non-Variable Life Insurance	N/A	N/A
L-490	Term Life Policy	Group Non-Variable Life Insurance	N/A	N/A