

Applicant Name: _____

FEIN: _____

**IRREVOCABLE CONSENT TO JURISDICTION OF THE COMMISSIONER
AND NEW JERSEY COURTS**

THE STATE OF _____ }

}KNOW ALL MEN BY THESE PRESENTS:

COUNTY OF _____ }

That _____ a "MEWA" of
(name of applicant)

_____ is filing herewith its application for
(domiciliary city and state)

initial registration as a Multiple Employer Welfare Arrangement in the State of New Jersey.

That, upon issuance of said registration by the Commissioner of Banking and Insurance, MEWA shall consent to the jurisdiction of the Commissioner of Banking and Insurance and all New Jersey courts in relation to any transactions or other activity subject to regulation under N.J.S.A. 17B:27C-1 et seq. and all other applicable New Jersey statutes or rules; and

That such consent to the jurisdiction of the Commissioner of Banking and Insurance and the New Jersey courts shall be and remain irrevocable for as long as MEWA possesses registration from the Commissioner of Banking and Insurance or engages in business as a Multiple Employer Welfare Arrangement in or from the State of New Jersey, and until all contractual obligations in the State of New Jersey are satisfied.

Witness our hands and the impress of the seal of said MEWA, this _____ day
of _____, 20_____.

(Corporate Seal--if applicable)

Attest:

President
(or authorized representative)

Secretary
(or authorized representative)