

MODIFICATION TO 2012 REGULATORY SETTLEMENT AGREEMENT

ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA

5701 Golden Hills Drive
Minneapolis, Minnesota 55416

REVIEW PERIOD

January 1, 2001 through December 31, 2008

NAIC #90611

An agreement to modify the Regulatory Settlement Agreement, effective on August 24, 2012, is entered into by and between Allianz Life Insurance Company of North America (the “Company”); the Lead States of Iowa, Florida, Minnesota and Missouri; and the Participating States of Alabama, Alaska, Arizona, Arkansas, Colorado, Connecticut, Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wyoming and the District of Columbia. The Company, the Lead States and the Participating States are collectively referred to as the “Parties”.

Recitals

The Parties entered into a Regulatory Settlement Agreement with an effective date of August 24, 2012 (the “Regulatory Settlement Agreement”).

Subsection 5a of Section X on page 31 of the Regulatory Settlement Agreement provides that the Parties may amend the Regulatory Settlement Agreement by written agreement of the Parties.

Section V of the Regulatory Settlement Agreement sets forth the terms of a Remediation Plan (the “Remediation Plan”) for the review and, if appropriate, remediation of certain Annuities which were issued during the Review Period and, with respect to which, a Complaint had been previously filed and reviewed.

Under the Remediation Plan, subsection 2.e of Section V, provides the process for such review, including the materials to be considered in the Review File:

ii. The Review File for each Remediation Annuity shall include: (1) all documents and other materials concerning a Remediation Annuity maintained in the ordinary course of business by Allianz or received from its agents; (2) any materials timely and properly submitted by a Remediation Annuity owner; and (3) any materials gathered by Allianz or Participating States in response to or relating to the Remediation Annuity owner’s submissions.

iii. Based solely on the Review File, the Reviewer shall find the complaint either “Justified” or “Not Justified” in accordance with the Evaluation Factors, Evaluation Guidelines, the materials described above for the Review File and other applicable provisions of the Remediation Plan.

Subsection 3.a. of Section V contains the Evaluation Guidelines for Evaluating Complaints.

a. A complaint shall be deemed “Justified” where the information, considered as a whole, as weighed against the Evaluation Factors, supports the complaint by a preponderance of the evidence, (which shall mean for purposes of the Review Process a complaint in which the persuasive and convincing force of all of the information, considered in light of the Evaluation Factors, supports the complaint) including a preponderance of the evidence of one or both of the following: (a) the Contract was unsuitable for the original owner under the circumstances under applicable insurance laws and regulations or Allianz’s business practices as of the date of issuance of the Remediation Annuity contract in the jurisdiction where the Contract was sold; or (b) there was a misrepresentation or omission by the agent and/or Allianz in connection with the solicitation, sale or issuance of the Remediation Annuity.

b. A complaint shall be deemed “Not Justified” where the information considered as a whole, fails to support either the misrepresentation or omission or the unsuitability assertions in a complaint by a preponderance of the evidence.

As part of the RSA, owners of Remediation Annuities requested review of 888 complaints (“Review Population”) pursuant to the RSA. Company Reviewers determined that 199 of them were “Justified” and offered some relief pursuant to the RSA. A sample of 109 (“Review Sample”) complaints was reviewed by an audit firm (“AGI”). AGI agreed with Company Reviewers on 61 of the determinations and disagreed on 48 of the determinations.

The Parties desire to modify certain terms of the Regulatory Settlement Agreement.

The terms of this modification agreement (“Modification Agreement”) are as follows:

Agreement

The fourth paragraph of subsection 6 of Section V on page 26 of the Regulatory Settlement Agreement is hereby amended. As amended, the paragraph states:

In the event the disagreement between the Auditor and the Reviewer cannot be resolved, Allianz and the Lead States will select an independent third party to review all 48 of the Review Files selected as part of the Review Sample upon which the Reviewer(s) and the Auditor have disagreed (“Disputed Review Files”). The independent third party shall consider the Evaluation Guidelines and Evaluation Factors set forth in the Regulatory Settlement Agreement, documents and materials contained in each Review File as provided by Allianz to the Auditor, the document containing the conclusions reached by the Reviewer(s) and the final AGI Review Template document for each of the Disputed Review Files provided by the Auditor to Allianz.

The independent third party shall be directed to review whether the determination of the Reviewer(s) with respect to each Disputed Review File is not supported by the documented facts and the review process, Evaluation Guidelines and Evaluation Factors set forth in this Article V, and shall prepare a brief written summary of its conclusions.

If the independent third party concludes that the Reviewer(s) determination was in error on more than 23% of the Disputed Review Files selected as part of the Review Sample (10% of the Review Sample of 109, i.e. 12 or more of the 48 Disputed Review Files), then Allianz shall re-review all Review Files from the Review Population previously deemed “Not Justified” in a manner consistent with the conclusions of the independent third party. Such re-review shall not be subject to any further audit and/or review. The number of Allianz Reviewers’ determinations deemed by the independent third party to be in error will be added to the 21 Review Sample complaints that the Allianz Reviewers had deemed “Justified.” The sum of these numbers, divided by the number in the Review Sample (109), will establish a Relief Ratio. If upon re-review the total number of Review Files offered some relief under the RSA, divided by the Review Population (888) is

greater than or equal to the Relief Ratio for the Review Sample, Allianz will be deemed to have fully and finally completed and complied with all of its obligations under the RSA.

If the independent third party concludes that the Reviewer(s)' determination was in error on 23% or less of the Disputed Review Files selected as part of the Review Sample (10% or less of the Review Sample of 109, i.e. 11 or less of the 48 Disputed Review Files), Allianz will not be required to take any further action and will be deemed to have fully and finally completed and complied with all of its obligations under the RSA.

The Lead States are authorized to approve any necessary procedures agreed to between Allianz and the Lead States to implement these provisions.

All terms and phrases in this Modification Agreement have the meanings given to them in the Regulatory Settlement Agreement.

Except as expressly provided in this Modification Agreement, all the terms and provisions of the Regulatory Settlement Agreement remain in full force and effect, and are fully binding on the Parties.

The Regulatory Settlement Agreement and this Modification Agreement contain the entire understanding between the Parties regarding the subject matter hereof.


This Modification Agreement may be executed in counterparts. A true and correct copy of this modification shall be enforceable the same as an original.

IN WITNESS WHEREOF THE PARTIES HAVE EXECUTED THIS MODIFICATION AGREEMENT AS OF THE DATE SET FORTH AFTER EACH OF THEIR NAMES.


(Signature pages immediately follow.)

ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA


I, Gretchen Cepek, hereby affirm that I am the General Counsel and Secretary of Allianz Life Insurance Company of North America and have authority to execute this Modification Agreement on behalf of Allianz Life Insurance Company of North America.


Gretchen Cepek
1-26-18
Date

STATE OF FLORIDA – FLORIDA OFFICE
OF INSURANCE REGULATION

BY: 
Commissioner
1/30/18
Date

STATE OF IOWA - IOWA INSURANCE
DIVISION

BY: 
Commissioner
1/31/18
Date

STATE OF MISSOURI – MISSOURI
DEPARTMENT OF INSURANCE
FINANCIAL INSTITUTIONS AND
PROFESSIONAL REGISTRATION

BY: _____
Director

Date

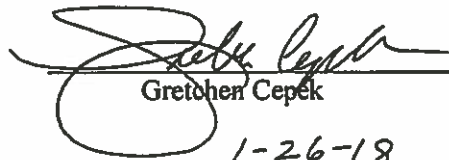
STATE OF MINNESOTA - MINNESOTA
DEPARTMENT OF COMMERCE

BY: _____
Commissioner

Date

ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA

I, Gretchen Cepek, hereby affirm that I am the General Counsel and Secretary of Allianz Life Insurance Company of North America and have authority to execute this Modification Agreement on behalf of Allianz Life Insurance Company of North America.



Gretchen Cepek

1-26-18

Date

STATE OF FLORIDA – FLORIDA OFFICE OF INSURANCE REGULATION

STATE OF IOWA - IOWA INSURANCE DIVISION

BY: _____
Commissioner

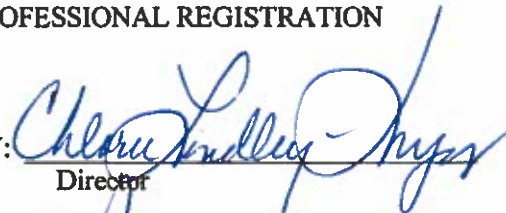
Date

BY: _____
Commissioner

Date

STATE OF MISSOURI – MISSOURI DEPARTMENT OF INSURANCE FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION

STATE OF MINNESOTA - MINNESOTA DEPARTMENT OF COMMERCE

BY: 
Director

31 January 2018

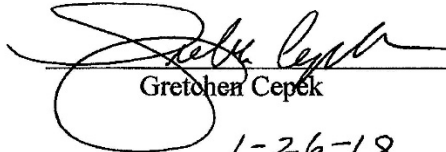
Date

BY: _____
Commissioner

Date

ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA

I, Gretchen Cepék, hereby affirm that I am the General Counsel and Secretary of Allianz Life Insurance Company of North America and have authority to execute this Modification Agreement on behalf of Allianz Life Insurance Company of North America.



Gretchen Cepék

1-26-18

Date

STATE OF FLORIDA – FLORIDA OFFICE
OF INSURANCE REGULATION

STATE OF IOWA - IOWA INSURANCE
DIVISION

BY: _____
Commissioner

Date

BY: _____
Commissioner


Date

STATE OF MISSOURI – MISSOURI
DEPARTMENT OF INSURANCE
FINANCIAL INSTITUTIONS AND
PROFESSIONAL REGISTRATION

STATE OF MINNESOTA - MINNESOTA
DEPARTMENT OF COMMERCE

BY: _____
Director

Date

BY: 

Deputy Commissioner

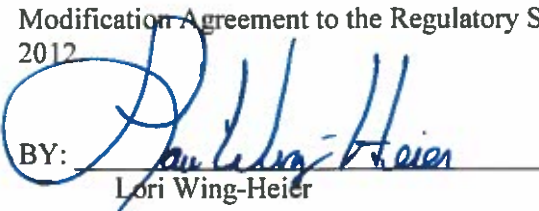
2-1-18

Date

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The State of Alaska Division of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: _____



Lori Wing-Heier

JURISDICTION: Alaska

TITLE: Director

DATE: Jan 22, 2018

MAILING ADDRESS: PO Box 110805

Alaska 99811-0805

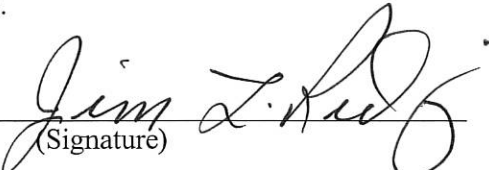
Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

State of Alabama does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: ALABAMA

TITLE: COMMISSIONER OF INSURANCE

DATE: 1/26/2018

MAILING ADDRESS: 201 MONROE STREET

SUITE 501

MONTGOMERY, AL 36104

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The **Arkansas Insurance Department** does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
Allen Kerr

JURISDICTION: Arkansas
TITLE: Commissioner
DATE: January 19, 2018


MAILING ADDRESS: 1200 West Third
 Little Rock, AR 72201

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Arizona Department of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Arizona Department of Insurance

TITLE: Interim Director

DATE: January 18, 2018

MAILING ADDRESS: Arizona Department of Insurance

2910 N. 44th Street, #210


Phoenix, AZ 85018

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Colorado Division of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 

(Signature)

JURISDICTION: Colorado Division of Insurance

TITLE: Commissioner of Insurance

DATE: December 15, 2017

MAILING ADDRESS: Stephanie Clement

1560 Broadway Ste 850

Denver CO 80202

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Connecticut Insurance Department does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: Katherine L. Wade
(Signature)

JURISDICTION: Connecticut

TITLE: Commissioner

DATE: 1-17-18

CONTACT: Kurt Swan, Director
Market Conduct Division

MAILING ADDRESS: P.O. Box 816
Hartford, CT 06142-0816

OVERNIGHT MAIL ADDRESS: 153 Market Street, 7th Floor
Hartford, CT 16103

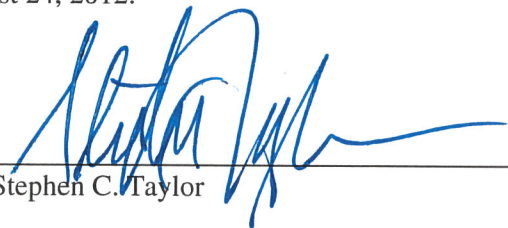
Please return this form to:

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Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
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Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

District of Columbia Department of Insurance, Securities and Banking does hereby adopt, agree, and
(Jurisdiction)

approve this Modification Agreement to the Regulatory Settlement Agreement that was effective
August 24, 2012.

BY: 
Stephen C. Taylor

TITLE: Commissioner

JURISDICTION: District of Columbia

DATE: 1/24/2018

MAILING ADDRESS: District of Columbia Department of Insurance, Securities and Banking
1050 First Street, NE, Suite #801
Washington, DC 20002

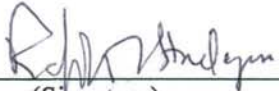
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Iowa Insurance Division
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601 Locust Street, 4th Floor
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Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The State of Georgia does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Office of Insurance and Safety Fire Commissioner, Georgia

TITLE: Commissioner

DATE: January 23, 2018

MAILING ADDRESS: 2 MLK Jr. Drive
620 West Tower
Atlanta GA 30334

ATTN: Margaret Witten

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

IDAHO does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: IDAHO

TITLE: Director

DATE: 1/4/18

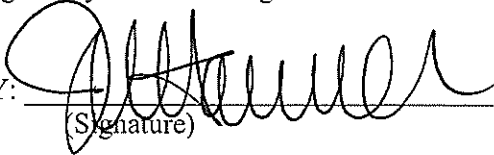
MAILING ADDRESS: 700 W. State Street
Boise Idaho
83702

Please return this form to:

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Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
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Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The State of Illinois does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Illinois _____

TITLE: Director- Illinois Department of Insurance

DATE: _____

MAILING ADDRESS: 320 West Washington

Springfield, IL 62767

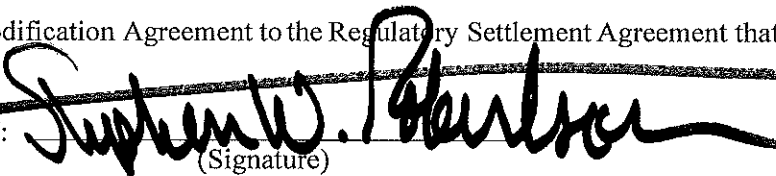
Please return this form to:

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Iowa Insurance Division
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601 Locust Street, 4th Floor
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Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

_____ Indiana _____ does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Indiana

TITLE: Commissioner

DATE: January 22, 2018

MAILING ADDRESS: Indiana Department of Insurance
311 W Washington St, Suite 103
Indianapolis, IN 46204

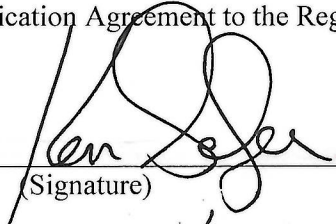
Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Kansas does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Kansas Insurance Dept.

TITLE: Commissioner of Insurance

DATE: 01/22/2018

MAILING ADDRESS: 420 SW 9th St.
Topeka, KS 66612


Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Commonwealth of Kentucky does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: 
(Signature)

JURISDICTION: Kentucky

TITLE: Chief Market Conduct Examiner

DATE: January 23, 2018

MAILING ADDRESS: Kentucky Department of Insurance
215 West Main Street
Frankfort, Kentucky 40601

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Louisiana Department of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature) James T. Denelon

JURISDICTION: State of Louisiana

TITLE: Commissioner of Insurance

DATE: 1/16/18

MAILING ADDRESS: 1702 N. Third Street

Baton Rouge, LA 70802

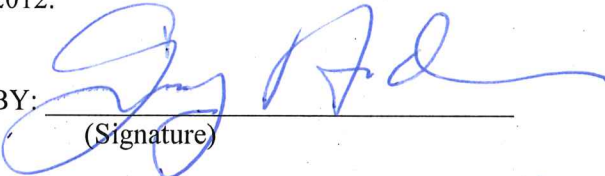
Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Massachusetts does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Massachusetts

TITLE: Commissioner of Insurance

DATE: 1/24/2018

MAILING ADDRESS: 1000 Washington St., Suite 810
Boston, MA 02118


Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Maryland Insurance Administration does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: 
(Signature)

JURISDICTION: Maryland Insurance Administration

TITLE: Associate Commissioner for Compliance & Enforcement

DATE: January 18, 2018


MAILING ADDRESS: Erica J. Bailey, Associate Commissioner
Compliance & Enforcement Unit
Maryland Insurance Administration
200 St. Paul Place, Suite 2700
Baltimore, MD 21202

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Maine Bureau of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 

(Signature)

JURISDICTION: Maine Bureau of Insurance

TITLE: Superintendent of Insurance

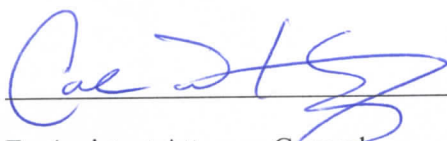
DATE: January 19, 2018

MAILING ADDRESS: Maine Bureau of Insurance

34 State House Station

Augusta, ME 04333-0034

For the Office of Attorney General of the State of Maine

BY: 

TITLE: Assistant Attorney General

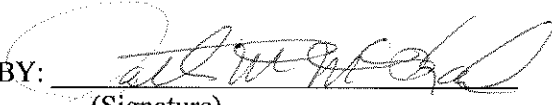
DATE: January ~~19~~₂₂, 2018

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Michigan does hereby adopt, agree, and approve this
(Jurisdiction)
Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: 
(Signature)

JURISDICTION: Michigan

TITLE: Director

DATE: 1/22/18

MAILING ADDRESS: Department of Insurance and Financial Services
Personal and Confidential: Randall S. Gregg
Office of General Counsel
Mason Building, 8th Floor
530 W. Allegan St.
Lansing, MI 48933

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Mississippi Insurance Department does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: Mark Haine
(Signature)

JURISDICTION: Mississippi Insurance Department

TITLE: Deputy Commissioner

DATE: 1-23-18

MAILING ADDRESS: Mississippi Insurance Department

P.O. Box 79

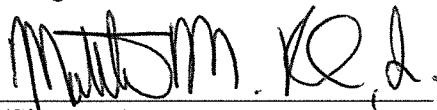
Jackson, MS 39205

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Montana State Auditor, Commissioner of Securities and Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Montana

TITLE: Commissioner

DATE: 1-25-2018

MAILING ADDRESS: 840 Helena Ave
Helena, MT 59601


Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The North Carolina Department of Insurance does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: 
(Signature)

JURISDICTION: The North Carolina Department of Insurance

TITLE: Senior Regulatory Compliance Analyst

DATE: January 11, 2018

MAILING ADDRESS: 1201 Mail Service Center, Raleigh, NC 27699-1201

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

North Dakota does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 

(Signature)

JURISDICTION: North Dakota

TITLE: Commissioner

DATE: 4/29/18

MAILING ADDRESS: North Dakota Insurance Department

600 East Boulevard Avenue

Bismarck, ND 58505

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Nebraska Department of Insurance does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: Bruce R. Ronge
(Signature)

JURISDICTION: Nebraska Department of Insurance

TITLE: Director

DATE: 1/10/2018

MAILING ADDRESS: 941 O Street, Suite 400

PO Box 82089

Lincoln, NE 68501-2089

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The New Hampshire Insurance Department does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: _____

(Signature)

JURISDICTION: New Hampshire

TITLE: Commissioner

DATE: _____

MAILING ADDRESS: 21 South Fruit Street
Suite 14
Concord NH 03301

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The State of New Jersey, Department of Banking and Insurance does hereby adopt, agree, and
(Jurisdiction)
approve this Modification Agreement to the Regulatory Settlement Agreement that was
effective August 24, 2012.

BY: Marlene Caride



(Signature)

JURISDICTION: State of New Jersey, Department of Banking and Insurance

TITLE: Acting Commissioner

DATE: 1/23/18

MAILING ADDRESS: 20 West State Street
Trenton, NJ 08625


Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The State of Nevada Department of Business and Industry, Division of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: BARBARA D. RICHARSON



(Signature)

JURISDICTION: NEVADA

TITLE: COMMISSIONER OF INSURANCE

DATE: 1/24/18

MAILING ADDRESS: NEVADA DIVISION OF INSURANCE
 1818 E. COLLEGE PARKWAY, SUITE 103
 CARSON CITY, NEVADA 89706

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Ohio Department of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY:  _____

JURISDICTION: Ohio Department of Insurance

TITLE: Director

DATE:  _____

MAILING ADDRESS: 50 West Town Street
Suite 300
Columbus, Ohio 43215

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Oklahoma Insurance Department

_____ does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: Joel L. Sander
(Signature)

JURISDICTION: Oklahoma Insurance Department

TITLE: Deputy Commissioner

DATE: 1/23/18

MAILING ADDRESS: 3625 NW 56th Suite 100

Oklahoma City, Oklahoma 73112

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Oregon does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: C. Smith
(Signature)

JURISDICTION: Oregon

TITLE: Director, Department of Consumer and Business Services

DATE: Jan. 17, 2018

MAILING ADDRESS: DCBS
350 Winter St. NE
Salem, OR 97301

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Pennsylvania does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: Justin K. Moran
(Signature)

JURISDICTION: Pennsylvania Insurance Department

TITLE: Acting Commissioner

DATE: 11/01/18

MAILING ADDRESS: Christopher Mondan
PA Insurance Department
1321 Strawberry Square
Harrisburg, PA 17120

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Rhode Island Division of Insurance does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.



BY:

Elizabeth Kelleher Dwyer

JURISDICTION: Rhode Island Division of Insurance

TITLE: Superintendent of Insurance

DATE: 1/5/2018

MAILING ADDRESS: Department of Business Regulation, Insurance Division

1511 Pontiac Ave, Building 69-2

Cranston, RI 02920

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

South Carolina Department of Insurance does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY: 
(Signature)

JURISDICTION: South Carolina

TITLE: Director

DATE: 01/31/2018

MAILING ADDRESS: South Carolina Department of Insurance
1201 Main Street, Suite 1000
Columbia SC 29201

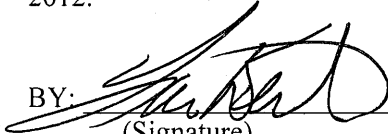
Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The South Dakota Division of Insurance does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24,
2012.

BY:  _____
(Signature)

JURISDICTION: South Dakota Division of Insurance

TITLE: Director

DATE: January 10, 2018

MAILING ADDRESS: 124 S. Euclid Avenue 2nd Floor

Pierre, SD 57501

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION OF
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Tennessee Department of Commerce and Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

Tennessee Department of Commerce and Insurance

BY: Julie Mia McPeak
(Signature)

Title: Commissioner

Date: 1/25/18

MAILING ADDRESS: **500 James Robertson Pkwy.
7th Floor
Nashville, TN 37243-1135**

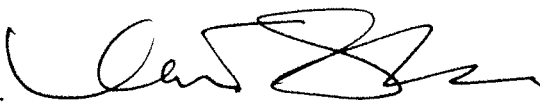
Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

2018 - 5431

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Texas Department of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement that was effective August 24, 2012. This is done in light of the age of this Regulatory Settlement, the lengthy history of the exam, and in the interest of allowing the 2012 Regulatory Settlement to proceed to a final conclusion.

BY: 

JURISDICTION: Texas

TITLE: Commissioner of Insurance

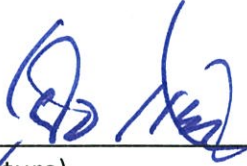
Date: 3/20/18

MAILING ADDRESS: Catherine Bell
Texas Department of Insurance
Attn: Enforcement Section
333 Guadalupe
Austin, Texas 78701

**PARTICIPATING STATE ADOPTION
ALLIZANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

State of Utah does hereby adopt, agree, and approve this Modification Agreement to the
Regulatory Settlement Agreement that was effective August 24, 2012.

BY:



(Signature)

JURISDICTION: State of Utah

TITLE: Commissioner

DATE: January *17th*, 2018

MAILING ADDRESS: STATE OFFICE BUILDING
ROOM 3110
350 N. State Street
Salt Lake City, UT 84114

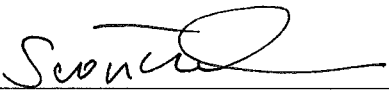
Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa, 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Virginia does hereby adopt, agree, and approve this
(Jurisdiction)

Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: Virginia

TITLE: Commissioner

DATE: 1/19/18

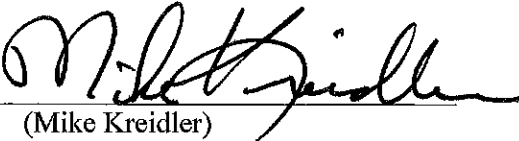
MAILING ADDRESS: State Corporation Commission
P. O. Box 1157
Richmond VA 23218

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

Washington State Office of the Insurance Commissioner does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Mike Kreidler)

JURISDICTION: Washington State Office of Insurance Commissioner

TITLE: Insurance Commissioner

DATE: 1/23/2018

CONTACT NAME: John Haworth


MAILING ADDRESS: WA Office Insurance Commissioner
PO Box 40255
Olympia, WA 98504-0255

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

West Virginia Offices of the Insurance Commissioner, does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
(Signature)

JURISDICTION: WV Offices of the Insurance Commissioner

TITLE: Insurance Commissioner

DATE: 1-12-2018

MAILING ADDRESS: WV Offices of the Insurance Commissioner

P.O. Box 50540

Charleston, WV 25305-0540

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov

**PARTICIPATING STATE ADOPTION
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA
MODIFICATION AGREEMENT**

The Wyoming Department of Insurance does hereby adopt, agree, and approve this Modification Agreement to the Regulatory Settlement Agreement that was effective August 24, 2012.

BY: 
Tom Glause

JURISDICTION: Wyoming Department of Insurance

TITLE: Insurance Commissioner

DATE: 1-24-18

MAILING ADDRESS: 106 E. 6th Avenue
Cheyenne, WY 82001

Please return this form to:

Tracy Swalwell
Iowa Insurance Division
Two Ruan Center
601 Locust Street, 4th Floor
Des Moines, Iowa 50309-3738
Phone: 515-725-1249
Fax: 515-281-3059
Email: tracy.swalwell@iid.iowa.gov & psantillanes@naic.org