

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

STATE OF ALASKA  
DEPARTMENT OF COMMERCE, COMMUNITY AND ECONOMIC  
DEVELOPMENT  
DIVISION OF INSURANCE

550 W. 7<sup>th</sup> AVENUE, SUITE 1560  
ANCHORAGE, ALASKA 99501-3567

Order No. SR 09-02(b) ) Expiration of Certificate  
In the Matter of ) of Authority No. F-68;  
**SYNCORA GUARANTEE, INC** ) Order under the Provisions  
NAIC No. 20311 ) Of AS 21.09.170 (d)  
\_\_\_\_\_ )

**WHEREAS**, a Certificate of Authority to transact business of insurance in the State of Alaska was issued to, **SYNCORA GUARANTEE, INC.**, domiciled in the State of New York.

**WHEREAS**, the Certificate of Authority issued to **SYNCORA GUARANTEE, INC.** was suspended on March 23, 2009 for failure to meet the capital and surplus requirements of AS 21.09.070 and that suspension has continued until the present.

**WHEREAS**, **SYNCORA GUARANTEE, INC's** Certificate of Authority has been revoked or suspended in thirteen states not including the State of Alaska.

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550 W. 7<sup>th</sup> AVENUE, SUITE 1560  
ANCHORAGE, ALASKA 99513-3567  
PHONE: (907) 269-7900

1                   **WHEREAS, SYNCORA GUARANTEE, INC.** has failed to present  
2 satisfactory evidence that it meets the capital and surplus requirements of the  
3 State of Alaska under AS 21.09.070 within five years of the date of its  
4 suspension.  
5

6                   **IT IS HEREBY ORDERED**, pursuant to the provisions of AS 21.09.170  
7 (d), that Certificate of Authority No. F-68 issued to **SYNCORA GUARANTEE,**  
8 **INC.** to transact the business of insurance in the State of Alaska expired March  
9 23, 2014. Pursuant to AS 21.09.160 (b), this expiration shall automatically  
10 revoke the authority of all agents to act as agents of **SYNCORA GUARANTEE,**  
11 **INC.** in this state.  
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13                   **IT IS FURTHER ORDERED**, that Certificate of Authority No. F-68, held  
14 in safekeeping by **SYNCORA GUARANTEE, INC.** shall be returned to the  
15 Alaska Division of Insurance by April 25th, 2014.  
16  
17

18                   This Order is effective the 23rd day of March 2014  
19

20                   Dated this 24<sup>th</sup> day of March 2014.  
21

22                     
23

24                   \_\_\_\_\_  
25                   LORI WING-HEIER, DIRECTOR  
26                   DIVISION OF INSURANCE  
27  
28  
29

CERTIFICATE OF DISTRIBUTION

I hereby certify that copies of the documents(s) listed below were distributed to the listed parties and files by mail or by personal delivery. An original document has been forwarded to the insurer at the address listed and another original is in the Juneau office of the Division of Insurance for official filing.

Order signed by Director of Insurance on March 24, 2014, Order # SR 09-02 (b), in the Matter of **SYNCORA GUARANTEE, INC.**

Susan Comparato, President  
Syncora Guarantee, Inc.  
135 West 50<sup>th</sup> Street  
New York, New York 10020

Benjamin M. Lawskey, Superintendent  
New York State Department of Financial Services  
One State Street  
New York, New York 10004-1151

Susan R. Daniels, AIC  
Alaska Insurance Guaranty Association  
c/o Northern Adjustors  
1401 Rudakoff Circle, Suite 100  
Anchorage, Alaska 99508

Agents of record: None

Financial Examiner's file of the Division of Insurance in Anchorage.

Date: March 25, 2014

Signed:

