



STATE OF ALABAMA  
DEPARTMENT OF INSURANCE

## Certificate of Authority

Issue Date: 07/06/2016

I, the undersigned, Commissioner of Insurance for the State of Alabama, by authority vested in me by law do hereby authorize **VALIDUS REINSURANCE (SWITZERLAND) LTD** to act with the powers indicated hereon.

**Company Number:**

VALIDUS REINSURANCE (SWITZERLAND) LTD  
1177 AVENUE OF THE AMERICAS  
41ST FLOOR  
NEW YORK NY 10036

COMMENTS :

**36: Accepted Reinsurer**

This license remains in effect until suspended, cancelled, expired or revoked, as long as fees and taxes are currently paid and all licensing requirements are complied with.

In witness whereof, I have hereunto set my hand and affixed the Official Seal of this Department at the City of Montgomery, Alabama.

Jim L. Ridling  
Commissioner of Insurance