

**FILED**

MAR 02 2017

INSURANCE COMMISSIONER  
OKLAHOMA

**BEFORE THE INSURANCE COMMISSIONER OF THE  
STATE OF OKLAHOMA**

STATE OF OKLAHOMA, ex rel. JOHN )  
DOAK, Insurance Commissioner, )  
) )  
Petitioner, )  
) )  
v. )  
) )  
VERTICAL VISION FINANCIAL )  
MARKETING, LLC, an applicant for a )  
nonresident business entity, )  
insurance producer license )  
) )  
Respondent. )

**Case No. 17-0055-DEN**

**CONSENT ORDER**

COMES NOW the State of Oklahoma, ex rel. John Doak, Insurance Commissioner, and the Respondent, Vertical Vision Financial Marketing, LLC (“Vertical Vision”) and stipulate to the following facts and applicable laws. The parties consent to the entry of this Order.

**JURISDICTION**

1. John Doak is the Insurance Commissioner of the State of Oklahoma and is charged with the duty of administering and enforcing all provisions of the Oklahoma Insurance Code, 36 O.S. §§ 101 et seq.

2. Respondent is an applicant for a nonresident business entity insurance producer license in the State of Oklahoma. Respondent’s address of record is 2650 McCormick Drive, Suite 200S, Clearwater, Florida 33759.

3. The Insurance Commissioner may place on probation, censure, suspend, revoke or refuse to issue or renew a license issued pursuant to the Oklahoma Producer

Licensing Act and/or may levy a fine up to \$1,000.00 for each occurrence of a violation of the Oklahoma Insurance Code, 36 O.S. § 1435.13(A) and (D).

4. Informal disposition of this matter may be made by consent order pursuant to 75 O.S. § 309(E).

#### **STIPULATIONS OF FACT**

1. Respondent applied for a nonresident business entity insurance producer license on or about January 13, 2017, with the Oklahoma Insurance Department (“OID”). On the application form, the second question asks the following: “Has the business entity or any owner, partner, officer or director of the business entity, or manager or member of a limited liability company, ever been named or involved as a party in an administrative proceeding, including a Financial Industry Regulatory Authority (“FINRA”) sanction or arbitration proceeding regarding any professional or occupational license, or registration?” Respondent answered “no” to this question.

2. The application form defines being “involved” in an administrative proceeding as the following: “having a license censured, suspended, revoked, canceled, terminated; or, being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation, sanctioned or surrendering a license to resolve an administrative action. ‘Involved’ also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license or registration.” ‘Involved’ also means having a license, or registration application denied or the act of withdrawing an application to avoid a denial.” Applicants may only exclude “terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.”

3. A background check conducted by the OID Licensing Division showed that Respondent had the following administrative action listed on its record: an administrative action by the State of Minnesota Department of Commerce. Respondent entered into a Consent Order on July 9, 2016, regarding an alleged advertising violation and was ordered to cease and desist using the identified advertisement, and fined Seven Thousand Five Hundred Dollars (\$7,500.00). Accordingly, Respondent did not properly disclose the aforementioned administrative action in the license application.

**CONCLUSIONS OF LAW**

1. Respondent violated 36 O.S. § 1435.13(A)(1); providing incorrect or incomplete information in the license application.


**ORDER**

**IT IS THEREFORE ORDERED** by the Insurance Commissioner and **CONSENTED** to by the Respondent that it shall be and hereby is fined in the amount of Three Hundred Dollars (\$300.00). The fine is to be paid immediately.

WITNESS My Hand and Official Seal this 18<sup>th</sup> day of March, 2017.



JOHN DOAK  
INSURANCE COMMISSIONER  
STATE OF OKLAHOMA

  
\_\_\_\_\_  
JAMES MILLS  
CHIEF OF STAFF

APPROVED:



Sara A. Worten  
Assistant General Counsel  
Oklahoma Insurance Department



Nathan Hightower  
General Counsel  
Vertical Vision Financial Marketing, LLC

**CERTIFICATE OF MAILING**

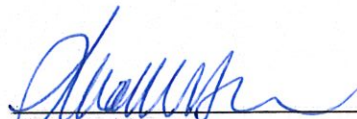
I, Sara A. Worten, hereby certify that a true and correct copy of the above and foregoing Consent Order was mailed by certified mail, with postage prepaid and return receipt requested, on this 2nd day of March, 2017, to:

Vertical Vision Financial Marketing, LLC  
2650 McCormick Drive  
Suite 200S  
Clearwater, FL 33759

**CERTIFIED MAIL NO.** **7016 0910 0000 8401 5592**

and a copy was delivered to:

Lorie Jones  
Licensing Division



Sara A. Worten  
Assistant General Counsel

7016 0910 0000 8401 5592

U.S. Postal Service™  
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Adult Signature Required \$ \_\_\_\_\_

Adult Signature Restricted Delivery \$ \_\_\_\_\_



Postage \$ \_\_\_\_\_

**Total Postage and Fees** \$ \_\_\_\_\_

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City, State, ZIP+4® \_\_\_\_\_

Vertical Vision Financial Marketing, LLC  
 2650 McCormick Drive, Suite 200S  
 Clearwater, FL 33759  
**17-0055-DEN/SAW(mt)**  
**(Consent Ord.~3-02-17)**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vertical Vision Financial Marketing, LLC  
 2650 McCormick Drive, Suite 200S  
 Clearwater, FL 33759  
**17-0055-DEN/SAW(mt)**  
**(Consent Ord.~3-02-17)**



9590 9402 1900 6104 3987 42

2. Article Number (Transfer from service label)

7016 0910 0000 8401 5592

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

X Tom

B. Received by (Printed Name) C. Date of Delivery

STRANGE 3/6/17

D. Is delivery address different from item 1?  Yes  
 No  
 If YES, enter delivery address below:

**RECEIVED**  
**OKLAHOMA INSURANCE DEPARTMENT**  
**MAR 13 2017**

3. Service **Legal Division**

Adult Signature  Priority Mail Express®

Adult Signature Restricted Delivery  Registered Mail™

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Insured Mail  Signature Confirmation Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt