

BEFORE THE INSURANCE COMMISSIONER OF THE
STATE OF OKLAHOMA

FILED

JUN 13 2017

INSURANCE COMMISSIONER
OKLAHOMA

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

Case No. 17-0428-DEN

CONDITIONAL ADMINISTRATIVE ORDER
AND NOTICE OF RIGHT TO BE HEARD

COMES NOW the State of Oklahoma, ex rel. John D. Doak, Insurance Commissioner, by and through his attorney, Barron B. Brown, and alleges and states as follows:

JURISDICTION

1. John D. 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., including the Oklahoma Producer Licensing Act (the "Act"), 36 O.S. §§ 1435.1 through 1435.41.

2. Cennairus, LLC ("Respondent") is an applicant for a nonresident business entity insurance producer license in the State of Oklahoma. Respondent's mailing address of record is P.O. Box 25897, Sarasota, Florida 34277.

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

ALLEGATIONS OF FACT

1. Pursuant to 36 O.S. § 1435.4(A), "[a] person shall not sell, solicit, or negotiate insurance in this state for any class or classes of insurance unless the person is licensed for that line of authority in accordance with [the Act]." Within that, a "Person" for purposes of the Act ". . . means an individual or a business entity." 36 O.S. § 1435.2(16)

2. On or about February 28, 2017, Respondent's Oklahoma business entity insurance producer license expired.

3. On or about June 6, 2017, Respondent applied for reactivation of its business entity insurance producer license.

4. At the time of its application for reactivation, Respondent provided the Oklahoma Insurance Department's ("OID") Licensing Division with a list showing insurance policies that it had either sold, solicited or negotiated in the State of Oklahoma after the date its license expired on February 28, 2017. A copy of this list is attached as Petitioner's Exhibit A.

5. More specifically, the provided list showed that, since February 28, 2017, Respondent had sold, solicited or negotiated approximately nine (9) insurance policies in the State of Oklahoma without being properly licensed with the OID.

ALLEGED VIOLATIONS OF LAW

1. Respondent violated 36 O.S. § 1435.13(A)(2) by selling, soliciting, or negotiating insurance in the State of Oklahoma without being properly licensed in violation of 36 O.S. § 1435.4(A).

ORDER

IT IS THEREFORE ORDERED by the Insurance Commissioner that Respondent is **CENSURED** and **FINED FIVE HUNDRED DOLLARS (\$500.00)** for a violation of 36 O.S. §§ 1435.13(A)(2) and 1435.4(A). **The \$500.00 fine is to be paid within thirty (30) days** made payable to the Oklahoma Insurance Department. The \$500.00 civil fine shall be paid by money order or cashier's check. Respondent's application for a nonresident business entity insurance producer license may be granted upon receipt of payment of the fine and reporting of the administrative action. Failure to pay the civil fine or request a hearing within thirty (30) days will result in your license application being withdrawn.

IT IS FURTHER ORDERED, ADJUDGED AND DECREED by the Insurance Commissioner that this Order is a Conditional Order. Unless the Respondent requests a hearing with respect to the Allegations of Fact set forth above within thirty (30) days of the date of mailing of this Order, this Order and the penalties set forth above shall become a Final Order on the thirty-first day following the date of mailing this Order. A request for hearing should be in writing addressed to Barron B. Brown, Oklahoma Insurance Department, Legal Division, 3625 NW 56th St., Suite 100, Oklahoma City, Oklahoma 73112. The request for hearing must state the grounds for the request to set aside or modify the Order.

Any such hearing shall be conducted according to the procedures for contested cases under the Oklahoma Insurance Code (36 O.S. §§ 101 et seq.) and the Oklahoma Administrative Procedures Act (75 O.S. §§ 308a et seq.). If the Respondent serves a timely request for hearing on the Oklahoma Insurance Department, this Conditional Order shall act as notice of the matters to be reviewed at the hearing, and the Allegations of Fact, Alleged Violations of Law, and penalties imposed in this Conditional Order shall be considered withdrawn, pending final resolution at the hearing.

WITNESS My Hand and Official Seal this 13th day of June, 2017.



JOHN D. DOAK
INSURANCE COMMISSIONER
STATE OF OKLAHOMA

Barron B. Brown

Barron B. Brown
Assistant General Counsel
Oklahoma Insurance Department
3625 NW 56th St., Suite 100
Oklahoma City, OK 73112
(405) 521-2746

CERTIFICATE OF MAILING

I, Barron B. Brown, hereby certify that a true and correct copy of the above and foregoing *Conditional Administrative Order and Notice of Right to be Heard* was mailed by certified mail, with postage prepaid and return receipt requested, on this 13th day of June, 2017, to:

Cennairus, LLC
P.O. Box 25897
Sarasota, Florida 34277

CERTIFIED MAIL NO. 7016 0910 0000 8401 4588

and a copy was delivered to:

Licensing Division



Barron B. Brown
Assistant General Counsel

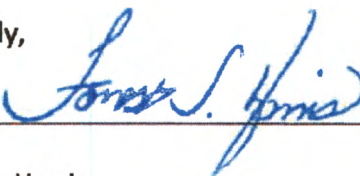


1800 Second Street Suite 892
Sarasota, FL 34236
PH: 941-927-9500 | fax: 941.927-9551
www.cennairus.com

Re: Oklahoma License

Cennairus has the attached list of workers compensation policies in the state of Oklahoma.

Sincerely,

X  Date 6/12/17

Forest J. Harris
President of Cennairus, LLC

POLICY NUMBER	INSURED	EFFECTIVE	EXPIRATION
ICUB-4H72304-6-16 (TravPay)	Bacon & Son, Inc.	9/1/16 12:00 AM	9/1/17 12:00 AM
ISUB-0E51894-0-16 (Travpay)	Green Country Veterinary Hospital, Inc.	12/16/16 12:00 AM	12/16/17 12:00 AM
ISUB-4529T01-6-17 (TravPay)	Collinsville Auto Sales, LLC FEIN: 73-1540109; Cardinal Xpress Lube Sales & Service FEIN:453716504	1/15/17 12:00 AM	1/15/18 12:00 AM
IOUB-1H79934-8-17 (TravPay)	Collinsville Auto Sales, LLC FEIN: 73-1540109; Cardinal Xpress Lube Sales & Service FEIN:453716504	3/23/17 12:00 AM	3/23/18 12:00 AM
TWC3524010	JNC Service LLC	8/10/16 12:00 AM	8/10/17 12:00 AM
IKUB-5J88754-4-17	Diana E Hampton MD PC	5/5/17 12:00 AM	5/5/18 12:00 AM
V9WC816762	All Commercial Openings INC	4/6/17 12:00 AM	4/6/18 12:00 AM
IKUB-8G82096-6-17 (TravPay)	VIP Auto Center, LLC	2/27/17 12:00 AM	2/27/18 12:00 AM
IJUB-8G23726-1-17 (TravPay)	Midwest Inventory Service LLC	3/1/17 12:00 AM	3/1/18 12:00 AM
ICUB-6H39588-9-17 (TravPay)	Family Wellness Chiropractic PC	6/21/17 12:00 AM	6/21/18 12:00 AM
UB-6H395889 (TravPay)	Family Wellness Chiropractic PC	6/21/16 12:00 AM	6/21/17 12:00 AM
EIG 2373000 01	Jacewitz Enterprises Inc	6/8/17 12:00 AM	6/8/18 12:00 AM
IKUB-2J13648-A-17 (Travpay)	Hull IV, Joseph L	2/1/17 12:00 AM	2/1/18 12:00 AM
IHUB-9G14260-2-17 (TravPay)	Complete Rehab, LLC	5/1/17 12:00 AM	5/1/18 12:00 AM
EIG 2442434 00	Triple B3 Enterprises, LLC	12/3/16 12:00 AM	12/3/17 12:00 AM
IKUB-5G59452-3-16 (TravPay)	Catmack Inc, Bloodlands, Core Wealth Management, Stanford & Brim PC,Core Employee Solutions LLC	12/14/16 12:00 AM	12/14/17 12:00 AM
ICUB-4H47518-7-16 (Travpay)	Don Felts Service CO LLC	8/1/16 12:00 AM	8/1/17 12:00 AM
ICUB-6G01556-4-17 (TravPay)	Stoneridge Animal Hospital	1/10/17 12:00 AM	1/10/18 12:00 AM
IKUB-1J89659-8-17 (Travpay)	Ediblend LLC	2/1/17 12:00 AM	2/1/18 12:00 AM
IKUB-5F63048-7-17 (TravPay)	Lawyer Marketing Services Inc	1/31/17 12:00 AM	1/31/18 12:00 AM
INUB-3G51668-A-16 (TravPay)	Kari E Bender DDS PC	8/15/16 12:00 AM	8/15/17 12:00 AM
IEUB-1H37844-9-17 (TravPay)	Green Acres Energy	4/1/17 12:00 AM	4/1/18 12:00 AM
IHUB-1H20342-8-17 (TravPay)	Daybreak Family Services, LLC	4/1/17 12:00 AM	4/1/18 12:00 AM

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
 \$ _____

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$ _____
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- Certified Mail Restricted Delivery \$ _____
- Adult Signature Required \$ _____
- Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Sent To

Cennairus, LLC
 P.O. Box 25897
 Sarasota, FL 34277
 rlg/17-0428-DEN(BBB)/Cond Adm Ord

Street and Apt. No., or P.O. Box

City, State, ZIP+4®



PS Form 3800, April 2015 PSN 7500-02-000-007

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:

Cennairus, LLC
 P.O. Box 25897
 Sarasota, FL 34277
 rlg/17-0428-DEN(BBB)/Cond Adm Ord



9590 9402 1346 5285 6119 83

2. Article Number (Transfer from service label)

7016 0910 0000 8401 4588

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

Robert Johnson

C. Date of Delivery

JUN 10 2017

3. Delivery address different from item 1? Yes
 Delivery address below: No

RECEIVED
 OKLAHOMA INSURANCE DEPARTMENT

JUN 26 2017

Legal Division

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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

Domestic Return Receipt