

**SEQUENTIS REINSURANCE COMPANY LIMITED**

AON HOUSE, 4TH FLOOR, 30 WOODBOURNE AVENUE, PEMBROKE HM 08  
Mailing address: P.O. BOX HM 2450, HAMILTON HM JX, BERMUDA

TELEPHONE: (441) 295- 2220

FACSIMILE NO: (441) 292-0217

**DECLARATION OF COMPLIANCE**

(Prepared in accordance with section 15A of the Insurance Act 1978)

**For the Year-Ended – December 31, 2020**


We, the undersigned Directors of Sequentis Reinsurance Company Limited (“the Company”) declare that to the best of our knowledge and belief, that the Company has:

- (a) complied with all requirements of the minimum criteria applicable to it;
- (b) complied with the minimum margin of solvency;
- (c) complied with applicable enhanced capital requirements;
- (d) complied with all applicable regulatory conditions, directions, restrictions and approvals imposed on the insurer; and
- (e) complied with the minimum liquidity ratio for general business.

DIRECTORS:

\_\_\_\_\_  
Director: Michael Miller

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Director: Tom Hulst

  
\_\_\_\_\_  
Date

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DIRECTORS:

  
\_\_\_\_\_  
Director: Michael Miller

6/28/21  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Director: Tom Hulst

\_\_\_\_\_  
Date