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Department of Insurance
State of Idaho
AM

Attorneys for Idaho Department of Insurance

BEFORE THE DIRECTOR OF THE DEPARTMENT OF INSURANCE

STATE OF IDAHO

IDAHO DEPARTMENT OF
INSURANCE,

Complainant,

vs.

AARON LEE MALCOMNSON, an
individual holding Idaho Nonresident
Producer License No. 471377,

Respondent.

Docket No. 18-3524-18

CONSENT ORDER

COME NOW the Idaho Department of Insurance (“Department”) and AARON LEE MALCOMNSON (“Malcomnson”) and hereby stipulate and agree as follows:

1. Malcomnson is a resident of the state of Florida and is licensed as a nonresident insurance producer in the state of Idaho, holding Idaho Nonresident Producer License No. 471377. Such license was originally issued on December 18, 2013, and is due to expire on March 31, 2020.

2. The Director of the Idaho Department of Insurance (hereinafter "Director") has jurisdiction in the state of Idaho over matters involving insurance regulation and licensing, in accordance with title 41, Idaho Code.

3. Idaho Code § 41-1008(6) requires licensees to "inform the director by any means acceptable to the director of a change of address within thirty (30) days of the change."

4. On August 14, 2017, the Department sent a certified letter to Malcomnson's business address on file with the Department, requesting information about a consumer complaint. On September 13 2017, the letter was returned to the Department by the United States Postal Service as "Attempted – Not Known, Unable to Forward."

5. On October 3, 2017, the Department sent a letter to Malcomnson's residential address on file with the Department, again requesting information in regard to the consumer complaint. On October 17, 2017, the letter was returned to the Department by the United States Postal Service as "Attempted – Not Known, Unable to Forward."

6. On September 10, 2018 the Department filed a Verified Complaint ("Complaint") against Malcomnson with the Director for Malcomnson's failure to notify the Department of his change in addresses within thirty days of the changes.

7. After being served with the Complaint, Malcomnson contacted the Department, updated his mailing addresses with the Department, and provided the Department with information in regard to the consumer complaint.

8. Malcomnson admits to failing to notify the Department of changes to both his business and residential addresses within thirty days of the changes.

9. Malcomnson further admits that such failures to notify the Department of the changes in his business and residential addresses within thirty days of the changes constitute two violations of Idaho Code § 41-1008(6).

10. As a sanction for the violations referenced above, the Department and Malcomnson agree that he shall pay the Department an administrative penalty in the amount of two thousand dollars (\$2,000) by no later than December 16, 2018.

11. Malcomnson acknowledges that this is an administrative action that is required to be reported on Department licensing applications and license renewal forms.

12. By entering into this Consent Order, Malcomnson knowingly and voluntarily waives all rights he would otherwise have to notice and hearing at which he may be represented by counsel, present evidence, and examine witnesses. The parties further waive any right to reconsideration, appeal, and any other right set forth in title 67, chapter 52, Idaho Code, including the right to submit this matter to review by a court of competent jurisdiction.

13. Malcomnson acknowledges that he has read this Consent Order and has been provided an opportunity to review this Consent Order with legal counsel of his choice.

14. This Consent Order is subject to the approval of the Director or the Director's designee and shall become binding upon the Department and Malcomnson upon such approval. Should the Director decline to approve the Consent Order, the Department and Malcomnson shall retain all of their rights, claims and/or defenses, and any factual or legal admission by Malcomnson shall be withdrawn.

15. Subject to the Director's approval described above, this Consent Order constitutes full and final resolution of all matters addressed herein, and the Department agrees that, upon execution of this Consent Order by Malcomnson and his full compliance with all terms and

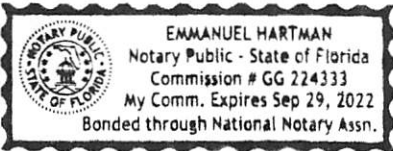
conditions set forth herein, the Department shall seek no further sanctions for the violations addressed herein.

DATED this 16 day of November, 2018.

Aaron J Malcomson
AARON LEE MALCOMSON

State of Florida)
County of Broward) : ss.

On this 16 day of November, 2018, before me, the undersigned Notary Public, personally appeared AARON LEE MALCOMSON, proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same.



Emmanuel Hartman
Notary Public in and for the State of Florida
Residing at: MIRAMAR, FL
My commission expires: 9/29/2018

DATED this 19 day of November, 2018.

STATE OF IDAHO
DEPARTMENT OF INSURANCE

Elaine Mellon
Elaine Mellon
Bureau Chief, Consumer Services

IT IS SO ORDERED.

DATED this 20 day of November, 2018.

STATE OF IDAHO
DEPARTMENT OF INSURANCE

A handwritten signature in black ink, appearing to read "Dean L. Cameron", is written over a horizontal line.

DEAN L. CAMERON
Director

NOTIFICATION REGARDING REPORTABLE PROCEEDINGS

This is considered a reportable administrative proceeding. As such, it is a public record and is public information that may be disclosed to other states and reported to companies of which you are actively appointed. This information will be reported to the National Association of Insurance Commissioners (NAIC) and will appear in the Idaho Department of Insurance's online searchable database. Be aware that this proceeding must be disclosed on any license application and must be reported to any and all states in which you hold an insurance license.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 21st day of November, 2018, I caused a true and correct, fully-executed copy of the foregoing CONSENT ORDER to be served on the following by the designated means:

Aaron Lee Malcomson
2500 N. Powerline Rd., Ste. 6
Pompano Beach, FL 33069-1049

- first class mail
- certified mail
- hand delivery
- via facsimile

American General Life Insurance Company
2727-A Allen Parkway
Houston, TX 77019

- first class mail
- certified mail
- hand delivery
- via facsimile

Axis Insurance Company
11680 Great Oaks Way, Ste. 500
Alpharetta, GA 30022

- first class mail
- certified mail
- hand delivery
- via facsimile

Federal Insurance Company
202 Halls Mill Road, Ste. B
Whitehouse Station, NJ 08889-3435

- first class mail
- certified mail
- hand delivery
- via facsimile

National Health Insurance Company
4455 LBJ Freeway, Ste. 375
Dallas, TX 75244-5908

- first class mail
- certified mail
- hand delivery
- via facsimile

United States Fire Insurance Company
305 Madison Avenue
Morristown, NJ 07962

- first class mail
- certified mail
- hand delivery
- via facsimile

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Pamela Murray