

No. 2024-8992

**Official Order
of the
Texas Commissioner of Insurance**

Date: 12/04/2024

Subject Considered:

Julissa West Insurance Agency LLC
PO Box 58
McGregor, Texas 76657

Default Order
TDI Enforcement File No. 34769

General remarks and official action taken:

This is a default order taken against Julissa West Insurance Agency LLC (Respondent) because it failed to maintain its qualifications for licensure and is no longer eligible to hold an agency license. Respondent did not respond to a Notice of Allegations mailed by the Texas Department of Insurance. This order revokes Respondent's license.

The following findings of fact and conclusions of law are adopted:

Findings of Fact

Failure to Respond to Notice of Allegations

1. On October 30, 2024, the department sent a Notice of Allegations, attached as Exhibit A, to Respondent.
2. The department sent the Notice of Allegations to Respondent's last known address provided in writing to the department, PO Box 58, McGregor, Texas 76657; and to an additional address associated with Respondent, [REDACTED], McGregor, Texas 76657.

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3. Respondent received and waived an opportunity for a hearing because Respondent failed to send the department a written response to the Notice of Allegations within 20 days after the date the Notice of Allegations was mailed.
4. The department's factual allegations set out in the attached Notice of Allegations are incorporated in this order as findings of fact.

Conclusions of Law

1. The commissioner has jurisdiction under Texas law, including TEX. INS. CODE §§ 82.051-82.055, 4001.002, 4001.003(2)-(3), 4001.106, 4001.252, 4001.254, 4005.101, 4005.102, and 4051.051; and TEX. GOV'T CODE §§ 2001.003(1) and 2001.051-2001.178.
2. The commissioner has authority to dispose of this case informally under TEX. GOV'T CODE § 2001.056; TEX. INS. CODE § 82.055; and 28 TEX. ADMIN. CODE § 1.47.
3. The department provided proper notice to Respondent under TEX. GOV'T CODE §§ 2001.003(1), 2001.051, 2001.052, 2001.054, and 2001.056(4), and 28 TEX. ADMIN. CODE §§ 1.28, 1.47, and 19.906.
4. Based on Respondent's failure to send the department a written response to the Notice of Allegations, the department is entitled to disposition by default under 28 TEX. ADMIN. CODE § 1.47.
5. Respondent failed to show compliance with the law.
6. The department's factual and legal allegations set out in the attached Notice of Allegations are incorporated in this order and deemed admitted as true under 28 TEX. ADMIN. CODE § 1.47.

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Order

It is ordered that any licenses held by Julissa West Insurance Agency LLC are revoked. A copy of this order will be provided to law enforcement or other appropriate administrative agencies for further investigation as may be warranted.

Signed by:

FC5D7EDDFFB4F8...

Cassie Brown
Commissioner of Insurance

Prepared and reviewed by:



Anna Kalapach, Staff Attorney
Enforcement

Affidavit

STATE OF TEXAS §
 §
COUNTY OF TRAVIS §

Before me, the undersigned authority, personally appeared Roxanne Rodriguez, who, being by me duly sworn, deposed as follows:

"My name is Roxanne Rodriguez and I am employed by the Texas Department of Insurance. I am of sound mind, capable of making this affidavit, and have personal knowledge of these facts which are true and correct.

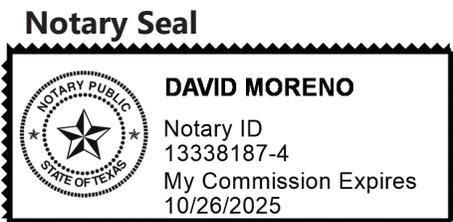
I have reviewed TDI's records concerning Julissa West Insurance Agency LLC. I have confirmed that:

- a. The last mailing address provided to the department in writing by Julissa West Insurance Agency LLC is PO Box 58, McGregor, Texas 76657.
- b. The file maintained by Enforcement contains a Notice of Allegations dated October 30, 2024, which was sent to Julissa West Insurance Agency LLC.
- c. On October 30, 2024, the Notice of Allegations addressed to Julissa West Insurance Agency LLC was mailed first-class and certified, return receipt requested, to its last known address and an additional address: [REDACTED], McGregor, Texas 76657.

Copies of the first-class mail log and certified mail log maintained by Enforcement are attached as Exhibit B and Exhibit C, respectively."

Signed by:
Roxanne Rodriguez
C7D7DF0819054B8...
Affiant

SWORN TO AND SUBSCRIBED before me by means of an interactive two-way audio and video communication on 11/20/2024. This notarial act was an online notarization.



Digital Certificate
DocuSigned by:
David Moreno
455E4109E15D4CD...
Notary Public State of Texas

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PO Box 12030 | Austin, TX 78711 | 800-578-4677 | tdi.texas.gov

October 30, 2024,

Julissa West Insurance Agency LLC
PO Box 58
McGregor, TX 76657

Via Certified Mail
9214 8901 9403 8385 1112 25
Return Receipt Requested
Via First Class Mail
Via Email to:
julissalw@gmail.com and
julissa@julissawest.com

Julissa West Insurance Agency LLC
[REDACTED]
McGregor, TX 76657

Via Certified Mail
9214 8901 9403 8385 1113 00
Return Receipt Requested
Via First Class Mail

TDI ENFORCEMENT CASE NO. 34769
NOTICE OF ALLEGATIONS AGAINST JULISSA WEST INSURANCE AGENCY LLC

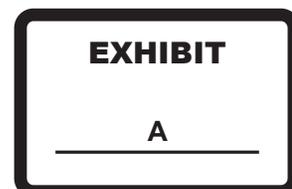
The Texas Department of Insurance (TDI) seeks to take disciplinary action against Julissa West Insurance Agency LLC (JWIA). This Notice states the allegations against JWIA and the relief sought by TDI.

YOUR WRITTEN RESPONSE IS REQUIRED WITHIN 20 DAYS

YOU HAVE THE RIGHT TO A HEARING AND ARE INVITED TO SHOW COMPLIANCE WITH THE LAW. To request a hearing, you must send a written response to TDI within 20 days of the date this Notice was mailed.

If you fail to send a written response by the deadline, *you waive your right to a hearing*, and TDI may seek disposition by default under 28 TEX. ADMIN. CODE § 1.47, TEX. INS. CODE § 82.055, and TEX. GOV'T. CODE § 2001.056.

If you fail to send a written response by the deadline, without further notice to you, the commissioner of insurance may issue a default order that admits the factual matters asserted, deems all allegations as true, and orders the relief recommended in this Notice.



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Notice of Allegations
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You must send your written response by mail, fax, or email to:

Anna Kalapach, Staff Attorney
Texas Department of Insurance
Enforcement, MC ENF
P.O. Box 12030
Austin, Texas 78711-2030
(512) 490-1020 (Fax)
anna.kalapach@tdi.texas.gov

Jurisdiction

The commissioner of insurance has jurisdiction over this matter under TEX. INS. CODE §§ 82.051–82.055, 4001.002, 4001.003(2)–(3), 4001.106, 4001.252, 4001.254, 4005.101, 4005.102, and 4051.051; and TEX. GOV'T CODE §§ 2001.003(1) and 2001.051–2001.178.

Factual Allegations

Licensure and Background

1. Under Texas law, one of the requirements for issuance of an insurance license to a corporation is that at least one officer of the corporation and all other persons performing any acts of an agent on behalf of the corporation in this state be individually licensed by TDI separately from the corporation.
2. JWIA, firm identification number 121520, holds a general lines agency license with a property and casualty qualification originally issued by TDI on June 10, 2016. At the time JWIA's license was issued, its sole owner, officer, and designated responsible licensed person (DRLP) was Julissa Luna West (West).
3. West, individual identification number 1453521, held a general lines agent license with a property and casualty qualification originally issued by TDI on June 12, 2015, but which expired on June 30, 2024, when she failed to renew her individual license.
4. After June 30, 2024, JWIA failed to designate a new DRLP as its officer or controlling person to administer the agency's operations in Texas.
5. JWIA has not maintained its license qualifications and is no longer eligible to hold an agency license.

Legal Allegations

1. JWIA violated TEX. INS. CODE § 4001.254 by failing to maintain its qualifications for licensure and it is no longer eligible to hold an agency license.

Relief Sought

TDI seeks the following relief:

1. revocation of Julissa West Insurance Agency LLC's license; and
2. imposition of any other just and appropriate relief to which TDI may be entitled to by law, including any combination of the above actions.

Respectfully,



Anna Kalapach
State Bar No. 24083290
Texas Department of Insurance
Enforcement, MC ENF
P.O. Box 12030
Austin, Texas 78711-2030
(512) 676-6326 (Direct)
(512) 490-1020 (Fax)
anna.kalapach@tdi.texas.gov

cc: Leah Gillum, Deputy Commissioner, Fraud and Enforcement Division, MC: ENF
Rachel Cloyd, Litigation Director, Enforcement, MC: ENF
Administrative Review, MC: CO-AAL

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CERTIFICATE OF SERVICE

I, Anna Kalapach, certify that a true and correct copy of this *Notice of Allegations Against Julissa West Insurance Agency LLC* was sent by the following methods on this 30th day of October, 2024 to:

Julissa West Insurance Agency LLC
PO Box 58
McGregor, TX 76657

Via Certified Mail
9214 8901 9403 8385 1112 25
Return Receipt Requested
Via First Class Mail
Via Email to:
[REDACTED] and
julissa@julissawest.com

Julissa West Insurance Agency LLC
[REDACTED]
McGregor, TX 76657

Via Certified Mail
9214 8901 9403 8385 1113 00
Return Receipt Requested
Via First Class Mail



Anna Kalapach



Firm Mailing Book For Accountable Mail

2024-8992

Name and Address of Sender

ENF M RUIZ
1601 CONGRESS AVENUE
STE 6.900
AUSTIN TX 78701

Affix Stamp Here
(for additional copies of this receipt).
Postmark with Date of Receipt.

Check type of mail or service

- Adult Signature Required
- Adult Signature Restricted Delivery
- Certified Mail
- Certified Mail Restricted Delivery
- Collect on Delivery (COD)
- Insured Mail
- Priority Mail
- Priority Mail Express
- Registered Mail
- Return Receipt for Merchandise
- Signature Confirmation
- Signature Confirmation Restricted Delivery

USPS Tracking/Article Number

1. 9214 8901 9403 8385 1112 25

ANNA/34769

2. 9214 8901 9403 8385 1113 00

Addressee (Name, Street, City, State, & ZIP Code™)

JULISSA WEST INSURANCE AGENCY LLC
PO BOX 58
MCGREGOR, TX 76657

JULISSA WEST INSURANCE AGENCY LLC
[REDACTED]
MCGREGOR, TX 76657

EXHIBIT

C



Postage	(Extra Service) Fee	Handling Charge	Actual Value if Registered	Insured Value	Due Sender if COD	ASR Fee	ASRD Fee	RD Fee	RR Fee	SC Fee	SCRD Fee	SH Fee
0.69	4.85	Handling Charge - if Registered and over \$50,000 in value							2.62			
0.69	4.85					Adult Signature Required	Adult Signature Restricted Delivery	Restricted Delivery	Return Receipt	Signature Confirmation	Signature Confirmation Restricted Delivery	Special Handling



Postmaster, Permitted receiving employee

[Signature]

Complete in ink

Total Number of Pieces Listed by Sender: 2

Total Number of Pieces Received at Post Office: 2

Privacy Notice: For more information on USPS privacy policies, visit usps.com/privacypolicy.

Shipment Confirmation
Acceptance Notice



A. Mailer Action

Note to Mailer: The labels and volume associated to this form online, must match the labeled packages being presented to the USPS® employee with this form.

Shipment Date: 10/30/2024
Shipped From:
Name: ENF M RUIZ
Address: 1601 CONGRESS AVENUE
City: AUSTIN
State: TX ZIP+4® 78701

Type of Mail	Volume
Priority Mail Express®	
Priority Mail®	
First-Class Package Service®	
Returns	
International*	
Other	2
Total	2

*Start time for products with service guarantees will begin when mail arrives at the local Post Office™ and items receive individual processing and acceptance scans.

B. USPS Action

Note to RSS Clerk:

1. Home screen > Mailing/Shipping > More
2. Select Shipment Confirm
3. Scan or enter the barcode/label number from PS Form 5630
4. Confirm the volume count message by selecting Yes or No
5. Select Pay and End Visit to complete transaction

USPS EMPLOYEE: Please scan upon pickup or receipt of mail.
Leave form with customer or in customer's mail receptacle.

USPS SCAN AT ACCEPTANCE



9275 0901 1935 6200 0056 6768 45

ANNA/34769

