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**BEFORE THE INSURANCE COMMISSIONER  
OF THE STATE OF UTAH**

**COMPLAINANT:**

UTAH STATE INSURANCE DEPARTMENT

**RESPONDENT:**

JUAN CARLOS MARTINEZ  
License No. 289105

1416 Wooden Valley St.  
Chula Vista, CA 91913

645 Paradise Way  
National City, CA 91950-3067

9640 Granite Ridge Dr., Suite 200  
San Diego, CA 92123

**DEFAULT AND  
DEFAULT ORDER**

**Docket No.** 2010-122-LC

Enf. Case No. 2711

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**DEFAULT**

On Tuesday, the 15<sup>th</sup> day of March at 9:00 a.m., the date and time set for the Hearing on the Order to Show Cause in this matter, the Complainant appeared by and through its counsel, M. Gale Lemmon, Assistant Attorney General, the Respondent failed to appear either in person or

through counsel and has failed to make any contact with the department or department's counsel. The presiding officer found that service was proper on the Respondent.

Having failed to appear, pursuant to Utah Code Annotated Section 63G-4-209, the Default of the Respondent is hereby entered.

DATED this 27<sup>TH</sup> day of March, 2011.

NEAL T. GOOCH  
INSURANCE COMMISSIONER

  
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MARK E. KLEINFELD, Esq.  
Presiding Officer

**DEFAULT ORDER**

The Default of the Respondent having previously been entered, the presiding officer hereby adopts the allegations in the Motion for Order to Show Cause as his Findings of Fact and Conclusions of Law, and enters the following Order:

IT IS HEREBY ORDERED:

1. The insurance license of the Respondent, Juan Carlos Martinez, is hereby revoked forthwith.
2. Respondent shall immediately cease doing any insurance business in the State of Utah.

**NOTIFICATION**

Respondent is hereby notified that failure to abide by the terms of this Order may subject it to further penalties, including additional forfeitures of up to \$5,000.00 per violation and the filing of an action to enforce this Order in the District Court which may impose penalties of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED this 17<sup>th</sup> day of March, 2011.

NEAL T. GOOCH  
INSURANCE COMMISSIONER

  
MARK E. KLEINFELD, Esq.

Presiding Officer  
Utah Department of Insurance  
State Office Building, Room 3110  
Salt Lake City, Utah 84114  
Telephone (801) 538-3800



# Insurance Department

State of Utah

GARY R. HERBERT  
*Governor*

GREG BELL  
*Lieutenant Governor*

NEAL T. GOOCH  
*Commissioner*

## CERTIFICATE OF MAILING

I do hereby certify that on this date I mailed, by regular mail postage prepaid, a true and correct copy of the attached:

DEFAULT AND  
DEFAULT ORDER

LICENSE REVOKED

To the following:

Juan Carlos Martinez  
1416 Wooden Valley St.  
Chula Vista, CA 91913

&

Juan Carlos Martinez  
645 Paradise Way  
National City, CA 91950-3067

&

Juan Carlos Martinez  
9640 Granite Ridge Dr., Suite 200  
San Diego, CA 92123

DATED this 22<sup>Th</sup> day of March, 2011

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Linda Hardy  
Utah Department of Insurance  
State Office Building, Room 3110  
Salt Lake City, UT 84114-6901