Federated Mutual

LICENSE BOND

No.	1045575
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FNHURANCE COMPANY

92035179

KNOW ALL MEN BY THESE PRESENTS:

THAT WE, M DIL INSULATION & CONSTRUCTION SUPPLIES.	R 08E	1	
(Principal) of 13733 WICKER AVE CEDAR LAKE IN 46303	हुतु इस हुन्	~ 	11.5
(City) (State)	12.	_ as Princ	
and FEDER'ATED MUTUAL INSURANCE COMPANY-with principal offices at OWATONNA, MIN	NESOTA		rized)
to do a Surety business in the State of	=======================================	\$: -\$	5 :
as Surety, are held and firmly bound unto: LAKE COUNTY LICENSE & PERMIT SECTION (Obligee):		192	Ę.
2293 N. MAIN ST CROWN POINT IN 146307			
in the sum of payments of which sum, well and truly to be made, we bind ourselves, our heirs, executors, admin assigns, jointly and severally; Parily by Dose presents at is the property of	nistrators	successor	s and
The condition of this obligation is such that witer EAS the above hamed Principal is desirous of obt	aining a li	cense from	i
L'AKE :COUNTY:			
to engage in the business of INSULATION CONTRACTING	** · · · · · · · · · · · · · · · · · ·		
NOW, THEREFORE, in consideration of the issuance of such license, if said Principal shall well an Ordinances, Rules and Regulations and any Amendments thereof, as require the execution of this bestiall be void, otherwise to be and remain in full force and effect.			
This obligation shall become effective on the 10781 day of SEPTEMBER 19 9 force for a one year period thereafter.	<u>1(+,</u> and	shall rema	iin in
If the Surety herein shall so elect, this bond may be cancelled at any time by the Surety herein by g	iving the	Principal a	ndito
the ObligeeTEN		•	
IN WITNESS WHEREOF, the said Principal and the said Surety, have hereunto affixed the	eir ⁽ han d s	and seals	this
5TH day of JULY , 19 91			
(Seal) M*D*L INSULATION*E CONST Principal By L L L L L L L L L L L L L	RUCTIO	N SUPPL	[ES:
(Seal). FEDERATED MUTUAL INSURANCE	СЕ СОМР	ANY, SUF	RETY
Countersigned: R. B. Hatten Agent By Carol Cilling Attorney-in Carol Attorney-in Carol Attorney-in Carol Agent	ω_	****	

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POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That FEDERATED MUTUAL INSURANCE COMPANY, a Corporation duly organized and existing under the laws of the State of Minnesota, and having its principal office in the City of Owatonna, State-of Minnesota, does hereby constitute and appoint:
CAROL CIFFRA of the City of OWATONNA State of
MINNESOTA its true and lawful attorney for the following purposes:
To sign its name as surety to, and to execute, affix the seal, acknowledge and deliver any and all surety bonds and penalties not exceeding:
TEN THOUSAND DOLLARS (\$10,000) EACH
The execution of such bonds or undertakings in pursuance of these presents shall be binding upon the Company as if they had been executed and acknowledged by the regularly elected officers of the Company.
This Power of Attorney granted by Federated Mutuas Insurance Company shall terminate when the designee ceases to be:
1) Employed by: Federated Mutual Insurance Company or This Document is the property of
2) Employed by Federated Mutual Insurance Company in a job for which such Power of Attorney is required.
IN WITNESS WHEREOF, the said FEDERATED MUTUAL INSURANCE COMPANY has caused this instrument to be signed and its corporate seal to be affixed by its Senior Vice President and Secretary this the ATH day of JUNE 1991.
FEDERATED MUTUAL INSURANCE COMPANY
(Seal) Senver Vice President
STATE OF MINNESOTA COUNTY OF STEELE
On this 4TH day of JUNE 1991 personally appeared before me, the undersigned notary public, DONALD RAY HUFF AND F. H. HEISEKE to me personally known, who, each being duly sworn by me, did say that they are respectively the Senior Vice President and Secretary of the FEDERATED MUTUAL INSURANCE COMPANY and that the seal affixed to this instrument is the corporate seal of said Corporation and that this instrument was signed and sealed on behalf of said Corporation by authority of its Board of Directors and said DONALD RAY HUFF AND F. H. HEISEKE acknowledge said instrument to be the free act and deed of said Corporation.

(SEAL)

CORUME LIVENGOOD

NOTARY PUBLIC - MINNESOTA

STEELE COUNTY

My Commission Expires April 23, 1995

COPY OF RESOLUTION

"BE IT RESOLVED that the President or any Vice President in conjunction with the Secretary is hereby authorized and empowered under the corporate seal of the Company, to appoint any person or persons as attorney or attorneys in fact, or agent or agents of the Company, in its name and as its act to execute and deliver, anywhere in the United States or Canada, any and all bonds and undertakings of suretyship and other documents that the ordinary course of suretysbusiness may require."

"BE IT FURTHER RESOLVED that the Power of Attorney or other document appointing such person or persons as attorney or attorneys—in-fact or agent or agents of the Company may either be personally signed by the President, any Vice President, the Secretary or may be executed by said officers by means of facsimile signatures. The said personal signatures or facsimile signatures shall not require the Company seal or any other seal and shall be valid and binding on the Company if executed either by personal signature or facsimile signature and with a company seal peing affixed thereto."

MUTUAL INSURANCE COMPANY, a Corporation duly organized and existing under the laws of the State of Minnesota and that the toregoing is account and complete copy of the original Power of Attorney given by said Company to:

CAROL_CIFFRA

OFOWATONNA, MINNESOTA

authorizing and empowering such person to sign bonds as therein set forth, which Power of Attorney has never been revoked and is still in full force and effect.

I further certify that said Power of Attorney was given in pursuance of a resolution adopted at a regular meeting of the Soard of Directors of said Company duly called and held at the office of the Company to the City of Owatonna, Minnesota on the 20th day of April, 1982 at which meeting a quarem was present and that the foregoing is a true and correct copy of said resolution, and the whole thereof as recorded in the minutes of the said meeting.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the FEDERATED MUTUAL INSURANCE COMPANY this the 5^{+6} day of 30^{-4} 19 9/ .

FEDERATED MUTUAL INSURANCE COMPANY

(SEAL)

Senior Vice President