

**SURETY BOND CONTINUATION CERTIFICATE**

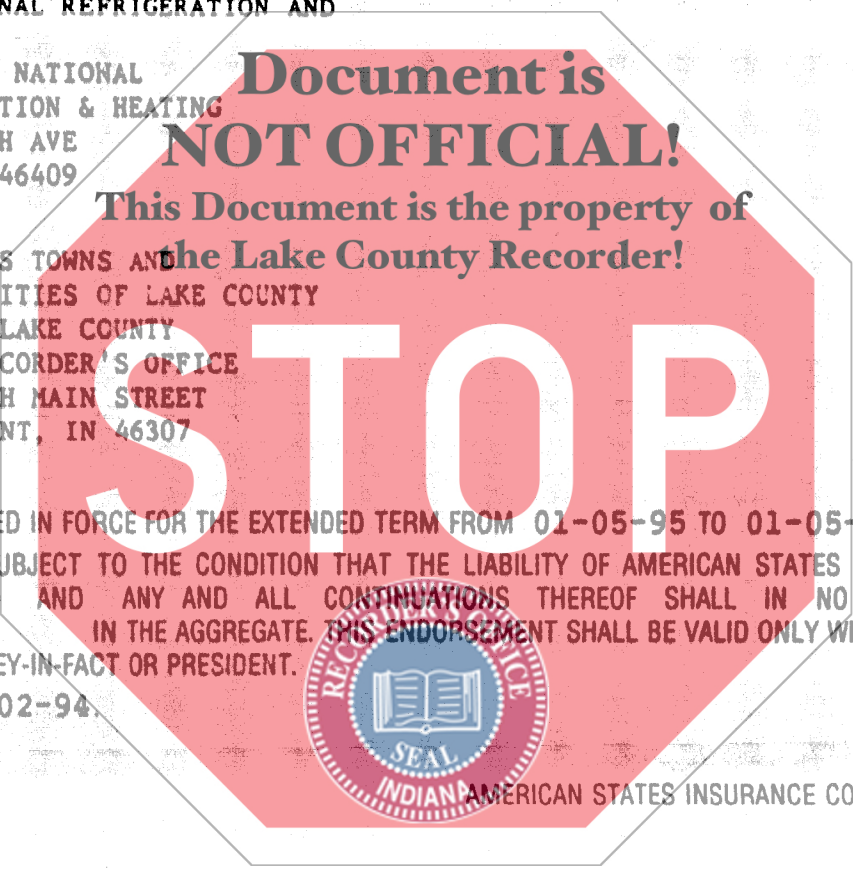
BOND NUMBER: EX-906300 (DUPLICATE ORIGINAL)  
ORIGINATION DATE: 01-05-1994  
PENALTY AMOUNT: \$5,000.00  
TYPE OF BOND:  
HEATING AIR CONDITIONING & REFRIGERATION CONTRACTOR

IN CONSIDERATION OF THE AGREED PREMIUM OF \$ 100.00, PAYABLE IN ADVANCE, THE ABOVE BOND IS EXECUTED

ON BEHALF OF A-1 NATIONAL REFRIGERATION AND HEATING  
DBA AAA-1 NATIONAL REFRIGERATION & HEATING  
585 E 45TH AVE  
GARY, IN 46409

IN FAVOR OF ALL CITIES TOWNS AND MUNICIPALITIES OF LAKE COUNTY  
CLERK OF LAKE COUNTY  
COUNTY RECORDER'S OFFICE  
2293 NORTH MAIN STREET  
CROWN POINT, IN 46307

IS HEREBY CONTINUED IN FORCE FOR THE EXTENDED TERM FROM 01-05-95 TO 01-05-1996.  
CONTINUATION IS SUBJECT TO THE CONDITION THAT THE LIABILITY OF AMERICAN STATES INSURANCE COMPANY UNDER THE BOND AND ANY AND ALL CONTINUATIONS THEREOF SHALL IN NO EVENT EXCEED \$5,000.00 IN THE AGGREGATE. THIS ENDORSEMENT SHALL BE VALID ONLY WHEN EXECUTED BY THE COMPANY'S ATTORNEY-IN-FACT OR PRESIDENT.  
EXECUTED ON 12-02-94.



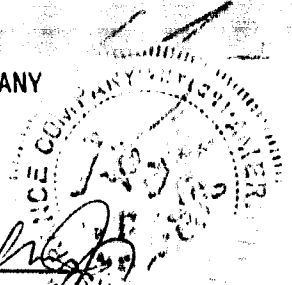
AMERICAN STATES INSURANCE COMPANY

BY M. J. Pampalone, Jr.  
M.J. PAMPALONE, JR. ATTORNEY-IN-FACT

AGENT NAME AND ADDRESS: PAMPALONE INS AGENCY, INC  
6695 BROADWAY  
MERRILLVILLE, IN 46410  
13-62288 (219) 736-6000

95603853  
AMASA G. COLBY  
CHIEF DEP. RECORDER

95 JAN 23 PM 12:59  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD



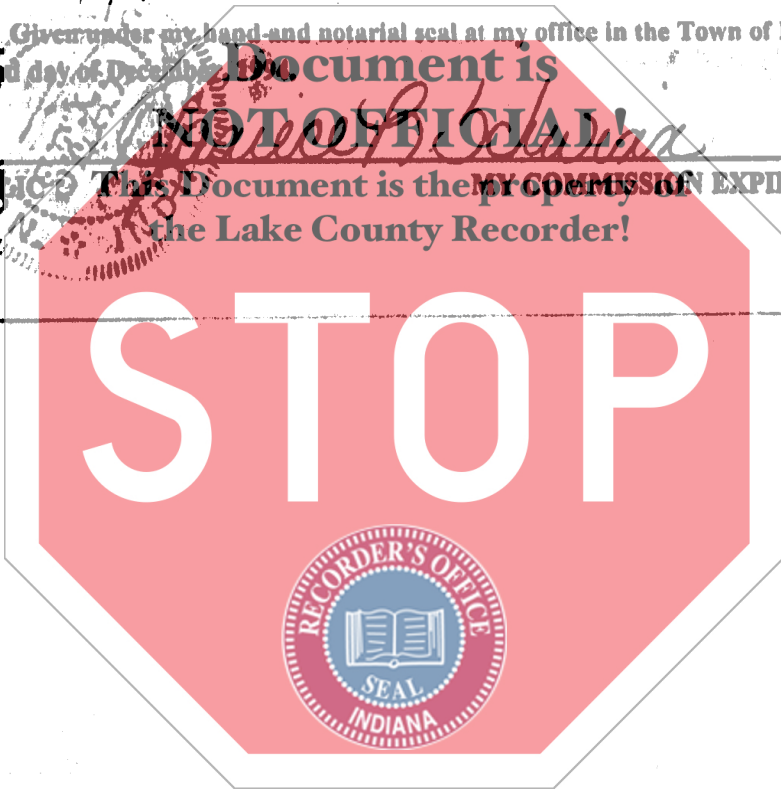
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STATE OF INDIANA )  
 ) SS:  
COUNTY OF LAKE )

I, JANIECE L. SCHWINN Notary Public of PORTER County, in the State of Indiana, do hereby certify that M.J. PAMPALONE, JR. Attorney in fact of the AMERICAN STATES INSURANCE COMPANY OF INDIANAPOLIS, INDIANA, who is personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered said instrument, for and on behalf of the AMERICAN STATES INSURANCE COMPANY, for the uses and purposes therein set forth.

Given under my hand and notarial seal at my office in the Town of Merrillville in said County, this 02nd day of December, 1996.

**NOT OFFICIAL!**  
NOTARY PUBLIC This Document is the property of the Lake County Recorder! COMMISSION EXPIRES: 09-03-97





# American States Insurance Company INDIANAPOLIS, INDIANA

KNOW ALL MEN BY THESE PRESENTS, that American States Insurance Company, a Corporation duly organized and existing under the laws of the State of Indiana, and having its principal office in the City of Indianapolis, Indiana, hath made, constituted and appointed, and does by these presents make, constitute and appoint M. J. PAMPALONE, SR., M. J. PAMPALONE, JR., ELAINE GIOLAS, THOMAS A. PAMPALONE OR WILLIAM C. SCHMIDT -----

of Merrillville and State of Indiana  
its true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in its name, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, contracts of indemnity and other conditional or obligatory undertakings, provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed TWO MILLION FIVE HUNDRED THOUSAND AND NO/100 (\$2,500,000.00) DOLLARS -----

and to bind the Corporation thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the common seal of the Corporation and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. This Power of Attorney is executed and may be revoked pursuant to and by authority granted by Section 7.07 of the By-Laws of the American States Insurance Company, which reads as follows: "The Chairman, the President or any Vice-President (including any Executive Vice-President, Senior Vice-President, Second Vice-President or Assistant Vice-President) shall have power, by and with the concurrence with any other officer of the Corporation, to appoint Attorneys-in-fact as the business of the Corporation may require and to authorize any such person to execute, on behalf of the Corporation, any bonds, recognizances, stipulations and undertakings, whether by way of surety or otherwise."

IN WITNESS WHEREOF, American States Insurance Company has caused these presents to be signed by its Vice-President, attested by its Assistant Vice-President and its corporate seal to be hereunto affixed this 12th day of November A.D. 19 91 AMERICAN STATES INSURANCE COMPANY

ATTEST: [Signature] Assistant Vice-President by [Signature] Second Vice-President

STATE OF INDIANA }  
COUNTY OF MARION } SS  
On this 12th day of November, A.D., 19 91, before me personally came

Joseph F. Heim, to me known, who being by me duly sworn, acknowledged the execution of the above instrument and did depose and say; that he is a Vice-President of American States Insurance Company; that he knows the seal of said Corporation; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of the Board of Directors of said Corporation; and that he signed his name thereto under like authority. And said Joseph F. Heim further said that he is acquainted with John J. Rosich and knows him to be the Assistant Vice-President of said Corporation; and that he executed the above instrument.

KATHLEEN FORD, NOTARY PUBLIC  
JOHNSON COUNTY, STATE OF INDIANA  
MY COMMISSION EXPIRES: 12/2/94

STATE OF INDIANA }  
COUNTY OF MARION } SS

I, John J. Rosich, the Assistant Vice-President of AMERICAN STATES INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said AMERICAN STATES INSURANCE COMPANY, which is still in force and effect.

This Certificate may be signed and sealed by facsimile under and by the authority of Section 8.03 of the By-Laws of AMERICAN STATES INSURANCE COMPANY which reads as follows:

"All policies and other instruments of insurance issued by the Corporation shall be signed on behalf of the Corporation by the Chairman, the president or any vice-president (including any Executive Vice-President, Senior Vice-President, Vice-President, Second Vice-President, or Assistant Vice-President) and the secretary, assistant secretary, or other officer, whose signatures, if the instrument is duly countersigned by an authorized representative of the Corporation, may be facsimiles. Such signatures and facsimiles thereof shall be authorized and binding upon the Corporation notwithstanding the fact that any such officer shall have ceased to be such officer at the time such policy or other instrument of insurance shall have been actually issued by the Corporation."

In witness whereof, I have hereunto set my hand and affixed the seal of said Corporation, this 02ND day of DECEMBER A.D., 19 94

[Signature]  
Assistant Vice-President

THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENT PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — PRESENT IN ITS ENTIRETY. IF YOU HAVE ANY QUESTIONS REGARDING THE VALIDITY OF THIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIS, IN 46206-1636.

WARNING  
THIS IS NOT A VALID POWER OF ATTORNEY IF THIS STATEMENT DOES NOT APPEAR IN RED INK AND IF THE RED DIAGONAL IMPRINT — AMERICAN STATES INSURANCE — IS NOT PRESENT IN ITS ENTIRETY.

680-162

