FEDERATED MUTUAL INSURANCE COMPANY CONTINUATION CERTIFICATE

| IN CONSIDERATION of the payment of a premium of \$ 75.00 | |
|--|---|
| FEDERATED MUTUAL INSURANCE COMPANY hereby continues in force to | 08/10/2003 |
| its bond No1105350 effective 08/10/1998 | 3, in the sum of |
| FIVE THOUSAND AND NO/100 | ollars (\$ 5,000.00), on behalf of |
| DAHLMAN SHEET METAL CO INC | |
| represented by (if applicable) | , Principal, in favor of |
| ALL CITIES, TOWNS AND MUNICIPALITIES OF LAKE COUNTY, INDIANA | |
| subject to all its terms, conditions and limitations as set forth and expressed in | said bond. |
| This certificate is executed upon the express condition that the Company's lia all continuation certificates issued in connection therewith shall not be cume exceed the amount set forth in said bond, or said amount as it may have be rider(s) or endorsement(s) properly issued by the Company. Dated this8THday of | ulative, and shall not in any eventen increased or decreased by any |
| BY CARY STEPHENSON Attorney-in-Fact | 064427 20 |
| SEAL MIANA | LAKE DE MY 9: 00 PILET DE MY 9: 00 HORNIO W. CARLER RECORDER |

BF-22 Ed. 3-98

14.00



POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

| That FEDERATED MUT under the laws of the State of M Minnesota, does hereby constitute a | TUAL INSURANCE innesota, and having | COMPANY, a co | rporation duly organized in the City of Owaro | and existing |
|--|--|-----------------------|---|--|
| CARY STEPHENSON | | f <u>OW</u> ATO | 1 | ma, state of |
| ofMINNESOTA | | | | State |
| | its true an | id lawful attorney fo | r the following purposes: | |
| To sign its name as surety to bonds and penalties not exceeding: | o, and to execute, at | fix the seal, acknow | vledge and deliver any a | nd all surery |
| ONE H | HUNDRED THOUSAND | DOLLARS (\$100 r |)00) EVCH | |
| | MAN SHEET METAL C | YO | | |
| | | | RANKFORT IL | |
| The execution of such bond. Company as if they had been executes. This Power of Attorney gradesigned ceases to be: | _ | | PER OTHERS OF the Compa | |
| | | | | ; when the |
| l) Employed by | Federated Munici Ins | surance Company or | | |
| IN WITNESS WHEDEOF | This Document | nt is the prop | | |
| IN WITNESS WHEREOF, the this instrument to be signed and its of Secretary this the 22ND | said FEDERATED 1 corporate seal to be | MUTUAL INSURA | NCE COMPANY has car | ısed |
| Secretary this the 22ND | day of | JUNE - LEED | nive Vice President and | Assistant |
| | FE | DERATED MUTTI | L INSURANCE COMPA | ' |
| | BY | 2// | 2 ANCE COMPA | 7NY |
| (SEAL) | | Executive Vice Pre | sident | —————————————————————————————————————— |
| | and BY | | ATI ATI | |
| | | Assistant Secretary | | |
| | | TO CHE | | * • • |
| STATE OF MINNESOTA COUNTY OF STEELE | | | | |
| On this 22ND day of JUN | E 2000 | WOLAND STILL | · · / | |
| public, Sarah L Buxton and David W D. | pe | v known who are | efore me, the undersigne | d notary |
| TIDORATICE CUMPANY and that the | | Decretally | OF THE PEDERATED M | IT ITT I 🛦 T |
| mat wis instrument was stoned and soul | _ 1 | | Utate seal of said Comora | ition and |
| said Sarah L Buxton and David W Ra | msey acknowledge s | aid instrument to b | or its Board of Directive the free act and deed | tors and of said |
| { | · · · · · · · · · · · · · · · · · · · | | | |
| KELLY J. HAGEN NOTARY PUBLIC-MINNESC MY COMMISSION EXPIRES 1- | ATC | | | |
| SEAL) | ************************************** | _ Kell | 2 J. Hagen | |
| | | | • | |

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 surery business 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 or without the Company seal being affixed thereto."

I, the undersigned, hereby certify that I am an Executive Vice President of the FEDERATED MUTUAL INSURANCE COMPANY, a Corporation duly organized and existing under the laws of the State of Minnesota and that the foregoing is a true and complete copy of the original Power of Attorney given by said Company to:

| CARY STEPHENSON | of | OWATONNA, | , MINNESOTA | | | |
|--|-------------|-------------------------|----------------------|------------|-------------------------|---------------------------|
| authorizing and empowering such person to sign been revoked and is still in full force and effect. | OFI | FICT | AIL | acolution. | adonted | i at a regular |
| I further certify that said Power of Attormeeting of the Board of Directors of said Compar Owatonna, Minnesota on the 20th day of April, 19 is a true and correct copy of said resolution, and the said resolution, and the said resolution, and the said resolution of said resolution. | 82 at which | ch meeting a | quorum was | present a | nd that t if the sai | the foregoing id meeting. |
| PURSUANT to the By-Laws of Federate of inability of the Secretary to act, his duties sha | d Mutual l | Insurance Cormed by the | ompany, Artic | ecretaries | tion 1; us in the | order of their |
| IN TESTIMONY WHEREOF, I have I MUTUAL INSURANCE COMPANY this the | nereunto s | et my hand | and affixed tday ofJ | the seal | of the F | EDERATED 2002 |
| (SEAL) | SEA MOIA | EDERATEI | O MUTUAL E | ISURAL | ICE CO | MPANY |
| | Ī | Executive V | ce President | B+ | | - - |
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