

Bond Safeguard INSURANCE COMPANY

1919 S. Highland Ave. • Bldg. A - Suite 300 • Lombard, IL 60148 (630) 495-9380

BOND NO. 15- 6029076

INDIANA LICENSE AND/OR PERMIT BOND

(ONLY VALID IF FILLED IN FOR LESS THAN \$25,001.00
AND OBLIGEE IS AN INDIANA COUNTY, CITY, TOWN OR VILLAGE.)

KNOW ALL MEN BY THESE PRESENTS:

That we Facilities Maintenance Management Solutions

(Principal's Name)

1555 E. 91st Drive, Merrillville, IN 46410

(Principal's Address)

as Principal, and BOND SAFEGUARD INSURANCE COMPANY, an insurance company duly licensed in the

State of Indiana, as Surety, are held and firmly bound unto Lake County, IN

Board of Commissioners of County of Lake, State of IN & any Cities & Towns in

State of Indiana, Obligee, in the aggregate sum of five thousand Dollars (\$ 5,000.00)

to the payment of which sum the said Principal and Surety bind themselves and their heirs, administrators, executors, successors and assigns, jointly and severally by these presents.

In consideration thereof, the Principal is granted a license and/or permit by the Obligee to engage in the business of Sub-contracting, drywall, painting & floor covering

for the period beginning on the 27th day of December

and ending on the 27th day of December

THEREFORE: the condition of this bond is that, if said Principal shall comply with all of the conditions of the ordinances and regulations of the Obligee pertaining to said license and/or permit, then this obligation shall be null and void; otherwise to remain in full force and effect subject to the following conditions:

1. This obligation may be extended from year to year at the option of the Surety, by continuation certificate executed by the Surety;
2. This obligation may be cancelled by the Surety upon giving thirty (30) days written notice to the Obligee. However, this obligation shall remain in full force and effect as to the acts or omissions of the above mentioned Principal prior to the cancellation of the bond.

the Lake County Recorder!

Dated this 27th day of December, 2007

Facilities Maintenance Management Solutions

Principal

Countersigned:

Officer

BOND SAFEGUARD INSURANCE COMPANY

BY: [Signature] BY: [Signature]

President

ACKNOWLEDGEMENT OF SURETY
(Corporate Officer)



STATE OF ILLINOIS }
COUNTY OF DUPAGE } SS

On this 1st day of January, 2004, before me, the undersigned president personally appeared David E. Campbell, who acknowledged himself to be the aforesaid president of BOND SAFEGUARD INSURANCE COMPANY, a corporation, and that he, as such president, being authorized to do so, executed the foregoing instrument for the purpose therein contained, by signing the name of the corporation by himself as such president. IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

"OFFICIAL SEAL"
MICHELE KOLLER
Notary Public, State of Illinois
My Commission Expires 08/28/07

Notary Public, State of Illinois

2007 10 28 11

STATE OF INDIANA
LAKE COUNTY
RECORDER
2007 DEC 27 3:30 PM
MICHAEL A. BROWN
RECORDER

[Handwritten initials]

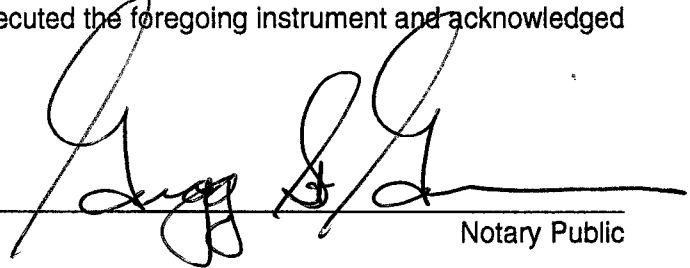
ACKNOWLEDGMENT OF PRINCIPAL
(INDIVIDUAL OR PARTNERS)

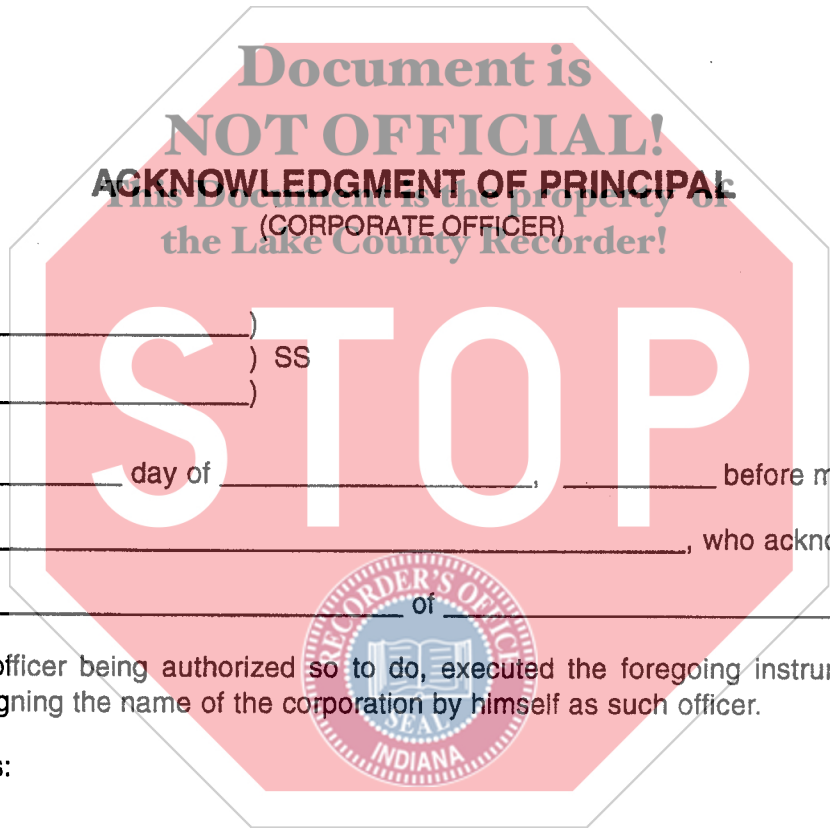
STATE OF INDIANA)
COUNTY OF LAKE) SS

On this 27TH day of DECEMBER, 2008, before me personally appeared
BRIAN GALLEGO

known to me to be the individual ___ described in and who executed the foregoing instrument and acknowledged to me that ___he ___ executed the same.

My commission expires:
FEBRUARY 28, 2014


Notary Public



STATE OF _____)
COUNTY OF _____) SS

On this _____ day of _____, _____ before me personally appeared
_____, who acknowledged himself to be
the _____ of _____, a corporation

and that he as such officer being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing the name of the corporation by himself as such officer.

My commission expires:

Notary Public