Bond Safeguard INSURANCE COMPANY

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

BOND NO. 15-

gata

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:		2
That we Paul Lopez DBA: Oso's Heati		0
P.O. Box 1174 Beecher, IL 60401	(Principal's Name)	9
as Principal, and BOND SAFEGUARD INS	(Principal's Address) URANCE COMPANY, an insurance compa	consed in the
State of Indiana, as Surety, are held and firmly	bound unto Indiana, including all cit	ties & Zow es, & unioc
State of Indiana, Obligee, in the aggregate sum to the payment of which sum the said Principa successors and assigns, jointly and severally by	I and Surety bind themselves and their heirs.	fars (\$) administrators, executors,
In consideration thereof, the Principal is g		oligee to engage in the
business of <u>Heating & Air Installat</u>	ion and repair	
for the period beginning on the3_d.	day of April	2009
and ending on the 3rd.	ocumenday of April	, 2010
THEREFORE: the condition of this bond is that, and regulations of the Obligee pertaining to so otherwise to remain in full force and effect subjection 1. This obligation may be extended from executed by the Surety; 2. This obligation may be cancelled by However, this obligation shall remain in Principal prior to the cancellation of the	the Surety upon giving thirty (30) days written full force and effect as to the acts or omission	on shall be null and void; by continuation certificate
Dated this 3rd.	day of April	, 2009
Countersigned:	Psul Lopez DBA: Oso's I	Feating & Air Conditi Principal
BY: Wille ACKNO	BOND SAFEGUARD INSURAND BY: DWLEDGEMENT OF SURETY	President President
STATE OF ILLINOIS) SS	(Corporate Officer)	AN ILINOIS INSURANCE COMPANY
COMPANY, a corporation, and that he, as s instrument for the purpose therein contained, the WITNESS WHEREOF, I have hereunto set	such president, being authorized to do so, by signing the name of the corporation by his	EGUARD INSURANCE
"OFFICIAL SEAL" MICHELE KOLLER Notary Public, State of Illinois My Commission Expires 08/28/07	Mulel Notary Public, St	ate of Illinois

ACKNOWLEDGMENT OF PRINCIPAL

(INDIVIDUAL OR PARTNERS)

STATE OF
COUNTY OF Jake) SS
On this day of April, 2009, before me personally appeared
known to me to be the individual described in and who executed the foregoing instrument and acknowledged to me thathe executed the same.
My commission expires:
Machine Mostary Public SEAL Notary Public
State of Indiana My Commission Expires 05/21/2009
Document is
NOT OFFICIAL!
ACKNOWLEDGMENT OF PRINCIPAL (CORPORATE OFFICER)
STATE OF
COUNTY OF
On this before me personally appeared
, who acknowledged himself to be
the, 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

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