## LEXON INSURANCE COMPANY

## LICENSE AND PERMIT BOND

(For County, City, Town or Village only. Not valid for Contract, Performance, Maintenance, Subdivision, Agent to Sell Hunting and Fishing Licenses, Utility or Tax Guarantee Bonds, or Bonds Required by the State

129096 KNOWN ALL MEN BY THEIR PRESENTS: as Principal, Korellis Roofing, Inc and **LEXON INSURANCE COMPANY, a Texas Corporation**, as Surety are held and firmly bound unto Commissioners of the County of Lake, State of Indiana, and all cities/towns hereinafter called the Obligee, in the amount of Dollars, lawful money of the United States, to be paid to the said Obligee, for which payment well and truls be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by their presents. THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas, the Principal has been licensed as a (an) Roofing-Siding-Gutters Contractor bothe Olligee. NOW THEREFORE, if the Principal shall faithfully perform the duties and comply with the laws and ordinames pertaining to the license or permit, then this obligation shall be void, otherwise to remain in full force and effect. Any liability under this bond shall commence on the day of and end one full calendar year thereafter. The Surety may cancel this bond at any time, by filing with the Obligee and the Principal, thirty (30) days written notice of its desire to be relieved of liability under this bond. Upon termination, the Surety shall be relieved from any liability for any subsequent acts This Document is the property of or omissions of the Principal. Dated the Korellis Roofing, (Principal) By (Signature/Principal) Pete Korellis, CORPORATE SEAL LEXON INSURANCE COMPANY TEXAS IN BY: David E. Campbell, President ACKNOWLEDGEMENT OF SURETY State of Illinois County of DuPage 2011 December On before me, a Notary Public in and for said County and State, residing therein, duly commissioned and sworn, personally appeared DAVID E. CAMPBELL who acknowledged himself to be the aforesaid officer of LEXON INSURANCE COMPANY, the corporation described in and that executed the within and foregoing instrument, and known to me to be the same person who executed the said instrument on behalf of the said corporation, and he duly acknowledged to me that such corporation executed the same. IN WITNESS WHEREOF, I have set my hand and affixed my official seal, the day and year stated in this certificate above. "OFFICIAL SEAL" TAMMY HENKLE Notary Public, State of Illinois My Commission Expires 03-30-2011 Tammy Henkle **ORIGINAL BOND** My Commission Expires 03-30-2011