

Bond Safeguard INSURANCE COMPANY

900 S. Frontage Road, Suite 250, Woodridge, IL 60517 (630) 495-9380

BOND NO. 15- 6038487

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 A.C.T. Investment Inc
(Principal's Name)
5110 Madison St Gary IN 46408
(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 The Board of Commissioners of the County of Lake, State of Indiana and any Cities and Towns in Lake County Indiana

State of Indiana, Obligee, in the aggregate sum of Five Thousand Dollars (\$5000)

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 Construction / Builder Developer

for the period beginning on the 20th day of May

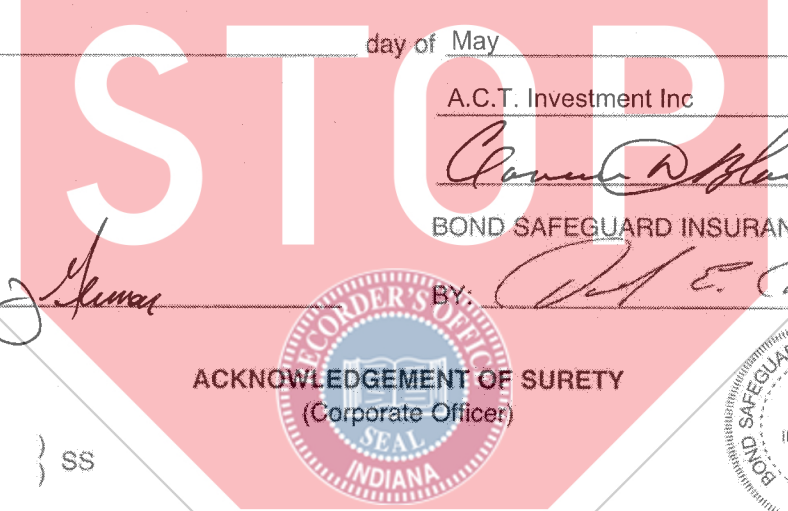
and ending on the 20th day of May

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.

2014 0288666
2014 MAY 20 PM 1:59
MICHAEL S. GOWEN
RECORDER
STATE OF INDIANA
LAKE COUNTY RECORDER

NOT OFFICIAL!
This document is the property of the Lake County Recorder!

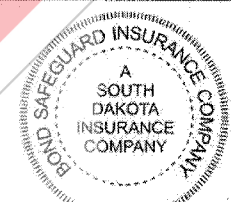


Dated this 20th day of May, 2014

Countersigned: A.C.T. Investment Inc Principal
Clarence D. Blum, Secretary Officer
BOND SAFEGUARD INSURANCE COMPANY

BY: David E. Campbell President
BY: David E. Campbell President

ACKNOWLEDGEMENT OF SURETY
(Corporate Officer)



STATE OF ILLINOIS)
COUNTY OF DUPAGE) SS

On this 21st day of September, 2009, before me, the undersigned officer personally appeared David E. Campbell, who acknowledged himself to be the aforesaid officer of BOND SAFEGUARD INSURANCE COMPANY, a corporation, and that he, as such officer, 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 officer. IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

"OFFICIAL SEAL"
MAUREEN K. AYE
Notary Public, State of Illinois
My Commission Expires 09/21/17

Maureen K. Aye
Notary Public, State of Illinois

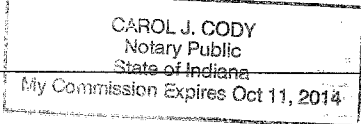
ACKNOWLEDGMENT OF PRINCIPAL
(INDIVIDUAL OR PARTNERS)

STATE OF INDIANA)
COUNTY OF LAKE) SS

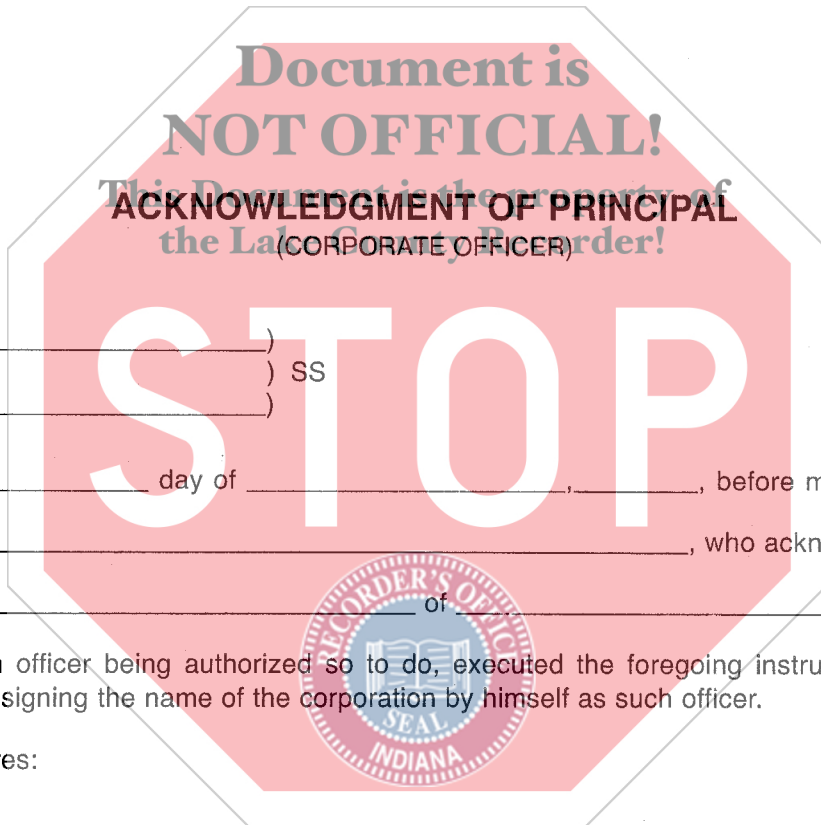
On this MAY 20 day of MAY, 2014 before me personally appeared
Connie D. BLAIR

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

My commission expires:



Carol J. Cody
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