D 2

Continuation Certificate HVAC CONTRACTOR

IN CONSIDERATION of the payment of	a premium of \$ <u>75.00</u>	_
Federated Mutual Insurance Company	hereby continues in force to	11-04-2015
its bond No. 9299496 effe	ctive11/04/2010	, in the sum of
FIVE THOUSAND AND NO/100		Dollars (\$ 5,000.00), on behalf of
CROWN HEATING & COOLING INC		
represented by (if applicable)		, Principal, in favor of
THE BOARD OF COMMISSIONERS OF	THE COUNTY OF LAKE, STATE OF I	NDIANA AND ALL CITIES, TOWNS AND
MUNICIPALITIES IN LAKE COUNTY IN	DIANA	
Obligee subject to all its terms, condition	s and limitations as set forth and expres	sed in said bond.
continuation certificates issued in connection amount set forth in said bond, or satisfied endorsement(s) properly issued by the Control Dated this	ection therewith shall not be cumulative id amount as it may have been increompany.	
	e Return Original Continuation C	ertificate With Power Of Attorney
Within 30 Days For Cancellation.		25 - 75
	PO Box 328 Owatonna, MN 55060	LAKE OF BRUINER LED FOR RECORD LOPA EL D. DROWN RECORDER

MASN 114-00 MON-COM M. Z

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That FEDERATED MUTUAL INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of Minnesota, and having its principal office in the City of Owatonna, State of Minnesota, does hereby constitute and appoint:				
MICHELLE K	RAAY of th	e City of	OWATONNA	State
of MINNESC	DTAi	its true and lawf	ul attorney for the following	g purposes:
To sign its name bonds and penalties not ex		ecute, affix the	seal, acknowledge and deli	ver any and all surety
	ONE HUNDRED THO	USAND DOLLA	ARS (\$100,000) EACH	
	CROWN HEATING &	COOLING INC	CROWN POINT, IN	
Company as if they had be	een executed and acknow	wledged by the	ance of these presents shall regularly elected officers of I Insurance Company shal	the Company.
designee ceases to be:				
1) E	mployed by Federated N	Autual Insurance	e Company or	
2) E	mployed by Federated ttorney is required.	Mutual Insurar	ice Company in a job for	which such Power of
IN WITNESS WE this instrument to be signed this the 29TH	HEREOF, the said FEDE ed and its corporate seal day of	ERATED MUT to be affixed by MAY	UAL INSURANCE COMP. v its Senior Vice President a	ANY has caused nd Assistant Secretary
(SEAL)	S	BY gen	ATED MUTUAL INSURAL AMPS A. The state of th	tisile
STATE OF MINNESOTA COUNTY OF STEELE				
that they are respectively INSURANCE COMPAN that this instrument was s	d Gregory J. Stroik to ny the Senior Vice Pres Y and that the seal affix igned and sealed of beh	ne personally ki sident and Assi ted to this instru- talf of said Corp	nally appeared before me, to nown, who, each being duly stant Secretary of the FEI ament is the corporate seal of poration by authority of its I instrument to be the free	Sworn by me, did say DERATED MUTUAL of said Corporation and Board of Directors and
(SEAL)	KELLY J. HAGEN NOTARY PUBLIC - MINNESOTA My Commission Expires Jan. 31, 2015		Kelly J. H	agen

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 surety 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 a Senior 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:

MICHELLE KRAAY	of	OWATONNA, MINNESOTA
authorizing and empowering such person to been revoked and is still in full force and eff		s therein set forth, which Power of Attorney has never
meeting of the Board of Directors of said Co Owatonna, Minnesota on the 20 th day of App	mpany duly ca ril, 19 <u>82</u> at whi	given in pursuance of a resolution adopted at a regular led and held at the office of the Company in the City of ch meeting a quorum was present and that the foregoing hereof as recorded in the minutes of the said meeting.
		Insurance Company, Article 8, Section 1; in the absence formed by the Assistant Secretaries in the order of their
IN TESTIMONY WHEREOF, I h MUTUAL INSURANCE COMPANY this t		et my hand and affixed the seal of the FEDERATED day of OCTOBER 2014
(SEAL)	SEA SEA	EDERATED MUTUAL INSURANCE COMPANY
	Se	Jamis A. Then unior Vice President