3

Continuation Certificate

IN CONSIDERAT	TON of the paym	_				
Federated Mutual	Insurance Comp	12-31-2018				
its bond No	0773768	effective	01/01/2017		in the su	m of
FIVE THOUSAND	O AND NO/100			Dollars (\$ 5,000.00), on beh	alf of
AFFORDABLE G	ARAGE DOOR	NC				
represented by (if					opal, in fav	
Board of Commis	sioner of Lake C		diana and ALL Cities, Towns Cument 18	or Municipalities in Lak	e County, Inc	ana
Obligee subject to	all its terms, co	oditions and limit	ations as set forth and express	ed in said bond.	08	
This certificate is continuation certi amount set forth endorsement(s) p	properly issued by	connection there or said amalo the Company.	ndition that the Company's dewith shall not be cumulative as a unay yn we been dien	ability runder said bon and shall not in any eased or decreased l	d and this a event exceed of any rider	nd all ed the (s) or
By Mich		At Please Return	Original Continuation Co	RECORDED POW	R RE	STATE OF INDIPATA
			FEDERALED NSURANCE (**)*			

PO Box 328 Owatonna, MN 55060

#25°C

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 KRAAY				of	the City of		OWATONNA	WATONNA St	
of	fMINNESOTA				its true and lawful attorney for the following purposes:				
To s bonds and p				to, and to e	execute, aff	ix the seal, ac	knowledge and	d deliver any	and all surety
			ONE H	JNDRED TH	HOUSAND	DOLLARS (\$1	00,000) EACH		
			AFF	ORDABLE	GARAGE D	OORING LO	WELL, IN		
The Company as	execution if they had	of be	such bon en execut	ds or under ted and ackn	takings in lowledged b	pursuance of by the regularly s the pro	these presents relected office perty of	shall be bin	iding upon the
	Power of								nate when the
	1)	En	nployed b	y Federated	l Mutual Ins	surance Compa	nny or		
	2)			by Federate required.	d Mutual I	nsurance Com	pany in a job	for which s	such Power of
							SURANCE CO		s caused and Assistant
Secretary thi			ed and n			APRIL		016	and Assistant
(SEAL)					FI	III Flan	IUTUAL INST	JRANCE CO	PMPANY
	<u>.</u>				and B	Assistant Se	ecretary		

STATE OF MINNESOTA COUNTY OF STEELE

On this 8TH day of APRIL, 2016 personally appeared before me, the undersigned notary public, James A. Thon and Jonathan R. Hanson to me personally known, who, each being duly sworn by me, did say that they are respectively the Executive Vice President and Assistant Secretary of the FEDERATED MUTUAL INSURANCE COMPANY and that the seal affixed to this instrument is the corporate seal of said Corporation and that this instrument was signed and sealed of behalf of said Corporation by authority of its Board of Directors and said James A. Thon and Jonathan R. Hanson acknowledge said instrument to be the free act and deed of said corporation.



Kelly J. Hogen

(SEAL)

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 Executive Vice President of the FEDERATED MUTUAL INSURANCE COMPANY, a Corporation duty 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:

NOT OFFICIAL!

MICHELLE KRAAT his Document is the property of the Lake County Recorder!

authorizing and empowering such person to sign bonds as therein set forth, which Power of been revoked and is still in full force and effect.

I further certify that said Power of Attorney was given in pursuance of a resolution adopted at a regular meeting of the Board of Directors of said Company duly called and held at the office of the Company in the City of Owatonna, Minnesota on the 20th day of April, 19 82 at which meeting a quorum was present and that the foregoing is a true and correct copy of said resolution, and the whole thereof as recorded in the minutes of the said meeting.

PURSUANT to the By-Laws of Federated Mutual Insurance Company, Article 8, Section 1; in the absence of or inability of the Secretary to act, his duties shall be performed by the Assistant Secretaries in the order of their rank.

IN TESTIMONY WHEREOF, I have hereinto set my hard and affixed the seal of the FEDERATED MUTUAL INSURANCE COMPANY this the ST. day of DECEMBER , 2017 .

FEDERATED MUTUAL INSURANCE COMPANY

(SEAL)

Executive Vice President