

Continuation Certificate HVAC and SUB-CONTRACTOR

IN CONSIDERATIO											
Federated Mutual Insurance Company hereby continues in force to				12-29-2020							
its bond No	9235326 effe	ective	12/29/2002		in	the	sum	of			
FIVE THOUSAND A	AND NO/100		D	ollars (\$ 5,000.00		on b	ehalf	of			
AREA SHEET MET	AL INC										
3 											
represented by (if ap	the state of the s				(7)	1000	favor o	of			
Board of Commissioners of Lake County, State of Indiana and ALL Cities, Towns or Municipalities in Lake County,											
Indiana		Docume	ent is		9						
Obligee subject to a	III its terms, condition	s and limitations as set fo	rth and expressed	l in said bond.							
This certificate is e continuation certific amount set forth i endorsement(s) pro	n said bond, or s	express condition that the rection therewith shall not take the contract the company to company.	Company's liab be cumulative, ava been increa	ility under said bor and shall not in any sed or decreased	nd and ever by ar	d this nt ex ny ric	s and ceed t der(s)	all the or			
Dated this 8TH	day of		019								
By Mich	HELLE KRAAY	Attorney in Faci									
		Return Original Conti	nuation Certific	ate with Power of	of Att	orne	Э				
700 / 100 N		FEDERA			3						
		INSURANCE									

PO Box 328 Owatonna, MN 55060

2019-080947

2019 Nov 22

11:53 AM

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD MICHAEL B BROWN RECORDER

25.00 CS AR

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

under the	laws of th	e State of Minner of Constitute and a	esota, and having its princ	IY, a corporation duly org ipal office in the City of	Owatonna, State of
MICHELLE KRAAY		of the City of	OWATONNA	State	
of	MINNE	SOTA	its true and lawfu	attorney for the following p	ourposes:
		me as surety to, ot exceeding:	and to execute, affix the se	eal, acknowledge and delive	er any and all surety
		ONE HUND	RED THOUSAND DOLLAR	RS (\$100,000) EACH	
		AREA	SHEETMETALING CHO	BARISIN	
Th Company	ne execution as if they ha	of such bonds	or undertakings in pursuan	ce of these presents shall gularly elected officers of the	be binding upon the e Company.
Th				Insurance Company shall	
	1)	Employed by F	ederated Mutual Insurance	Company or	
-	2)	Employed by I		e Company in a job for w	hich such Power of
	ment to be			AL INSURANCE COMPAI by its Executive Vice Pre PRIL , 2016	
			(C) BY	ED MUTUAL INSURANCE	CE COMPANY
(SEAL)			and BY	itiye Vice President	-
		·	Assis	tant Secretary	
	F MINNESO OF STEEL			70 H C	
public, <u>Jan</u> say that the INSURAN that this in	ey are respective COMPA strument was A. Thon a	and Jonathan R. ctively the Execut ANY and that the as signed and seal	Hanson to me personally live Vice President and Ass seal affixed to this instrumed of behalf of said Corporation	Ily appeared before me, the known, who, each being du istant Secretary of the FEDI ent is the corporate seal of s ration by authority of its Bo instrument to be the free a	ly sworn by me, did ERATED MUTUAL said Corporation and ard of Directors and

KELLY J. HAGEN
NOTARY PUBLIC - MINNESOTA
My Commission Expires Jan. 31, 2020

Kelly J. Hogen

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 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:

NOT OFFICIAL!

MICHELLE KRANCHIS Document is the OWOTORNAYMINES OTA

the Lake County Recorder!

authorizing and empowering such person to sign bonds as therein set forth, which Power of Attorney has never 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 become set my hand and affixed the seal of the FEDERATED MUTUAL INSURANCE COMPANY this the 8TH day of NOVEMBER , 2019

FEDERATED MUTUAL INSURANCE COMPANY

BÉAD

Executive Vice President