

Applic	cant Information:
	Name Waste Pro
	Address 13331 Southern Precast Dr
	City/State/Zip Code Alachua, FL 32615
	Phone Number 386-462-2500
Servic	e Type Requested:
	To provide containers <u>only</u> ;
X ordina	To provide commercial solid waste collection and disposal services as defined by County nce.
non-ex comme County	applicant: The following information is provided to assist you in preparing your application for a clusive franchise to provide containers for commercial solid waste services and/or to provide ercial solid waste collection and disposal services to properties located in Unincorporated Alachuary. Please provide the required information as an attachment to the franchise application ment checklist.
	Franchise Application Requirements And Requirement Checklist
	1. If the applicant is a publicly owned corporation with less than 25 shareholders or a privately owned partnership or corporation, provide the name(s) and business address(es) of principal officers and stockholders and other persons having financial or controlling interest in the partnership or corporation;
	2. If the applicant is a publicly owned corporation with more than 25 shareholders, provide the name(s) and business address(es) of local managing officers of the publicly owned corporation;
۵	3. Criminal convictions, withheld adjudication and/or plea of nolo contendere for any felonies of the applicant, if the applicant is an individual, or of any individual having controlling interest a firm, corporation, partnership, association or organization making application;
۵	4. A statement of whether such applicant operates(ed) a solid waste collection business in this or any other state or territory under a franchise, permit or license; and if so, where and whether such franchise, permit or license has ever been revoked or suspended, and the reasons therefore; List and whether such franchise, permit or license has ever been revoked or suspended, and the reasons therefore; List and whether such franchise, permit or license has ever been revoked or suspended, and the reasons therefore;
	5. Proof that corporation is in good standing in the state of incorporation, and if not a Florida Corporation, proof that applicant is qualified to do business in the State of Florida;
	6. If applicant is other than a corporation and is operating under a fictitious name, applicant shall be required to submit information that such fictitious name is registered and held by applicant;



	List of type, number and complete description of all equipment to be used by applicant for viding safe and efficient services. included
the	Applicant shall maintain in full force and effect the following insurance coverages, and file with County Manager a certificate of insurance for all policies written in applicant's name, to remain file with the County for the franchise term to include:
	Comprehensive general liability policy. A copy of the policy must be furnished to the County Manager;
	Policy must be in applicant's name, a per occurrence form policy, and coverage must be for limits not less than \$1,000,000 General Aggregate, \$1,000,000 Products / Completed Operations Aggregate, \$1,000,000 Personal and Advertising Injury Liability, \$1,000,000 each Occurrence, \$50,000 Fire Damage Liability and \$5,000 Medical Expense.
	Automobile liability insurance, including coverage for all Owned vehicles, Hired and Non-Owned vehicles for Bodily Injury and Property Damage of not less than \$1,000,000 combined single limit each accident; and
	Workers compensation as required by Florida Statute.
9. / Sch	Applicant shall pay the County a nonrefundable application fee as specified in Application Fee nedule.
cas	Applicant shall post and maintain a security deposit with the County in the amount of \$2,500 in sh or the estimated amount of franchise fees for a three month period, whichever sum is ater, to guarantee performance under this franchise.

Definitions:

- 1. <u>Applicant</u>: a person applying to Alachua County for a franchise to provide commercial service within Unincorporated Alachua County for hire, remuneration or other consideration.
- 2. <u>Franchisee</u>: person to whom the County has issued a non exclusive franchise to provide containers for commercial solid waste services and/or to provide commercial solid waste collection and disposal services to properties in Unincorporated Alachua County.
- 3. Registrant: shall be a person who has applied with the County to collect, transport, convey or process recovered materials in unincorporated Alachua County and has subsequently received a registration certificate from the County. (Note: a franchisee may be a registrant).



Applicant agrees to comply with all applicable provisions of the Alachua County, Florida Code of Ordinances and permit applications as may be amended.

Sharon Johnson		
Applicant name (Print or Type)		
Shain Thor		
Applicant signature		
8/27/2019		
Application submission date		
Application received by		9/9/2019
Application received by		date
Jeff Klush	50259973	8/27/2019
Application fee received by	check number	check date
Cle		9/9/2019
Approved County Manager/designee signature		date

IF INCORPORATED PLEASE PROVIDE CORPORATE RESOLUTION STATING THAT THE INDIVIDUAL EXECUTING THIS APPLICATION IS AUTHORIZED TO EXECUTE IT ON BEHALF OF THE CORPORATION.



Affidavit

The below named person, as applicant, or legal representative for applicant, does hereby certify that all required information has been attached to this application and become a part thereof.

Applicant, or applicant's legal representative, agrees that applicant will comply with all provisions of the Alachua County Code of Ordinances, the laws, rules, ordinances and regulations of Alachua County, the State of Florida and of the United States.

Sharon Johnson				
Applicant's (or Applicant's legal representative) Name Printed				
Regional Controller				
Title of Applicant (or Applicant's legal representative)				
Shan This				
Signature of Applicant (rapplicant's legal representative)				
STATE OF FLORIDA COUNTY OF HOLD COUN				
The foregoing instrument was acknowledged before me this				
2019, by Sharon Johnson, as Regional Controllerof				
Maste Roof Florida corporation, on behalf of the				
corporation. They/he/she are/is personally known to me or has produced				
Devision Linguing as identification.				
TO TO THE TOTAL OF THE PARTY OF				
Notary Public, State of Florida				
Print Name: Brittony Mills				
My Commission Expires: April 18, 2021				
Wy Commission Expires: 1710/11 10, 2021				
DESTANY MANUAC				
MY COMMISSION # GG095417				
EXPIRES April 18, 2021				

State of Florida Department of State

I certify from the records of this office that WASTE PRO OF FLORIDA, INC. is a corporation organized under the laws of the State of Florida, filed on January 5, 2001.

The document number of this corporation is P01000003611.

I further certify that said corporation has paid all fees due this office through December 31, 2019, that its most recent annual report/uniform business report was filed on January 7, 2019, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Seventeenth day of September, 2019



RANNINGELL Secretary of State

Tracking Number: 7035125375CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003611

Entity Name: WASTE PRO OF FLORIDA, INC.

Current Principal Place of Business:

2101 W SR 434 3RD FLOOR

LONGWOOD, FL 32779

Current Mailing Address:

2101 W SR 434 3RD FLOOR LONGWOOD, FL 32779 US

FEI Number: 59-3701785

Certificate of Status Desired: Yes

FILED Jan 07, 2019

Secretary of State

3679501735CC

Name and Address of Current Registered Agent:

VELEZ, MALENIE 2101 W SR 434 3RD FLOOR LONGWOOD, FL 32779 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE: MALENIE VELEZ

01/07/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Name

Address

CEO

JENNINGS, JOHN J

2101 W SR 434

3RD FLOOR

LONGWOOD FL 32779

Title Name

Address

CFO, EVP

SABINA, CORT

2101 W SR 434 3RD FLOOR

City-State-Zip:

City-State-Zip:

LONGWOOD FL 32779

Title

SECRETARY

Name

JENNINGS, SEAN MICHAEL

Address

2101 W SR 434

3RD FLOOR

City-State-Zip:

LONGWOOD FL 32779

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CORT SABINA

EVP CFO

01/07/2019

Additional Named Insureds for Waste Pro USA, Inc. include the following:

Waste Pro of AL Inc.

Waste Pro of FL Inc.

Waste Pro of GA Inc.

Waste Pro of LA Inc.

Waste Pro of MS Inc.

Waste Pro of TN Inc.

Waste Pro of NC Inc.

Waste Pro of SC Inc.

Applewhite Recycling LLC

American Recycling of GA LLC

American Recycling of Alabama LLC

Delta Sanitation LLC, Talley Disposal LLC

Waste Pro Truck List Div 104

Truck #	Туре
12	Pick up
26	Pick up
65	CD
70	Pick up
19	Pick up
131	Roll off
152	Roll off
380	Rear Loader
1518	Recycle
1534	Resi
1535	Recycle
1536	Resi
1537	Resi
900	Front Load
924	Front Load
974	Front Load
978	Front Load
11012	Front Load

ALA0010 Ref Nbr	ALACHUA CO	OUNTY BOCC Invc Date	WAST Invoice Amount	E PRO USA Amount Paid	8/27/201 Disc Taken	9 50259933 Net Check Amt
01658770	2019FF-RENEWAJ		250.00	250.00	0.00	250.00



RE: Continuation Certificate

Dear Sir/Madam:

Enclosed please find your Continuation Certificate. Should you have any questions regarding this Certificate, please contact me at the number below. If you have received one that requires your acceptance, please sign and email a signed copy back to me. My email address is mvelez@wasteprousa.com.

Thank you.

Very truly yours,

Malenie Velez Bond Administrator 407-937-2627 RECEIVED

SEP 30 2019

Alachua County
Public Works Department

RLI Insurance Company Annually Renewable Performance Bond BOND # CMS0292597

KNOW ALL MEN BY THESE PRESENTS: That Waste Pro of Florida, Inc.
(hereinafter called the Principal), and RLI Insurance Company (hereinafter called the Surety), are held and firmly
bound unto Alachua County, FL (hereinafter
called the Obligee), in the full and just sum of Nineteen Thousand Eight Hundred Ninety Five Dollars and 97/100 Dollars
(\$ 19,895.97), the payment of which sum, well and truly to be made, the said Principal and Surety bind
themselves, and each of their heirs, administrators, executors, and assigns, jointly and severally, firmly by these
presents.
WHEREAS, the Principal has by written agreement dated the <u>1st_day of October, 2019</u> entered into a Contract with the Obligee for <u>Franchise Fee Agreement - Alachua County Florida</u> for a period of <u>1</u> years which contract is hereby referred to and made a part hereof.
WHEREAS, the Obligee has agreed to accept a bond guaranteeing the performance of said contract for a period of one year.

NOW, THEREFORE, THE CONDITIONS OF THE ABOVE OBLIGATION IS SUCH, that if the Principal shall well and truly perform each and every obligation in said Contract at the time and in the manner specified during the term of this bond, and shall reimburse said Obligee for any loss which said Obligee may sustain by reason of failure or default on the part of said Principal, than this obligation shall be void, otherwise to remain in full force and effect.

PROVIDED, HOWEVER, That this bond is subject to the following conditions:

- 1. This bond is for the term beginning October 1, 2019 and ending September 30, 2020. The bond may be extended for additional terms at the option of the surety, by continuation certificate executed by the Surety. This bond may also be cancelled by the Surety with thirty (30) days written notice to the Obligee. Neither non-renewal or cancellation by the Surety, nor failure, nor inability of the Principal to file a replacement bond shall constitute a loss to the Obligee recoverable under this bond.
- 2. In the event of default, the Surety will have the right and opportunity, at its sole discretion, to: a) cure the default; b) assume the remainder of the Contract and to perform or sublet same; c) or to tender to the Obligee funds sufficient to pay the cost of completion less the balance of the Contract price up to an amount not to exceed the penal sum of the bond. In no event shall the Surety be liable for fines, penalties, liquidated damages, or forfeitures assessed against the Principal.
- No claim, action, suit or proceeding, except as hereinafter set forth, shall be had or maintained against
 the Surety on this instrument unless same be brought or instituted upon the Surety within one year from
 termination or expiration of the bond term.
- No right of action shall accrue on this bond to or for the use of any person or corporation other than the Obligee named herein or the heirs, executors, administrator or successors of Obligee.
- 5. The aggregate liability of the surety is limited to the penal sum stated herein regardless of the number or amount of claims brought against this bond and regardless of the number of years this bond remains in force.
- If any conflict or inconsistency exists between the Surety's obligations or undertakings as
 described in this bond and as described in the underlying document, then the terms of this
 bond shall prevail.
- 7. This bond shall not bind the Surety unless the bond is accepted by the Obligee. The

acknowledgement and acceptance of this bond is demonstrated by signing where indicated below. If this obligation is not accepted by way of signature of the Obligee below, this bond shall be deemed null and void.

	Signed and sealed this 19th	day of	September			
)				
	PRINCIPAL:	1	SURETY:			
1 '	Waste Pro of Florida, Inc.	(seal)	RLI Insurance Con	ipany (seal)		
By:	Malue	— Ву∻	111			
1 19	(name & title) ministrator	_//	Attorney-in-Fact Joshua Santord			
	Color		Joshua Samoru			
	THE ABOVE TERMS AND					
	ACCEPTED BY AN AUTH	IORIZED R	EPRESENTATI	VE OF THE (OB	LIGEE).	
	ACKNOWLEDGED AND A	ACCEPTEI	BY OBLIGEE:			
	BY:				WHENCE ONLY	
	PRINTED NAME/TITLE:	2			ORPORAT. E	
	DATE:				SRAL	
	PLEASE RETURN A COPY	OF ACCE	TED BOND TO:		The state of the s	
					WINGTIN O JUM	

POWER OF ATTORNEY

RLI Insurance Company Contractors Bonding and Insurance Company

9025 N. Lindbergh Dr. Peoria, IL 61615 Phone: 800-645-2402

Bond No. CMS0292597

Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes, but may be detached by the approving officer if desired.

That this Power of Attorney may be effective and given to either or both of RLI Insurance Company and Contractors Bonding and Insurance Company, required for the applicable bond.

each authorized and licensed to do business in all states and the District							
Joshua Sanford in the City of							
it's true and lawful Agent and Attorney in Fact, with full power an	d authority hereby conferred upon him/her to sign, execute,						
acknowledge and deliver for and on its behalf as Surety, in general, as	ny and all bonds and undertakings in an amount not to exceed						
Twenty Five Million Dollars (\$25,000,000) for any single obligation, an	d specifically for the following described bond.						
Obligee: Alachua County, FL							
	RLI Insurance Company and Contractors Bonding and Insurance Company, as applicable, have each further certified that the following is a true and exact copy of a Resolution adopted by the Board of Directors of each such corporation, and now in force, to-wit:						
"All bonds, policies, undertakings, Powers of Attorney or other corporate name of the Corporation by the President, Secretary, as or by such other officers as the Board of Directors may author Assistant Secretary, or the Treasurer may appoint Attorneys in policies or undertakings in the name of the Corporation. The corpolicies, undertakings, Powers of Attorney or other obligations of the corporate seal may be printed by facsimile or other electronic	ny Assistant Secretary, Treasurer, or any Vice President, rize. The President, any Vice President, Secretary, any Fact or Agents who shall have authority to issue bonds, porate seal is not necessary for the validity of any bonds, if the Corporation. The signature of any such officer and						
IN WITNESS WHEREOF, RLI Insurance Company and/or Contra	ctors Bonding and Insurance Company, as applicable, have						
caused these presents to be executed by its respective Vice President with							
September, 2019.	RLI Insurance Company						
RANCE COMMENTAL MEDIA	Contractors Bonding and Insurance Company						
CDAT	σ						
SEAL	B.H. W. D						
State of Illinois	Barton W. Davis Vice President						
County of Peoria SS	CERTIFICATE						
On this 19th day of September , 2019, before me, a Notary Public, personally appeared Barton W. Davis , who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the RLI Insurance Company and/or Contractors Bonding and Insurance Company, and acknowledged said instrument to be the voluntary act and deed of said corporation. By: Mathen L Mangle.	I, the undersigned officer of RLI Insurance Company and/or Contractors Bonding and Insurance Company, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the RLI Insurance Company and/or Contractors Bonding and Insurance Company this 19th day of September , 2019.						
Gretchen L. Johnigk Notary Public	RLI Insurance Company Contractors Bonding and Insurance Company						
GRETCHEN I. JOHNIGK PUBLIC "OFFICIAL SEAL." STATE OF ILLIMOIS My Commission Expires May 26, 2020	By: Alan M. Stephenson Corporate Secretary A00A181						

RLI Insurance Company Annually Renewable Performance Bond BOND # CMS0292597

THIS IN THE WIELT ET THESE THESE THE TWO THE TO OTT TOTICE, THE				
(hereinafter called the Principal), and RLI Insurance Company (hereinafter called the Surety), are held and firmly				
bound unto Alachua County, FL (hereinafter				
called the Obligee), in the full and just sum of Nineteen Thousand Eight Hundred Ninety Five Dollars and 97/100 Dollars				
(\$ 19,895.97), the payment of which sum, well and truly to be made, the said Principal and Surety bind				
themselves, and each of their heirs, administrators, executors, and assigns, jointly and severally, firmly by these				
presents.				
WHEREAS, the Principal has by written agreement dated the 1st_day of October, 2019 entered into a Contract with the Obligee for Franchise Fee Agreement - Alachua County Florida for a period of 1 years which contract is hereby referred to and made a part hereof.				
WHEREAS, the Obligee has agreed to accept a bond guaranteeing the performance of said contract for a period of one year.				

NOW, THEREFORE, THE CONDITIONS OF THE ABOVE OBLIGATION IS SUCH, that if the Principal shall well and truly perform each and every obligation in said Contract at the time and in the manner specified during the term of this bond, and shall reimburse said Obligee for any loss which said Obligee may sustain by reason of failure or default on the part of said Principal, than this obligation shall be void, otherwise to remain in full force and effect.

PROVIDED, HOWEVER, That this bond is subject to the following conditions:

KNOW ALL MEN BY THESE PRESENTS: That Waste Dro of Florida Inc.

- 1. This bond is for the term beginning October 1, 2019 and ending September 30, 2020. The bond may be extended for additional terms at the option of the surety, by continuation certificate executed by the Surety. This bond may also be cancelled by the Surety with thirty (30) days written notice to the Obligee. Neither non-renewal or cancellation by the Surety, nor failure, nor inability of the Principal to file a replacement bond shall constitute a loss to the Obligee recoverable under this bond.
- 2. In the event of default, the Surety will have the right and opportunity, at its sole discretion, to: a) cure the default; b) assume the remainder of the Contract and to perform or sublet same; c) or to tender to the Obligee funds sufficient to pay the cost of completion less the balance of the Contract price up to an amount not to exceed the penal sum of the bond. In no event shall the Surety be liable for fines, penalties, liquidated damages, or forfeitures assessed against the Principal.
- No claim, action, suit or proceeding, except as hereinafter set forth, shall be had or maintained against
 the Surety on this instrument unless same be brought or instituted upon the Surety within one year from
 termination or expiration of the bond term.
- No right of action shall accrue on this bond to or for the use of any person or corporation other than the Obligee named herein or the heirs, executors, administrator or successors of Obligee.
- 5. The aggregate liability of the surety is limited to the penal sum stated herein regardless of the number or amount of claims brought against this bond and regardless of the number of years this bond remains in force.
- If any conflict or inconsistency exists between the Surety's obligations or undertakings as
 described in this bond and as described in the underlying document, then the terms of this
 bond shall prevail.
- 7. This bond shall not bind the Surety unless the bond is accepted by the Obligee. The

acknowledgement and acceptance of this bond is demonstrated by signing where indicated below. If this obligation is not accepted by way of signature of the Obligee below, this bond shall be deemed null and void.

	Signed and sealed this <u>19th</u> day of _	September , 2019 .
Ву:	PRINCIPAL: Waste Pro of Florida, Inc. (seal) (name & title)	SURETY: RLI Insurance Company (seal) By: Attorney-in-Fact Joshua Sanford
		OTTIONS OF THIS BOND HAVE BEEN REVIEWED AND D REPRESENTATIVE OF THE (OBLIGEE).
	ACKNOWLEDGED AND ACCEPT	TED BY OBLIGEE:
	BY: PRINTED NAME/TITLE: DATE:	CORPORATE SEA I
	PLEASE RETURN A COPY OF ACC	CEPTED BOND TO:

POWER OF ATTORNEY

RLI Insurance Company Contractors Bonding and Insurance Company

9025 N. Lindbergh Dr. Peoria, IL 61615 Phone: 800-645-2402

Bond No. CMS0292597

Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes, but may be detached by the approving officer if desired.

That this Power of Attorney may be effective and given to either or both of RLI Insurance Company and Contractors Bonding and Insurance Company, required for the applicable bond.

Insurance Company, required for the applicable bond.			
That RLI Insurance Company and/or Contractors Bonding and Ineach authorized and licensed to do business in all states and the District of Joshua Sanford in the City of	of Columbia do hereby make, constitute and appoint:		
it's true and lawful Agent and Attorney in Fact, with full power an acknowledge and deliver for and on its behalf as Surety, in general, ar Twenty Five Million Dollars (\$25,000,000) for any single obligation, and	ny and all bonds and undertakings in an amount not to exceed		
Principal: Waste Pro of Florida, Inc.			
Obligee: Alachua County, FL			
RLI Insurance Company and Contractors Bonding and Insurance following is a true and exact copy of a Resolution adopted by the Boto-wit:			
"All bonds, policies, undertakings, Powers of Attorney or other corporate name of the Corporation by the President, Secretary, an or by such other officers as the Board of Directors may author Assistant Secretary, or the Treasurer may appoint Attorneys in policies or undertakings in the name of the Corporation. The corpolicies, undertakings, Powers of Attorney or other obligations of the corporate seal may be printed by facsimile or other electronic in WITNESS WHEREOF, RLI Insurance Company and/or Contractions of the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other electronic in the corporate seal may be printed by facsimile or other e	ny Assistant Secretary, Treasurer, or any Vice President, rize. The President, any Vice President, Secretary, any Fact or Agents who shall have authority to issue bonds, porate seal is not necessary for the validity of any bonds, if the Corporation. The signature of any such officer and image." ctors Bonding and Insurance Company, as applicable, have		
caused these presents to be executed by its respective Vice President with September, 2019.	-		
SEPTEMBET, 2013	RLI Insurance Company Contractors Bonding and Insurance Company		
SEAL SEAL	B. H. W. A		
State of Illinois SS	Barton W. Davis Vice President		
County of Peoria	CERTIFICATE		
On this 19th day of September, 2019, before me, a Notary Public, personally appeared Barton W. Davis, who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the RLI Insurance Company and/or Contractors Bonding and Insurance Company, and acknowledged said instrument to be the voluntary act and deed of said corporation. By: Mathen L. Manugh.	I, the undersigned officer of RLI Insurance Company and/or Contractors Bonding and Insurance Company, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the RLI Insurance Company and/or Contractors Bonding and Insurance Company this day of September, 2019		
Gretchen L. Johnigk Notary Public	RLI Insurance Company Contractors Bonding and Insurance Company		
GRETCHEN L JOHNIGK PUBLIC STATE OF ILLINOIS My Commission Expires May 26, 2020	By: Jean M. Stephenson Corporate Secretary		