



2021038388 11A

2200 Renaissance Blvd. Ste. 400 King of Prussia, PA 19406-2755 Ph. (610) 832-8240

CHANGE RIDER

To be attached to and form a part of surety bond number	dated the 11th
day of,,, issued byLiberty	Mutual Fire Insurance Company
as surety (the "Surety"), on behalf ofAngel Brothers En	terprises, Ltd. and B-Brook Land Partners, LP
	, as principal (the "Principal"),
in favor of Fort Bend County	
	, as obligee (the "Obligee").
The Principal and the Surety hereby consent to changin	ng the attached bond as follows:
The penalty for this subdivision bond is \$8,500.00 whi	ch represents pavement repairs for Bonbrook
Plantation South Section Ten	
This change is effective _ 25th _ day of _ February	_,2021 The attached bond shall be subject to all
of its terms, conditions and limitations except as herein modified	
IN WITNESS WHEREOF, said Principal and Surety have	
sealed this 25th day of February , 2021	
Source this	
WITNESS / ATTEST:	Angel Brothers Enterprises, Ltd.
0	(Principal)
	Name: Chance Angel, Vice President
	Liberty Mutual Fire Insurance Company
	(Surely)
ACCEPTED:	By: Attorney-in-Fact (Seal)
(Obligee)	Surety Phone No. (617) 357-9500
By: KP George, County Judge (Seal) Name: Title:	= - 1 deg
Date: March 9, 2021	

CCM 3 - 9-2021 # 1 A
Fort Bend County Clerk
Return Admin Serv Coord - RAC



This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Liberty Mutual Fire Insurance Company Wausau, Wisconsin

Certificate No: 8202693 - 971801

POWER OF ATTORNEY

Barry R. McCold,	David T. Miclette, Laure	en O. Moudy, Heathe	er inoles, Robert	Wi. Overbey, Jr.		_
all of the city of power and authority had redelegation, as follows:		state ofs name, place and stead	TX d, to sign, execute,		there be more than one named, its true and lawful attorney(s)-in-fact, wit eliver in their/its behalf, and as their/its act and deed, without power of	full
b	onds, undertakings, reco	ognizances, contracts	of indemnity, and	d all other surety o	bligations, as required, unlimited as to Dollar amount	
	npany(ies) making this ap If the acts of said attorney(ch bond or undertaking was signed by the duly authorized officers on dconfirmed.	the
		AUTHORITY	FOR MAKING API	POINTMENT OF AT	TORNEYS-IN-FACT	Γ
amended and by Un Authority and autho	animous Consent of the E	Board of Directors date ary signing below to ap	ed May 21st, 2013 opoint attorneys-in-	Further, the Pres fact as may be nec	e V, Section 10 of Liberty Mutual Fire Insurance Company's By-Law- ident of Liberty Mutual Fire Insurance Company, executed a Delegation essary to act on behalf of Liberty Mutual Fire Insurance Company to resurety obligations.	n of
	OF, Liberty Mutual Fire In December , 2019	The contract of the contract o	caused these pre	sents to be signed b	y its authorized representatives, and its Corporate Seal to be hereto aff	ked,
				ORE INC	Liberty Mutual Fire Insurance Company	
			(1908 CONSTRUCTION	By: David M. Carey, Assistant Secretary	
				A	ttest: Lisa Love	
State of PENNSYLVA County of MONTGOR						
The foregoing instrun nsurance Company.	nent was acknowledged be	fore me thisSth	day of December	er , 2019 by E	avid M. Carey, an authorized representative of Liberty Mutual Fire Insur	nce
	(OF ADVIOLATION OF THE PROPERTY	Notari Teresa Pastelli Upper Merion Twp. My Commission Exp	OF PENNSYLVANIA al Seal a, Notary Public Montgomery County pires March 28, 2021 Association of Notaries	By: Levesa Pastella Teresa Pastella, Notary Public	ance

CERTIFICATE

I, the undersigned, an Assistant Secretary of Liberty Mutual Fire Insurance Company, do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the officer or official who executed the said power of attorney was one of the officers or officials specially authorized by the Board of Directors to appoint attorneys-in-fact as provided in the Unanimous Consent and Vote of the Board of Directors of Liberty Mutual Fire Insurance Company dated May 21, 2013.

This certificate and the above power of attorney may be signed by facsimile or mechanically reproduced signatures under and by authority of the Board of Directors of Liberty Mutual Fire Insurance Company evidenced by the Unanimous Consent and Vote of the Board of Directors dated June 28, 2006 wherein it was

VOTED that the signatures of such officers and the seal of the Company may be affixed to any such power of attorney or to any certificate relating thereto by facsimile, and any such power of attorney or certificate bearing such facsimile signature and facsimile seal shall be valid and binding upon the Company when so affixed and in the future with respect to any surety undertakings, bonds, recognizances and other surety obligations to which it is attached.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said company, affixed, this 25 day of February 202/



y: Kening

Renee C. Llewellyn, Assistant Secretary



TEXAS IMPORTANT NOTICE

To obtain information or make a complaint:

You may call toll-free for information or to make a complaint at 1-877-751-2640

You may also write to:

2200 Renaissance Blvd., Ste. 400 King of Prussia, PA 19406-2755

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at 1-800-252-3439

You may write the Texas Department of Insurance Consumer Protection (111-1A)

P. O. Box 149091 Austin, TX 78714-9091 FAX: (512) 490-1007

Web: http://www.tdi.texas.gov

E-mail: ConsumerProtection@tdi.texas.gov

PREMIUM OR CLAIM DISPUTES:

Should you have a dispute concerning your premium or about a claim you should first contact the agent or call 1-800-843-6446. If the dispute is not resolved, you may contact the Texas Department of Insurance.

ATTACH THIS NOTICE TO YOUR POLICY:

This notice is for information only and does not become a part or condition of the attached document.

TEXAS AVISO IMPORTANTE

Para obtener informacion o para someter una queja:

Usted puede llamar al numero de telefono gratis para informacion o para someter una queja al 1-877-751-2640

Usted tambien puede escribir a:

2200 Renaissance Blvd., Ste. 400 King of Prussia, PA 19406-2755

Puede comunicarse con el Departamento de Seguros de Texas para obtener informacion acerca de companias, coberturas, derechos o quejas al 1-800-252-3439

Puede escribir al Departamento de Seguros de Texas Consumer Protection (111-1A) P. O. Box 149091

Austin, TX 78714-9091 FAX # (512) 490-1007

Web: http://www.tdi.texas.gov

E-mail: ConsumerProtection@tdi.texas.gov

DISPUTAS SOBRE PRIMAS O RECLAMOS:

Si tiena una disputa concerniente a su prima o a un reclamo, debe comunicarse con el agente o primero. Si no se resuelve la disputa, puede entonces comunicarse con el departamento (TDI)

UNA ESTE AVISO A SU POLIZA:

Este aviso es solo para proposito de informacion y no se convierte en parte o condicion del documento adjunto.

FILED AND RECORDED OFFICIAL PUBLIC RECORDS

*

Laura Richard. County Clerk Fort Bend County Texas March 11, 2021 04:07:17 PM

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FEE: \$0.00

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