# SURETY RIDER

Sienna Sec. 32A and 32B

To be attached to and form a part of					
Bond No.					
Type of Bond:	Subdivision				
dated effective	11/4/20 (MONTH-DAY-YEAR)				
executed by	Harris Construction Company, Ltd.		,as Principal,		
	(PRINCIPAL)				
and by	Liberty Mutual Insurance Company	,as Surety,			
in favor of	in favor of KP George, County Judge of Fort Bend County, Texas (OBLIGEE)				
in considera	ation of the mutual agreements herein contained	the Principal and the Surety hereby consent to change	ging		
Amend bo	nd amount from \$128,752.40 to \$64,376.	20			
Nothing her	ein contained shall vary, alter or extend any pro-	vision or condition of this bond except as herein expre	ssly stated.		
This rider	05/19/21				
is effective	(MONTH-DAY-YEAR)				
Signed and	Sealed 05/19/21				
	(MONTH-DAY-YEAR)				
	Harris Construction Company, Ltd.				
By:	Me	Karrie Construction Company,			
	(PRINZ(PAC)	TTC			
00000	iberty Mutual Insurance Company	Larry A. Harris Man <b>ager</b>			
By:	Minkelle				
HO	(ATTORNEY-IN-FACT) Michelle Ulery				
Po					
	A CONTRACTOR OF THE PARTY OF TH				

CCM 6-1-20 21 # 13A
Fort Bend County Clerk Return Admin Serv Coord - RAC

FRP



Michelle Ulery, Kelly J. Brooks, C.A. McClure, Kenneth L. Meyer

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 Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Certificate No: 8200515

# POWER OF ATTORNEY KNOWN ALL PERSONS BY THESE PRESENTS: That The Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that

Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized

under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint,

	all of the city of <u>Cvpress</u> state of <u>TX</u> each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper					
	persons.					
	IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 13th day of February , 2019 .					
	Liberty Mutual Insurance Company					
٦	INSUR INSUR The Ohio Casualty Insurance Company					
1	West American Insurance Company	>	÷			
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i	Color and Stand Cong	ğ	ű			
1	By:		3			
	David M. Carey, Assistant Secretary	husinese day	3			
	State of PENNSYLVANIA County of MONTGOMERY SS	2	9			
7	On this 13th day of February . 2019 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance	5	5			
	Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes	<u>_</u> ;	=			
1	therein contained by signing on behalf of the corporations by himself as a duly authorized officer.	Eg.	Ĺ			
į		ع ج	Ξ			
	IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.	Attorney	ā.			
;	SP PAST	ᅙ	3			
?	COMMONWEALTH OF PENNSYLVANIA	₹ <	ŕ			
5	Notarial Seel Teresa Pascieta. Nocary Public Upoger Menon Twp., Monitopemery County By: Urusa Pastella	5	₹			
ادِ	Upper Menon Typ., Montgomery County By: Livea Nasielle	? نوا	5			
3	My Commission Expires March 28, 2021 Teresa Paŝtella, Notary Public	10 6	ē			
5	Member Pennsylvania Association of Notanes	ح ۵	2			
•	This Course of Attention is made and accounted account to and by authority of the following Dutant and Attentions of The Objec Courses, Income Courses, March 186, and	this Power of A	'n			
?	This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:	7	=			
	Insurance company, and mest Affection to Decemberry which resolutions are now in tall force and effect reducing as follows.	alidity of the	ğ			
2	ARTICLE IV - OFFICERS; Section 12. Power of Attorney.	5	ä			
1	Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the					
•	President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall					
,	any and all undertakings, bonds, recognizances and other surety deligations. Such altorneys-in-fact, subject to the limitations set forth in their respective powers or attorneys, shall be have full power to bind the Corporation. When so executed, such a subject to the seal of the Corporation. When so executed, such a subject to the seal of the Corporation.					
	instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney in-fact under the					
í	provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.	E 6	ó			
	ADTICLE VIII. Exercision of Contractor Continue Course, and Contractor of Contractor of Contractor of Contractor Continue Contractor Continue Contractor C	confirm th	2			
	ARTIOLE AND Exception of Contractor Control of Control and Control	1 - 4	P			
	Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings,					
	bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the	-				
	Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if					
	signed by the president and attested by the secretary.					
	Certificate of Designation - The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys in-					
	fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety					
	obligations.					
	Authorization - By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the					
	Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with					
	the same force and effect as though manually affixed.					
	I, Renee C. Liewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual insurance Company, and West American insurance Company do					
	hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies is in full legge and effect and					
	has not been revoked.					
	IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 19th day of 2021.					
		<i>y</i> .				
	INSURATION OF THE WAY					
	( 1912 ) ( 1919 ) ( 1991 ) ( 1991 ) ( 1991 ) ( 1991 )					
		N .				
	Renee C. Llewellyn, Assistant Secretary					
	LMS-12873 LMIC OCIC WAIC Multi Co_062018	•				
	To the state of th					



## **TEXAS** IMPORTANT NOTICE

To obtain information or make a complaint:

You may call tell-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 (III-IA) P. O. Box 149091 Austin, TX 78714-9091

FAX: (512) 490-1007 Web: http://www.tdi.texps.gov

E-mail: ConsumerProtection@tdi.texas.gov

#### PREMIUMOR 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.

NP 70 68 09 01 LMS 15792 10/15

#### **TEXAS AVISO IMPORTANTE**

Para obtener informacion o para someter una queja:

Ukred puede Hamar al numero de telefinno gratis para información o para someter una queja al 1-877-751-2640

Usted tambien piæde 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.ldi.lckiis.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 información 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 June 04, 2021 04:00:41 PM

FEE: \$0.00

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