FRP



SURETY RIDER

Sienna Section 30

	ched to and form a part of		
Bond No.			
Type of Bond:	Subdivision		
dated	02/17/2022		
effective	(MONTH-DAY-YEAR)		
executed by	Harris Construction Company, LLC		,as Principal,
	(PRINCIPAL)		
and by	Liberty Mutual Insurance Company	as Surety,	
in favor of	KP George, County Judge of Fort Bend C	County, Texas	
in consider	ation of the mutual agreements herein contained	d the Principal and the Surety hereby conse	ent to changing
Amend bo	ond amount from \$ \$302,120.70 to \$15		
	\$302,120.70 to \$15	51,060.35	
This rider	rein contained shall vary, alter or extend any pro		erein expressly stated.
	rein contained shall vary, alter or extend any pro		erein expressly stated.
This rider	rein contained shall vary, alter or extend any pro 02/17/2022 (MONTH-DAY-YEAR) Sealed 02/17/2022 (MONTH-DAY-YEAR) Harris Construction Company, Ltd.		erein expressly stated.
This rider is effective	rein contained shall vary, alter or extend any pro 02/17/2022 (MONTH-DAY-YEAR) Sealed 02/17/2022 (MONTH-DAY-YEAR) Harris Construction Company, Ltd.	ovision or condition of this bond except as he Harris Construction Company,	erein expressly stated.
This rider is effective	rein contained shall vary, alter or extend any pro 02/17/2022 (MONTH-DAY-YEAR) Sealed 02/17/2022 (MONTH-DAY-YEAR) Harris Construction Company, Ltd.	ovision or condition of this bond except as h	erein expressly stated.
This rider is effective	rein contained shall vary, alter or extend any pro 02/17/2022 (MONTH-DAY-YEAR) Sealed 02/17/2022 (MONTH-DAY-YEAR) Harris Construction Company, Ltd. (PRINCIPAL)	Harris Construction Company, LLC Larry A. Harris	erein expressly stated.

CCM 03/08/2022 #11A Fort Bend County Clerk Return Div Supervisor Admin RAC

LMS-12873 LMIC OCIC WAIC Multi Co_062018



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, Michelle Ulery, Kelly J. Brooks, C.A. McClure, Kenneth L. Meyer
all of the city of Cypress state of TX 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 duty 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
State of PENNSYLVANIA Country of Montgomery On this 13th day of February On this 13th day of February 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 therein contained by signing on behalf of the corporations by himself as a duly authorized officer. Commonwealth of Pennsylvania, on the day and year first above written. Commonwealth of Pennsylvania, on the day and year first above written. Commonwealth of Pennsylvania, on the day and year first above written.
County of MONTGOMERY 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 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 therein contained by signing on behalf of the corporations by himself as a duly authorized officer.
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. COMMONWEALTH OF PENNSYLVANIA Notarial Seal Teresa Pastella, Notary Public Upper Merion Twp. Montgomery County My Commission Expriss March 28, 2021 Member: Pennsylvania Association of Notanes By: Teresa Pastella, Notary Public
Treesa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Express March 28, 2021 Memoer, Pennsylvania Association of Notares Treesa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Express March 28, 2021 Memoer, Pennsylvania Association of Notares Treesa Pastella, Notary Public Teresa Pastella, N
ARTICLE XIII – Execution of Contracts: Section 5. Surety Bonds and Undertakings. 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-infact 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. Llewellyn, 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 torce and effect and has not been revoked. IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seals of said Companies this
1912 O PORALE TO SECRETARY OF THE SECRET



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-IA)
P. O. Box 149091

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

Web: http://www.tdi.texes.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 información o para someter una queja:

Usted puede Hamar at numero de telefono gratis para información 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 información acerca de companias, coberturas, derechos o quejos al 1-800-252-3439

Puede escribir al Departamento de Seguros de Texas Consumer Protection (114-1A) P. O. Box 149091 Austin, TX 78714-9091 FAX # (512) 490-1007 Web: http://www.idi.texas.gov

E-mail: ConsumerProtection@tdi.texas.gov

DISPUTAS SOURE 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 condición del documento adjunto.

NP 70 68 09 01

FILED AND RECORDED OFFICIAL PUBLIC RECORDS

Laura Richard, County Clerk Fort Bend County Texas March 11, 2022 02:31:24 PM

FEE: \$0.00

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