Surety Bond No. CIC1917616

LABOR AND MATERIAL BOND (CONSTRUCTION)

WHEREAS, the City of Riverside, a municipal corporation of the State of California, and UTTAMPAR, INC.

hereinafter referred to as "Principal", have entered into an agreement whereby Principal agrees to install and complete certain designated public improvements, which said agreement, dated June 25th

, 2021, and identified as Agreement for Construction of Improvements for project designated as Parcel Map 33375, is hereby referred to and made a part hereof; and

WHEREAS, under the terms of said agreement, Principal is required before entering upon the performance of the work, to file a good and sufficient payment bond with the City of Riverside to secure the claims to which reference is made in Title 15 (commencing with Section 3082) of Part 4 of Division 3 of the Civil Code of the State of California;

NOW THEREFORE, said principal and Capitol Indemnity Corporation corporation organized and doing business under and by virtue of the laws of the State of Wisconsin , and duly licensed by the State of California for the purpose of making, guaranteeing or becoming sole surety upon bonds or undertakings required or authorized by the laws of the State of California, as Surety, and held firmly bound unto the City of Riverside and all contractors, subcontractors, laborers, material suppliers and other persons employed in the performance of the aforesaid agreement and referred to in the aforesaid Code οf Civil Procedure in One Hundred Nine Thousand Fifty Dollars (\$109,050.00) for materials furnished or labor thereon of any kind, or for amounts due under the Unemployment Insurance Act with respect to such work or labor, that said Surety will pay the same in an amount not exceeding the amount hereinabove set forth, and also in case suit is brought upon this bond, will pay, in addition to the face amount thereof, costs and reasonable expenses and fees, including reasonable attorney's fees incurred by the City of Riverside in successfully enforcing such obligations, to be awarded and fixed by the court, and to be taxed as costs and to be included in the judgment therein rendered.

It is thereby expressly stipulated and agreed that this bond shall inure to the benefit of any and all persons, companies and corporations entitled to file claims under Title 15 (commencing with Section 3082) of Part 4 of Division 3 of the Civil Code, so as to give a right of action to them or their assigns in any suit brought upon this bond.

Should the condition of this bond be fully performed, then this obligation shall become null and void, otherwise it shall be and remain in full force and effect.

The Surety hereby stipulates and agrees that no change, extension of time, alteration or addition to the terms of said agreement or the specifications accompanying the same shall in any manner affect its

obligations on this bond, and it does hereby waive notice of any such change, extension, alteration or addition.

IN WITNESS WHEREOF, this instrument has been duly executed by the Principal and Surety above named on October 29th

Principal

By Dendat Maheshingi

1600 Aspen Commons Middleton, WI 53562

Address of Corporate Surety

Capitol Indemnity Corporation

Middleton, WI

By Phillip Simons Attorney-in-fact

53562

City

Surety

Zip Code

(800) 462-8135

Phone

Phillip Simons

Producer (Bond Issuing Agent)

8201 N. Hayden Rd

Address

Scottsdale, AZ

85258

City

Zip Code

480 947 3556

Phone

NOTE:

Signature of Attorney-in-fact to be acknowledged before a Notary

Public.

Attach Power of Attorney.

· see Noturized Attachment

Approved as to Form:

Brandon S. Mercer

Deputy City Attorney

| STATE OF Arizona | — T |
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| COUNTY OF Maricopa | SS. |
| On October 29, 2021 | Myle Niemtschk, Notary Public |
| Diame, Deloie | me, Tyle Hieritgenk, Notary Fublic |
| PERSONALLY APPEARED Phillip Simons | |
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| | |
| personally known to me (or proved to me on the beatisfactory evidence) to be the person(s) whose name(s | asis of |
| subscribed to the within instrument and acknowled | lged to |
| ne that he/she/they executed the same in his/he | r/their |
| authorized capacity(ies), and that by his/her/their signal on the instrument the person(s), or the entity upon | ature(s) KYLE NIEMTSCHK |
| of which the person(s) acted, executed the instrument | Notary Public - Arizona Maricopa County |
| | Commission # 552493 My Comm, Expires Sep 23, 2022 |
| VITNESS my hand and official seal. | |
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CAPITOL INDEMNITY CORPORATION POWER OF ATTORNEY

CIC1917616

| POWER OF AT | TORNEY | Bond Number |
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| KNOW ALL MEN BY THESE PRESENTS, That the CAPITOL INDEMNIT principal offices in the City of Middleton, Wisconsin, does make, constitute and ap | Y CORPORATION, a corporation of the Stepoint | ate of Wisconsin, having its |
| MICHAEL D LAPRE; DEBORAH M MCGUCKIN; YVONNE WEATHERFORD; PHILLIP SIMONS; ERIN | RYAN ROGERS; KEVIN P SHINE; JAREN M BROWN; COLLEEN E. WATSON; ARTYCE J | ARX OHNSON |
| its true and lawful Attorney(s)-in-fact, to make, execute, seal and deliver for a undertakings and contracts of suretyship, provided that no bond or undertaking | nd on its behalf, as surety, and as its act a | nd deed, any and all bonds. |
| amount the sum of ALL WRITTEN INSTRUMENTS IN AN AM | · - | |
| This Power of Attorney is granted and is signed and sealed by facsimile under an Directors of CAPITOL INDEMNITY CORPORATION at a meeting duly call- | d by the authority of the following Resolutioned and held on the 15th day of May, 2002. | 1 adopted by the Board of |
| "RESOLVED, that the President, Executive Vice President, Vice President, Sec are granted the power and authorization to appoint by a Power of Attorney for other writings obligatory in the nature thereof, one or more resident vice-presider powers and duties usual to such offices to the business of this company; the signar power of attorney or to any certificate relating thereto by facsimile, and any suffacsimile seal shall be valid and binding upon the Company, and any such power be valid and binding upon the Company in the future with respect to any bond or attached. Any such appointment may be revoked, for cause, or without cause, by a | the purposes only of executing and attesting atts, assistant secretaries and attorney(s)-in-facture of such officers and seal of the Companich power of attorney or certificate bearing so executed and certified by facsimile signal undertaking or other writing obligatory in the | bonds and undertakings, and t, each appointee to have the y may be affixed to any such such facsimile signatures or tures and facsimile seal shall |
| In connection with obligations in favor of the Florida Department of Transport Attorney-in-Fact includes any and all consents for the release of retained pero required by the State of Florida Department of Transportation. It is fully unders making payment of the final estimate to the Contractor and/or its assignee, shall no | entages and/or final estimates on engineerin tood that consenting to the State of Florida I | g and construction contracts Department of Transportation |
| In connection with obligations in favor of the Kentucky Department of Highw Attorney-in-Fact cannot be modified or revoked unless prior written personal not Highways of the Commonwealth of Kentucky at least thirty (30) days prior to the | tice of such intent has been given to the Co | nthority hereby given to the mmissioner – Department of |
| IN WITNESS WHEREOF, the CAPITOL INDEMNITY CORPORATION corporate seal to be hereto affixed duly attested, this 1st day of January, 2020. | has caused these presents to be signed by its | s officer undersigned and its |
| Ryan J. Byrnes Senior Vice President, Chief Financial Officer and Treasurer Suzanne M. Broadbant Assistant Secretary | CAPITOL INDEM | INITY CORPORATION Sennott, Jr. |
| Suzanne M. Broadbent Assistant Secretary | Chief Executive | Officer and President |
| STATE OF WISCONSIN COUNTY OF DANE S.S.: | | |
| On the 1st day of January, 2020 before me personally came John L. Sennott, he resides in the County of Hartford, State of Connecticut; that he CORPORATION, the corporation described in and which executed the al seal affixed to said instrument is such corporate seal; that it was so affixed b thereto by like order. | is Chief Executive Officer and Preside pove instrument; that he knows the seal y order of the Board of Directors of said corp | nt of CAPITOL INDEMNITY of the said corporation; that the |
| STATE OF MISCONSIN | Daniel C | . Regule |
| STATE OF WISCONSIN COUNTY OF DANE S.S.: | Notary Publ | l J. Regele ic, Dane Co., WI sion Is Permanent |
| I, the undersigned, duly elected to the office stated below, now the incumbent in CAPITOL INDEMNITY CORPORATION, a Wisconsin Corporation, authorized to make this certificate, DO HEREBY CERTIFY that the foregoing attached Power of Attorney remains in full force and has not been revoked; and furthermore, that the Resolution of the Board of Directors, set forth in the Power of Attorney is now in force. | | |
| Signed and sealed at the City of Middleton, State of Wisconsin this 29th | day of October | , 2021 |
| SEA | | B. D. Thore |
| Wesconst Indianal Control of the Con | Andre Senior Vice President | w B. Diaz-Matos General Counsel and Secretary |

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

| A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. | | |
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| State of California County of | Elvin Lvcas II, Motary Public, Here Insert Name and Title of the Officer Mane(s) of Signer(s) | |
| subscribed to the within instrument and acknowled | evidence to be the person(s) whose name(s) is/are edged to me that he/she/they executed the same in s/her/their signature(s) on the instrument the person(s), ted, executed the instrument. | |
| | certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph s true and correct. | |
| MELVIN LUCAS II Notary Public - California Orange County Commission # 2319120 My Comm. Expires Jan 16, 2024 | WITNESS my hand and official seal. | |
| | Signature Signature-of-Notary Public | |
| | | |
| Place Notary Seal Above | | |
| Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. | | |
| Description of Attached Document Title or Type of Document: Labor Matc Number of Pages: 4-0ff Signer(s) Other Than | | |
| Capacity(ies) Claimed by Signer(s) Signer's Name: | Signer's Name: | |
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