NOTARY BOND

THE STATE OF ALABAM	1A,				
Shelby	County				
KNOW ALL MEN BY THE	ESE PRESENTS:				
business in the State of A Thousand Dollars (\$25,0	OWEN as Principal, and Alabama, as Surety, are he 100), for the payment of vis, and assigns, firmly by the Alabama.	eld and firmly bound which well and truly	to be made and	of Alabama, in the sur I done, we bind ours	m of Twenty Five selves, our heirs,
Sealed with our seals	s, and dated this <u>8th</u>	day ofFebru	ary , 201	3	
The condition of the of Notary Public for the standary commission, in an	above obligation, That who tate of Alabama at large or d for said County.	ereas the above both the the day of	and NANCY M. C.	WEN was duly appoint the term of four years	nted to the office s from the date of
	all faithfully perform and dis oid, otherwise to remain in	_		uring his continuance	therein then the
		Princip	al 11/	Owen	(L.S.)
		Princip	al		(L.S.)
Countersigned: By Alaban	Lele Hana, ma Resident Agent	······································	Auto-Owners In:	surance Company	CRS INSU
		By	Jam	Jan.	2 Deal
	Address	Jim Hou		Attorney-In-Fac	1
Taken and approved this	day of feb	many or) <u>3</u>	Approving Officer	
THE STATE OF ALABAM	MA, County	OATH OF OFFIC	Έ		
and the Constitution of	the state of Alabama, so se office upon which I am a	long as I continue	a citizen thereof;	and that I will faithfu	
Subscribed and swo day of	e Maney Public	8 + 4	James and the second se	M. Owen Principal	
	Auto	D-Occasers Instrumed Life Home Car Business		08000056300 1/3 \$33 Cnty Judge of Prob 2013 10:33:46 AM FI	
29395 (01-12)		Bellestellestelle	02/08	2013 10:33.43 1	

WHAT TO DO IN CASE OF LOSS In the event of claim or suit the Insured must notify the Company or its agency as soon as possible. The notice must give the Insured's name and policy number; the time, place and circumstances of the loss. The Insured must promptly send the Company any legal papers received relating to any claim or suit; and cooperate with the Company and assist the Company in any matter relating to a claim or suit. The Insured will not, except at the Insured's own costs, admit any liability, voluntarily make any payment, assume any obligation or incur any expenses without the Company's written consent.

OTHER INSURANCE If both this and other insurance apply to a loss, the Company will pay only its share. The Company's share will be the ratio of this insurance to the total amount of all insurance which applies. The Company's share shall not exceed the Limit of Liability stated in the Declarations.

CONCEALMENT OR FRAUD This entire policy is void if, whether before, during or after a loss, the Insured has: intentionally concealed or misrepresented any material fact or circumstance; engaged in fraudulent conduct; or made false statements; relating to this insurance.

ASSIGNMENT Interest in this policy may not be transferred without the Company's written consent.

CANCELLATION The Insured may cancel this policy by mailing or delivering to the Company, advance written notice of the date the Insured would like the cancellation to take effect. The Company may cancel this policy by mailing written notice of cancellation to the Insured at the Insured's last address known to the Company at least 30 days prior to the effective date of cancellation. If the law of your state requires any longer notice period or any special form or procedure for giving notice, we will comply with those requirements.

BANKRUPTCY The Company is not relieved of any obligation under this policy because of the bankruptcy or insolvency of the Insured.

SUIT AGAINST THE COMPANY Suit may not be brought against the Company unless there is full compliance with all the terms of this policy and until the obligation of the Insured to pay is finally determined either by judgment against an Insured after actual trial or written agreement of the Insured, the claimant and the Company.

CHANGES This policy and the Declarations include all the agreements between the Insured and the Company or its agency relating to this insurance. No change or waiver may be effected in this policy except by endorsement issued by the Company.

POLICY PERIOD This policy applies only to negligent acts, errors or omissions which happen during the policy period as shown in the Declarations.

NOTICE OF MEMBERSHIP AND ANNUAL MEETING

The Insured is notified that by virtue of this policy he or she is a member of the Auto-Owners Insurance Company and is entitled to vote, in person or by proxy, at all meetings of the Company. The annual meetings of the Company are held at its home office at Lansing, Michigan on the second Monday in May in each year at 10:00 A.M.

In witness whereof, the Auto-Owners Insurance Company, has caused this policy to be issued and to be duly signed by our President and Secretary.

William I Woodbury

Secretary

President

20130208000056300 2/3 \$33.00 20130208000056300 2/3 \$33.00 Shelby Cnty Judge of Probate, AL 02/08/2013 10:33:46 AM FILED/CERT

Print Date: 02/08/2013 Print Time: 11:14:18 AM

DATE AND ATTACH TO ORIGINAL BOND AUTO-OWNERS INSURANCE COMPANY

LANSING, MICHIGAN POWER OF ATTORNEY

NO.66153240

KNOW ALL MEN BY THESE PRESENTS: That the AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN, a Michigan Corporation, having its principal office at Lansing, County of Eaton, State of Michigan, adopted the following Resolution by the directors of the Company on January 27, 1971, to wit:

"RESOLVED, That the President or any Vice President or Secretary or Assistant Secretary of the Company shall have the power and authority to appoint Attorneys-in-fact, and to authorize them to execute on behalf of the Company, and attach the seal of the Company thereto, bonds and undertakings, recognizances, contracts of indemnity, and other writings obligatory in the nature thereof. Signatures of officers and seal of Company imprinted on such powers of attorney by facsimile shall have same force and effect as if manually affixed. Said officers may at any time remove and revoke the authority of any such appointee."

Does hereby constitute and appoint Jim House

its true and lawful attorney(s)-in-fact, to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, recognizances, contracts of indemnity and other writings obligatory in the nature thereof, and the execution of such instrument(s) shall be as binding upon the AUTO-OWNERS INSURANCE COMPANY AT LANSING, MICHIGAN as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at its principal office.

IN WITNESS WHERE this 2nd day of November, 2		RS INSURANCE COMP	'ANY AT LANSING, MICHIGAN, has cau	used this to be signed by its authorized officer
	A COLOR			
Kenneth R. Schroeder		Senior Vice Pi	esident	
depose and say that they are described in and which execusion and Corporate Seal, and the of the Board of Directors of	rember, 2012, before more re Kenneth R. Schroede cuted the above instrumnat they received said in	er, Senior Vice Presider ent, that they know the	neth R. Schroeder, to me known, who being the following of AUTO-OWNERS INSURANCE COMeseal of said corporation, that the seal affinite corporation by authority of their office processing the corporation of the following of the following company of	PANY, the corporation ked to said instrument is sursuant to a Resolution OF MICHAEL
My commision expires			Amanda Lamp	Notary Public
STATE OF MICHIGAN SS COUNTY OF EATON I, the undersigned First issue a power of attorney a resolution as set forth are not signed and sealed at Lansie	t Vice President, Secretas outlined in the above ow in force.	e board of directors re	solution remains in full force and effect a	MPANY, do hereby certify that the authority to as written and has not been revoked and the

William F. Woodbury, First Vice President, Secretary and General Counsel

20130208000056300 3/3 \$33.00 Shelby Cnty Judge of Probate, AL 02/08/2013 10:33:46 AM FILED/CERT