

RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

NOTARY PUBLIC BOND

Bond No. <u>LSM1088349</u>

STATE OF	Alabama	
COUNTY OF	Shelby	20180219000052550 1/3 \$36.00
KNOW ALL MEN B	Y THESE PRESENTS:	Shelby Cnty Judge of Probate, AL 02/19/2018 10:34:52 AM FILED/CERT
That we,	<u>.</u>	Suzanne M. Smith
		nsurance Company, a corporation duly
licensed to do business i	-	eld and firmly bound unto the State of Alabama in the sum of dollars (<u>\$25,000.00</u>)
- '	ch well and truly to be made and done, w	re bind ourselves, our heirs, executors, administrators and assigns, firmly by property exempt under the laws of Alabama.
Sealed with our seals, ar	nd dated this <u>3rd</u> day of <u>Janu</u>	<u>nary</u> , <u>2018</u> .
WHEREAS, the above-	named Principal has been duly appointed $\frac{217}{3}$; for the term of four years from d	Notary Public Alabama, (State at Large) on the 19 day of ate of notary commission.
		med Principal shall faithfully discharge the duties of the office of Notary all be null and void; otherwise, it shall remain in full force and effect.
		Suzane M. Smith (L.S.) Principal
	init.	RANCE COM
By Christine Cornelius	Alabama Licensed Agent	RLI Insurance Company
	ead Fountains Center Dr, #225 oria, AZ 85382 Address	SEAL Barton W. Davis (L.S.)
Approved and filed this	19 day of February	Judge of Probate
		By
THE STATE OF ALAB	SAMA Shelby	OATH OF OFFICE
T	Cuzo	nne M. Smith
solemnly swear that I wi		nne.M. Smith, do States and the Constitution of the State of Alabama, so long as I continue a
		he duties of the office upon which I am about to enter, to the best of my
ability, so help me God.		
Subscribed and sworn to	before me this <u>/8 th</u> day of	January 2018.
Deboral &	Joenhan Notary Public	insance M. Smith
DEBUK!	AH M. SPEAKMAN TARY PUBLIC	Principal N0100N11-56
STATE	EXP. 03-07-2021	



RLI Insurance Company
P.O. Box 3967 Peoria IL 61612-3967
Phone: (309)692-1000 Fax: (309)683-1610

POWER OF ATTORNEY

RLI Insurance Company

Bond No. <u>LSM1088349</u>

Know All Men by These Presents:

That the	RLI Insurance Company	, a corporation organized a	and existing under the lav	ws of the State of
Illin	nois, and authorized and licens	ed to do business in all states and th	e District of Columbia d	oes hereby make,
constitute and a	ppoint: Barton W. Davis	in the City of	<u>Peoria</u>	, State of
Illinoi	is , as <u>Vice President</u>	, with full power and authorit	y hereby conferred upor	i him/her to sign,
execute, acknow	wledge and deliver for and on its behalf as	Surety, in general, any and all bon	ds, undertakings, and rec	cognizances in an
amount not to	exceed Ten Million and	d 00/100 Dollars	(\$10,000,000.00) for any single
obligation, and	specifically for the following described bor	nd.		
Principal:	Suzanne M. Smith			
Obligee:	Alabama Secretary of State	-		
Type Bond:	Notary			
	\$ 25,000.00 Lanuary 3, 2019			
Effective Date:	<u>January 3, 2018</u>			
The	RLI Insurance Company	further certifies that the fo	llowing is a true and	exact copy of a
	ted by the Board of Directors of	RLI Insurance Company	, and now	in force to-wit:
,		·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·		
IN WITNESS V		ance Company ha l affixed this 3rd day of	s caused these presents t January , 2018	-
ATTEST:	2 Montgomery	RLI Insurance Composar SEAL	Company W. H	
Cherie L. Montgo	mery Assistant Secretary	Barton W. Davis		Vice President
	rie L. Montgomery, who being by Vice President and	e, a Notary Public, personally appear me duly sworn, acknowledged that Assistant Secretary	they signed the above P	ower of Attorney tively, of the said
	RLI Insurance Company	, and acknowledged said instrur	nent to be the voluntary	act and deed of
said corporation Matte	hen L. Johnigh	GRETCHEN L JOHNIGK NOTARY FOFFICIAL SEAL* STATE OF (ILLINOIS My Commission Expires May 26, 2020	20180219000052550 2 Shelby Cnty Judge 0 02/19/2018 10:34:52	2/3 \$36.00 of Probate: AL

- The Insured shall cooperate with the Company and, upon the Company's request, assist in making settlements, in the (c) conduct of suits and in enforcing any right of contribution or indemnity against any person or organization who may be liable to the Insured for acts, errors or omissions with respect to which insurance is afforded under this policy; and the Insured shall attend hearings and trials and assist in securing and giving evidence and obtaining the attendance of witnesses. The Insured shall not, except at his own cost, voluntarily make any payment, admit any liability, assume any obligation or incur any expense except with the prior written consent of the Company.
- SUBROGATION: In the event of any payment for any loss under this insurance, the Company shall be subrogated to all of the V. Insured's rights of recovery thereafter against any person or organization and the Insured shall execute and deliver instruments and papers and do whatever else is necessary to secure such rights to the Company. The Insured shall do nothing after loss to prejudice such rights.
- ASSIGNMENT: This policy shall be void if assigned or transferred without the Company's written consent. VI.
- ACTION AGAINST COMPANY: No action shall lie against the Company unless, as a condition precedent thereto, there shall VII. have been full compliance with all of the terms of this policy, nor until the amount of the Insured's obligation to pay shall have been finally determined either by judgement after actual trial or by written agreement of the Insured, the claimant, and the Company.

Any person or organization or the legal representative thereof, who is signatory to such judgement or written agreement, shall thereafter be able to recover under this policy to the extent of the insurance afforded by this policy. No person or organization shall have any right under this policy to join the Company as a party to any action against the Insured to determine the Insured's liability, nor shall the Company be impleaded by the Insured or the Insured's legal representative.

- CANCELLATION: If this Policy has been in effect for more than sixty (60) days, or is a renewal of a policy the Company VIII. issued, the Company may cancel this Policy upon the occurrence, after the effective date of the Policy, of one or more of the following:
 - Nonpayment of premium, including payment due on a prior policy the Company issued and due during the current Α. Policy Period covering the same risks.
 - Discovery of fraud or material misrepresentation by the Insured or their representative either in obtaining this insurance or in pursuing a claim under this Policy.
 - A judgement by a court or an administrative tribunal that the Insured has violated an Alabama or Federal law, having C. as one of its necessary elements an act which materially increases any of the risks insured against.
 - Discovery of willful or grossly negligent acts or omissions, or of any violations of state laws or regulations D. establishing safety standards, by the Insured or their representative, which materially increase any of the risks insured against.
 - Failure by the Insured or their representative to implement reasonable loss control requirements, agreed to by the Ė. Insured as a condition of policy issuance, or which were conditions precedent to the Company's use of a particular rate or rating plan, if that failure materially increases any of the risks insured against.
 - F. A determination of the Commissioner of Insurance that the:
 - Loss of, or changes in, the Company's reinsurance covering all or part of the risk would threaten its financial integrity or solvency; or
 - Continuation of the policy coverage would (i) place the Company in violation of Alabama law or the laws of the state where it is domiciled; or (ii) threaten the Company's solvency.
 - A change by the Insured or their representative in their notarial service activities, which results in a materially added, G. increased or changed risk, unless the added, increased or changed risk is included in the Policy.

The Company will mail or deliver advance written notice of cancellation, stating the reason for cancellation to the Insured, and to the producer of record, at least ten (10) days before the effective date of cancellation if the Company cancels for a reason listed in A. above; or, at least twenty (20) days before effective date of cancellation if the Company cancels for a reason listed in B. above; or, at least forty-five (45) days before the effective date of cancellation if the Company cancels for any reason listed in C. through G. above.

Upon cancellation by either the Insured or the Company, earned premium shall be computed pro rata. Premium adjustment may be made either at the time cancellation is effected or as soon as practicable after cancellation becomes effective, but payment of unearned premium is not a condition of cancellation.

Dated, signed and sealed this _____ 3rd ___ day of _____ January 2018

20180219000052550 3/3 \$36.00 Shelby Cnty Judge of Probate: AL 02/19/2018 10:34:52 AM FILED/CERT

RLI Insurance Company

By Barton W. Davis

Vice President

Address Claims to: **RLI Insurance Company** P.O. Box 3961 Peoria, IL 61612