

P.O. BOX 3967 PEORIA, IL 61612-3967 P: (800)645-2402 E: asksurety@rlicorp.com RLISURETY.COM

NOTARY PUBLIC BOND

Bond No. LSM5049669

| STATE OF | Alabama | • | |
|--------------------------------|---|--|--|
| COUNTY OF | Shelby | | 20251107000343540 1/4 \$69.00 Shelby Cnty Judge of Probate, AL 11/07/2025 12:06:42 PM FILED/CERT |
| KNOW ALL MEN B | SY THESE PRESENTS: | | |
| That we, | | Carol Blevins | |
| as Principal, and | | RLI Insurance Company | , a corporation dul |
| licensed to do business | in the State of Alabama, as | Surety, are held and firmly bound unto | |
| | <u> </u> | usand and 00/100 | |
| | | | rs, executors, administrators and assigns, firmly by |
| these presents, and we h | nereby waive our right to cla | aim personal property exempt under the | e laws of Alabama. |
| Sealed with our seals, an | nd dated this <u>28th</u> da | ay of <u>October</u> , <u>2025</u> . | |
| 33777777777777 A CI - 411 | | Inter appainted Matery Dublic Alabama | (State at Large) on the Asy of |
| MHEKEAS, the above- | named Principal has been of four | years from date of notary commission | (State at Large) on the day of |
| · | , | | |
| NOW, THEREFORE, t | the condition of this bond is | that if the named Principal shall faithf | ully discharge the duties of the office of Notary |
| Public during his/her co | ontinuance therein, then this | obligation shall be null and void; other | rwise, it shall remain in full force and effect. |
| EXP 11- | 7-2029 | | |
| FX Y | | | ver levine(L.S. |
| | | | Principal |
| | | WIND COME TO THE | |
| By Christine Shalene Corneli | us Alabama Licer | need Agers 1 | ance Company |
| | P.O. Box 3967 | CORPORATE | |
| | ia, IL 61612-3967 | SEAL BY | Con Wise Descriden |
| | Address | Eric Raudin | Sr. Vice Presiden |
| Ammorrad and filed this | s The day of Novemb | 7 | |
| Approved and med this | s_' uay 01 /0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | <u> </u> | Judge of Probate |
| | | | |
| | | Ву | |
| THE STATE OF ALA | ጉ ለ | ОАТН | OF OFFICE |
| COUNTY OF | Shelby | | |
| COONTI OF | SHORY | | • |
| Ţ | | Carol Blevins | , d |
| solemnly swear that I w | will support the constitution | | on of the State of Alabama, so long as I continue |
| | | | on which I am about to enter, to the best of my |
| ability, so help me God | | | |
| ability , 50 1101p 1110 | | | |
| Subscribed and sworn | to before me this | day of November = , Zo | 25 |
| | | | |
| | | | mol Bleuna |
| | Notary Public | | Principal |
| \ | $\boldsymbol{\zeta}$ | | •••••••••••••••••••••••••••••••••••••• |
| Joann Zidik | commexp 12- | 7-2025 | N0100N11_SUBS- 50, 0 |
| | Commexi | , | |

POWER OF ATTORNEY

RLI Insurance Company

20251107000343540 2/4 \$69.00 Shelby Cnty Judge of Probate, AL 11/07/2025 12:06:42 PM FILED/CERT

9025 N. Lindbergh Dr. Peoria, IL 61615 Phone: 800-645-2402

Bond No. <u>LSM5049669</u>

A0006221_R_SUBS

Know All Men by These Presents:

| the approving off | | | | | | |
|--|--|---|--|--|--|--|
| That the | | | | _ | and existing under the la | |
| Illino | | | | | the District of Columbia | |
| constitute and ap | • | • | | · · · · · · · · · · · · · · · · · · · | | |
| State of | | | _ | | , with full power a | • |
| conterrea upon m | m/ner to sign, e | xecute, acknowledge | and deliver for a | and on its behalf as Su | rety, for the following d | escribed bond. |
| Principal: | Carol Blevins | ! | | | | |
| - | Alabama Secr | retary of State | | | | <u> </u> |
| Type Bond: | Notary | | | | | |
| Bond Amount: | \$ 50,000.00 | | | | | |
| Effective Date: | October 28, 2 | 025 | | | | |
| The | RLI Insu | dged by the regularly urance Company | <u>-</u> | further certifies that | t the following is a true | _ |
| Resolution adopte | ed by the Board | of Directors of | RLI | Insurance Company | , and no | w in force to-wit: |
| by such other of Secretary, or the undertakings in | officers as the I he Treasurer n n the name of Powers of Att | any by the Presiden Board of Directors nay appoint Attornation of the Company. The corney or other oblined | t, Secretary, and nay authorize. eys in Fact or le corporate se | The President, any Name of the Agents who shall had all is not necessary for the same of t | y, Treasurer, or any Vice President, Secretary ve authority to issue I for the validity of any signature of any such | ry, any Assistant onds, policies or bonds, policies, |
| by such other of Secretary, or the undertakings in undertakings, corporate seal in the witness with the witness witness with the witness witness witness witness with the witness witnes | he Treasurer in the name of Powers of Attended HEREOF, the | any by the Presiden Board of Directors n nay appoint Attorne the Company. Th corney or other oblined by facsimile." RLI In | t, Secretary, and nay authorize. eys in Fact or le corporate seligations of the nsurance Comp | The President, any Nagents who shall had al is not necessary for corporation. The same any had | y, Treasurer, or any Vice President, Secretary ve authority to issue I for the validity of any signature of any such | ry, any Assistant onds, policies or bonds, policies, officer and the |
| by such other of Secretary, or the undertakings in undertakings, corporate seal in the witness with the witness witness with the witness witness witness witness with the witness witnes | officers as the Inhe Treasurer in the name of Attenday be printed | any by the Presiden Board of Directors not not appoint Attorned the Company. The corney or other oblined by facsimile." RLI In with its corporate | nay authorize. eys in Fact or e corporate se igations of the seal affixed this | The President, any Nagents who shall had al is not necessary for corporation. The | y, Treasurer, or any Vice President, Secretary ve authority to issue to the validity of any signature of any such that caused these present the open control of the caused these present the caused these present that the caused these present the caused these present the caused these present that the caused these present the caused these present that the caused these presents that the caused th | ry, any Assistant onds, policies or bonds, policies, officer and the |
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| Secretary, or the undertakings in undertakings, corporate seal in the seal in | he Treasurer in the name of Powers of Attended HEREOF, the | any by the Presiden Board of Directors in may appoint Attorned the Company. The corney or other oblided by facsimile." RLI In with its corporate | nay authorize. eys in Fact or e corporate se igations of the seal affixed this seal affixed this | The President, any Nagents who shall had all is not necessary for corporation. The standard day of | y, Treasurer, or any Vice President, Secretary we authority to issue It for the validity of any signature of any such that caused these present October | ry, any Assistant conds, policies or bonds, policies, officer and the sto be executed by |
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Allison S. Boyd

Judge of Probate

Kimberly A. Melton Chief Clerk



Judicial Division - (205) 670-5210 Recording Division - (205) 670-5220

20251107000343540 3/4 \$69.00 Shelby Cnty Judge of Probate, AL 11/07/2025 12:06:42 PM FILED/CERT

Probate Court of Shelby County, Alabama

Post Office Box 825 • Columbiana, Alabama 35051 website: www.shelbyal.com/285/Probate-Court

Below you will find your Commission as a Notary Public. Please detach the commission card and keep it in a secure place. If your commission is being renewed this card will replace any previously issued commission card. Note that your commission card indicates the term of your current commission and it is important that you begin the renewal process in advance of the expiration of your commission to ensure there is no break in service.

The office of Notary Public is a serious and responsible public office and should not be taken lightly. Abuse of the office or irresponsibility in the performance of notarial duties can result in grave consequences. If a Notary Public has doubts about the propriety of any action, he or she should seek competent professional advice before he or she acts.

A Notary Public is a public officer whose function it is:

- 1. To administer oaths; and
- 2. To attend and certify, by his signature and official seal, certain classes of documents, in order to give them credit and authenticity; and
- 3. To take acknowledgments of deeds and other conveyances and certify the same; and
- 4. To perform certain official acts, chiefly in commercial matters, such as the protesting of notes and bills, the notice of foreign drafts, and marine protests in cases of damage.

You will need to obtain your notarial seal prior to performing any official acts. It is required that your notarial seal reflect your name as stated in the below commission card.

NOTARY PUBLIC COMMISSION

In the name of the State of Alabama and pursuant to the authority granted me as Judge of Probate for Shelby County, I hereby Commission_Carol Blevins_as Notary Public for the State at Large for the term beginning on _11/7/2025_ and ending on _11/7/2029_.

A SAME AND A SAME AND

ALLISON S, BOYD JUDGE OF PROBATE

20251107000343540 4/4 \$69.00 Shelby Cnty Judge of Probate, AL 11/07/2025 12:06:42 PM FILED/CERT

State of Alabama

APPLICATION FOR NOTARY PUBLIC COMMISSION

(MUST BE A RESIDENT OF COUNTY WHERE APPLICATION IS MADE)

| in the Propate Court of | |
|-------------------------|--|
| County | |

\$10.00* APPLICATION FEE IS DUE AT THE TIME APPLICATION IS SUBMITTED

| | Doto. | 7-30-25 |
|------------------------|---|--|
| 1. | Name: Carol Arlette Blevins | |
| | (Print your name as it appears on driver's license, non-driver ID, or other current valid | photo ID) |
| 2. | Home Address: 4506 High Court Cie. Apt/Suite #: | |
| 3. ⁻ | City/State/Zip: Bhan, AL 35242 County of Residen | ice Shelby |
| | Mailing Address (If Different): | |
| 5. | Date Of Birth: 7-18-61 Email Address Carolblev (a) amail. | con |
| 6. | Phone Numbers: Work Home 334-3/3: | 3942 |
| 7. | Have you ever been convicted of a felony or crime of moral turpitude? YES _X Please Provide Details On Page 2) | _NO (If YES, |
| 8. | Are you currently a debtor in a bankruptcy proceeding? YES X NO | |
| | Are you currently under an order adjudicating you incapacitated? YES X NO | • |
| 10. | Are you currently or have you ever been a commissioned notary public in Alabama? YES (County <u>SHEIBH</u> Expiration Date: <u>10-28-25</u>) N | 10 |
| 11. | (Print Your Name Exactly As It Is To Appear On Notary Commission) | |
| | BY SIGNING BELOW I CERTIFY THAT ALL INFORMATION CONTAINS (PAGES ONE AND TWO) IS TRUE AND CORRECT AND THAT I AM WILLING TO COMPLETE THE MANDATORY TRAINING FOR NOTARY (UNLESS EXEMPT BY LAW) WITHIN 30 DAYS OF THE DATE APPLICATION. I FURTHER ACKNOWLEDGE THAT I UNDERSTAINE \$10.00* APPLICATION FEE IS NON-REFUNDABLE AND OF THE ESSENCE (I.E. TIME DEADLINES ARE STRICTLY ENFORM | ABLE AND Y PUBLICS OF THIS ND THAT TIME IS |
| | ALL STATEMENTS CONTAINED IN THIS APPLICATION ARE MADE UND FEAR OF THE PENALTY OF PERJURY. THE CRIME OF PERJURY IS PUNI | |
| | BY FINE AND/OR IMPRISONMENT. | RECEIVED |
| | | OCT 3 D 2025 |
| Sig | nature: and Devine | Allison S. Boyd Judge of Probate |
| | This should be your usual signature and match the name printed on Line 11. THIS SHOULD BE THE SIGNATURE YOU USE WHEN NOTARIZING A DO | <u> </u> |

* \$10.00 Application Fee PLUS any applicable county fees