

Attachment J

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2017071043

WHEN RECORDED MAIL TO:

Clerk of the Board
168 W. Alisal St
Salinas CA 93902

Stephen L. Vagnini
Monterey County Clerk-Recorder

12/26/2017 09:20 AM

Recorded at the request of:
FIRST AMERICAN TITLE COMPANY

Titles: 1 Pages: 6

Fees: \$27.00

Taxes: \$0.00

AMT PAID: \$27.00



THIS SPACE FOR RECORDER'S USE ONLY

TITLE OF DOCUMENT

MONUMENT RECORD
UOF East Garrison, LLC

12-22-17 #85

Bond No. SUR0043484

Premium \$300.00

MONUMENT BOND

WHEREAS, the COUNTY OF MONTEREY, a political subdivision of the State of California ("County"), and UCP East Garrison, LLC, as principal ("Principal") have entered into an agreement entitled East Garrison Phase 3 incorporated herein by reference and referred to as the "Contract" which requires Principal to install and complete certain designated public improvements, including the setting of monuments; and,

WHEREAS, under the terms of the Contract, Principal is required to furnish a bond to City for setting of monuments.

NOW, THEREFORE, we the Principal and Argonaut Insurance Company, a corporation duly authorized and admitted to transact business and issue surety bonds in the State of California ("Surety"), are held firmly bound unto the County, as obligee, in the sum of: Seventy Five Thousand and 00/100 (\$75,000.00), for the payment of which sum well and truly to be made, we the Principal and Surety bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally.

The condition of this obligation is such that if the Principal, Principal's heirs, executors, administrators, successors, or assigns, shall in all things stand to and abide by, and well and truly keep and perform all covenants, conditions, and agreements required to be kept and performed by Principal in the Contract, including the setting of monuments, and any changes, additions, or alterations made thereto, to be kept and performed at the time and in the manner therein specified, and in all respects according to their true intent and meanings, and shall indemnify and save harmless County, its officers, employees, and agents, as therein provided, then this obligation shall be null and void; otherwise, it shall be and remain in full force and effect.

As a part of the obligation secured hereby and in addition to the sum specified above, there shall be included all costs, expenses, and fees, including attorney's fees, reasonably

incurred by County in successfully enforcing such obligation, all to be taxed as costs and included in any judgment rendered.

The Surety, for value received, hereby stipulates and agrees that no change, extension of time, alteration or addition to the terms of the Contract or to the work to be performed thereunder or to the specifications accompanying the same shall in any way affect its obligations on this bond, and it does hereby waive notice of any change, extension of time, alteration or addition.

IN WITNESS WHEREOF, this instrument has been duly executed by authorized representatives of the Principal and Surety. SIGNED AND SEALED on November 7, 2017.

99 Almaden Blvd., Suite 400

P.O. Box 469011

PRINCIPAL:

SURETY:

UCP East Garrison, LLC

Argonaut Insurance Company

(Principal name)

(Seal)

(Surety name)

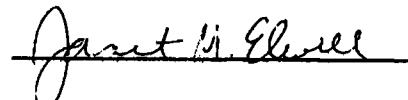
BY:

BY:



James W. Fletcher, Division President

(Print name and title)



Janet M. Elwell, Attorney-in-Fact

(Print name and title)

Principal address and telephone:

Surety address and telephone:

San Jose, CA 95113

San Antonio, TX 78246

800-470-7958

Affix Corporate Seals

Attach Notary Acknowledgments for All Signatures Attach

Power-of-Attorney if executed by Attorney-in-Fact

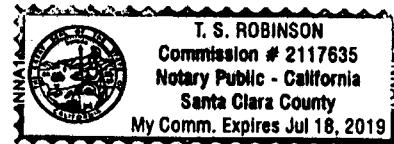
CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

Civil Code § 1189

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.

Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.



Witness my hand and official seal.

Signature Mark R. Kotin
Notary Public Signature

Place Notary Public Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

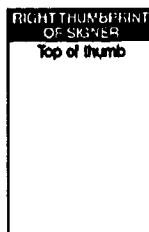
Description of Attached Document

Title or Type of Document _____

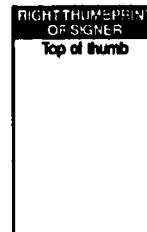
Document Date _____ Number of Pages: _____

Signer's Name: _____

| | |
|--|-------|
| <input type="checkbox"/> Individual | |
| <input type="checkbox"/> Corporate Officer – Title(s): | _____ |
| <input type="checkbox"/> Partner - <input type="checkbox"/> Limited <input type="checkbox"/> General | |
| <input type="checkbox"/> Guardian or Conservator | |
| <input type="checkbox"/> Attorney-in-Fact | |
| <input type="checkbox"/> Trustee | |
| <input type="checkbox"/> Other: _____ | |
| Signer is representing _____ <div style="border: 1px solid black; padding: 2px; margin-top: 10px;"> <small>RIGHT THUMBPRINT OF SIGNER</small> <small>Top of thumb</small> </div> | |



| | |
|---|--|
| <input type="checkbox"/> Individual <input type="checkbox"/> Corporate Officer – Title(s): _____ <input type="checkbox"/> Partner - <input type="checkbox"/> Limited <input type="checkbox"/> General <input type="checkbox"/> Guardian or Conservator <input type="checkbox"/> Attorney-in-Fact <input type="checkbox"/> Trustee <input type="checkbox"/> Other: _____ | <small>RIGHT THUMPERPRINT OF SIGNER</small> Top of thumb |
|---|--|



CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

Civil Code § 1189

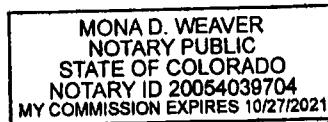
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

State of Colorado
County of Denver

Who proved to me on the basis of satisfactory evidence

Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.



Witness my hand and official seal.

Signature Mona D. Weaver Notary Public Signature

Place Notary Public Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document

Document Date: _____ **Number of Pages:** _____

Signer's Name: _____

Signer is representing _____
Argonaut Insurance Company



| | |
|--|--|
| <input type="checkbox"/> Individual | |
| <input type="checkbox"/> Corporate Officer – Title(s): | |
| <input type="checkbox"/> Partner - <input type="checkbox"/> Limited <input type="checkbox"/> General | |
| <input type="checkbox"/> Guardian or Conservator | |
| <input type="checkbox"/> Attorney-in-Fact | |
| <input type="checkbox"/> Trustee | |
| <input type="checkbox"/> Other: _____ | |
| Signer is representing _____ | |
| RIGHT THUMBPRINT OF SIGNER Top of thumb | |

Signer is representing _____



Digitized by srujanika@gmail.com

Argonaut Insurance Company
Deliveries Only: 225 W. Washington, 24th Floor
Chicago, IL 60606

United States Postal Service: P.O. Box 469011, San Antonio, TX 78246

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the Argonaut Insurance Company, a Corporation duly organized and existing under the laws of the State of Illinois and having its principal office in the County of Cook, Illinois does hereby nominate, constitute and appoint:

Anuj Jain, Sheila J. Montoya, Charles McDaniel, Mona D. Weaver, Angela M. Tindol, Janet M. Elwell, Angela R. Yanofsky, Shaleen R. Lovitt, John Browning, Justin Tomlin

Their true and lawful agent(s) and attorney(s)-in-fact, each in their separate capacity if more than one is named above, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all bonds, contracts, agreements of indemnity and other undertakings in suretyship provided, however, that the penal sum of any one such instrument executed hereunder shall not exceed the sum of:

\$75,000,000.00

This Power of Attorney is granted and is signed and sealed under and by the authority of the following Resolution adopted by the Board of Directors of Argonaut Insurance Company:

"RESOLVED, That the President, Senior Vice President, Vice President, Assistant Vice President, Secretary, Treasurer and each of them hereby is authorized to execute powers of attorney, and such authority can be executed by use of facsimile signature, which may be attested or acknowledged by any officer or attorney, of the Company, qualifying the attorney or attorneys named in the given power of attorney, to execute in behalf of, and acknowledge as the act and deed of the Argonaut Insurance Company, all bond undertakings and contracts of suretyship, and to affix the corporate seal thereto."

IN WITNESS WHEREOF, Argonaut Insurance Company has caused its official seal to be hereunto affixed and these presents to be signed by its duly authorized officer on the 8th day of May, 2017.



by:

Joshua C. Betz, Senior Vice President

STATE OF TEXAS

COUNTY OF HARRIS SS:

On this 8th day of May, 2017 A.D., before me, a Notary Public of the State of Texas, in and for the County of Harris, duly commissioned and qualified, came THE ABOVE OFFICER OF THE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of same, and being by me duly sworn, deposed and said that he is the officer of the said Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and the said Corporate Seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said corporation, and that Resolution adopted by the Board of Directors of said Company, referred to in the preceding instrument is now in force.

IN TESTIMONY WHEREOF, I have hereunto set my hand, and affixed my Official Seal at the County of Harris, the day and year first above written.



(Notary Public)

I, the undersigned Officer of the Argonaut Insurance Company, Illinois Corporation, do hereby certify that the original POWER OF ATTORNEY of which the foregoing is a full, true and correct copy is still in full force and effect and has not been revoked.

IN WITNESS WHEREOF, I have hereunto set my hand, and affixed the Seal of said Company, on the 7th day of November 2017.



Sarah Heineman

Sarah Heineman, VP-Underwriting Surety

THIS DOCUMENT IS NOT VALID UNLESS THE WORDS ARGO POWER OF ATTORNEY AND THE SERIAL NUMBER IN THE UPPER RIGHT HAND CORNER ARE IN BLUE, AND THE DOCUMENT IS ISSUED ON WATERMARKED PAPER. IF YOU HAVE QUESTIONS ON AUTHENTICITY OF THIS DOCUMENT CALL (210) 321 - 8400.