

Minnesota Department of Labor and Industry

Code Administration and Inspection Services 443 Lafayette Road St. Paul, Minnesota 55155-4304 (612) 296-4530 Boiler Inspection (612) 296-2193 High Pressure Piping (612) 296-1189 Elevator Inspection (612) 297-1953 Fax

PROOF OF BOND

This is to certify that DANTE	A. TINI	_Contracting
Pipefitter License No. 88236	Representing	Ext. THE
TINI MECHANICAL CON	TRACTORS, INC.	
has filed a \$2,000 bond with th	e Secretary of State	on 12/22/92
and provided evidence of Public	: Liability Insurance	, including
Products Liability Insurance of	at least \$50,000 pe	r person and
\$100,000 per occurrence and Pro	perty Damage Insuran	ice of at
least \$10,000 for the year of_	1993 in accordan	ce with the
provisions of Minnesota Statute	s 326.48 Subdivision	2.
BOND NO. 9072751	INS. POLICY NO. 90	44808
BONDING CO. FEDERATED MUTUAL	INSURANCE CO. FEDER	ATED MUTUAL
STATE OF MINNESOTA	1 1 11 1	1
DEPARTMENT OF STATE	Administrative Assi	L _{stant}
DEC 28 1992	High Pressure Pipin	
Joan anderson Growe		
Secretary of State		

THIS FORM MAY BE COPIED AND SUBMITTED TO EACH LOCALITY IN WHICH YOU ARE BIDDING.

FEDERATED MUTUAL INSURANCE COMPANY CONTINUATION CERTIFICATE

IN CONSIDERATION of the payment of a premium of \$
FEDERATED MUTUAL INSURANCE COMPANY hereby continues in force to
its bond No. 9072751 effective <u>DECEMBER 31, 1989</u> , on behalf of
TINI MECHANICAL CONTRACTORS INC
represented by (if applicable), Principal, in favor of
THE CODE ENFORCEMENT HIGH PRESSURE PIPING (STEAMFITTER) , Obligee subject to all its terms, conditions and limitations as set forth and expressed in said bond.
This certificate is executed upon the express condition that the Company's liability under said bond and this and all continuation certificates issued in connection therewith shall not be cumulative, and shall not in any event exceed the amount set forth in said bond, or said amount as it may have been increased or decreased by any rider(s) or endorsement(s) properly issued by the Company.
Dated this 19TH day of OCTOBER 19 92
By Roxanne Delson Attorney-in-Fact

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

ROXANNE NELSON	of the City ofOWATONNA	State of
MINNESOTA i	ts true and lawful attorney for the fol	lowing purposes:
To sign its name as suret deliver any and all surety bonds	y to, and to execute, affix the sea and penalties not exceeding:	l, acknowledge and
TEN THOUSAND DOLLARS (\$10,000) EACH	
The execution of such bonds binding upon the Company as if elected officers of the Company.	s or undertakings in pursuance of these they had been executed and acknowledge	e presents shall be ed by the regularly
This Power of Attorney gran when the designee ceases to be:	ted by Federated Mutual Insurance Comp	any shall terminate
1) Employed by Federated	Mutual Insurance Company or	
Employed by Federated such Power of Attorney	Mutual Insurance Company in a job for war is required.	hich
IN WITNESS WHEREOF, the sinstrument to be signed and its and Secretary this the 4TH da	aid FEDERATED MUTUAL INSURANCE COMPAN corporate seal to be affixed by its Se y of <u>JUNE</u> 19 <u>91</u> .	NY has caused this nior Vice President
	FEDERATED MUTUAL INSURANCE COMP	PANY
	BY Mill Maffert	
(Seal)	Senior Vice President	
	and BY 735 Jusike	
STATE OF MINNESOTA COUNTY OF STEELE	Secretary	

On this 4TH day of JUNE 19 91 personally appeared before me, the undersigned notary public, DONALD RAY HUFF AND F. H. HEISEKE to me personally known, who, each being duly sworn by me, did say that they are respectively the Senior Vice President and Secretary of the FEDERATED MUTUAL INSURANCE COMPANY and that the seal affixed to this instrument is the corporate seal of said Corporation and that this instrument was signed and sealed on behalf of said Corporation by authority of its Board of Directors and said DONALD RAY HUFF AND F. H. HEISEKE acknowledge said instrument to be the free act and deed of said Corporation.

(SEAL)

CORINNE LIVENGOOD

NOTARY PUBLIC - MINNESOTA

STEELE COUNTY

My Commission Expires April 23, 1995

COPY OF RESOLUTION

"BE IT RESOLVED that the President or any Vice President in conjunction with the Secretary is hereby authorized and empowered under the corporate seal of the Company, to appoint any person or persons as attorney or attorneys-in-fact, or agent or agents of the Company, in its name and as its act to execute and deliver, anywhere in the United States or Canada, any and all bonds and undertakings of suretyship and other documents that the ordinary course of surety business may require."

"BE IT FURTHER RESOLVED that the Power of Attorney or other document appointing such person or persons as attorney or attorneys-in-fact or agent or agents of the Company may either be personally signed by the President, any Vice President, the Secretary or may be executed by said officers by means of facsimile signatures. The said personal signatures or facsimile signatures shall not require the Company seal or any other seal and shall be valid and binding on the Company if executed either by personal signature or facsimile signature and with or without the Company seal being affixed thereto."

I, the undersigned, hereby certify that I am a Senior Vice President of the FEDERATED MUTUAL INSURANCE COMPANY, a Corporation duly organized and existing under the laws of the State of Minnesota and that the foregoing is a true and complete copy of the original Power of Attorney given by said Company to:

ROXANNE NELSON

of OWA

OWATONNA, MINNESOTA

authorizing and empowering such person to sign bonds as therein set forth, which Power of Attorney has never been revoked and is still in full force and effect.

I further certify that said Power of Attorney was given in pursuance of a resolution adopted at a regular meeting of the Board of Directors of said Company duly called and held at the office of the Company in the City of Owatonna, Minnesota on the 20th day of April, 1982 at which meeting a quorom was present and that the foregoing is a true and correct copy of said resolution, and the whole thereof as recorded in the minutes of the said meeting.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the FEDERATED MUTUAL INSURANCE COMPANY this the About 19 92.

FEDERATED MUTUAL INSURANCE COMPANY

(SEAL)

Senior Vice President