Bond No.: 800134560

MOHUM

SUBDIVISION IMPROVEMENT AGREEMENT

PERFORMANCE BOND

Docort

California

KNOW ALL PERSONS BY THESE PRESENTS:

THAT WHEREAS

| University Park Investor, LLC | Oily 01 | · uniii | Descri, | | rincipal"), | have |
|--|--------------------------------|-------------------------|-----------------------------|--------------------------------|--------------------------|-------------------|
| executed an agreement for work constools, equipment, services, and incipathways, storm drains, sanitary sew street lights, and all other require Improvements"); | identals for ers, utilities | all gradi , drainage | ng, roads, e facilities, | paving, curl traffic contro | bs and gu ls, landsca | utters, aping, |
| WHEREAS, the Public Impro set forth in that certain Subdivision In 20, ("Improvement Agreement"); | | | | | nore partic | ularly |
| | | | | | | |

WHEREAS, the Improvement Agreement is hereby referred to and incorporated herein by reference; and

WHEREAS, Principal is required by the Improvement Agreement to provide a good and sufficient bond for performance of the Improvement Agreement, and to guarantee and warranty the Public Improvements constructed thereunder.

NOW, THEREFORE, Principal and <u>Atlantic Specialty Insurance Company</u> ("Surety"), a corporation organized and existing under the laws of the <u>State of New York</u>, and duly authorized to transact business under the laws of the, State of California, are held and firmly bound unto City in the sum of <u>Two Million Three Hundred Thirty One Thousand Five Hundred Forty Six and 00/100 DOLLARS (\$2,331,546.00)</u>, said sum being not less than one hundred percent (100%) of the total cost of the Public Improvements as set forth in the Improvement Agreement, we bind ourselves, our heirs, executors and administrators, successors and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION is such, that if Principal, his or its heirs, executors, administrators, successors or assigns, shall in all things stand to and abide by, and well and truly keep and perform the covenants, conditions, agreements, guarantees, and warranties in the Improvement Agreement and any alteration thereof made as therein provided, to be kept and performed at the time and in the manner therein specified and in all respects according to their intent and meaning, and to indemnify and save harmless City, its officers, employees, and agents, as stipulated in the Improvement Agreement, then this obligation shall become null and void; otherwise it shall be and remain in full force and effect.

As part of the obligation secured hereby, and in addition to the face amount specified therefor, there shall be included costs and reasonable expenses and fees, including reasonable attorney's fees, incurred by City in successfully enforcing such obligation, all to be taxed as costs and included in any judgment rendered.

Surety, for value received, hereby stipulates and agrees that no change, extension of time, alteration, or addition to the terms of the Improvement Agreement, or to any plans, profiles, and specifications related thereto, or to the Public Improvements to be constructed thereunder, shall

in any way affect its obligations on this bond, and it does hereby waive notice of any such change, extension of time, alteration, or addition.

This bond is executed and filed to comply with Section 66499, *et seq.*, of the California Government Code as security for performance of the Improvement Agreement and security for the one-year guarantee and warranty of the Public Improvements.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this $\underline{^{15th}}$ day of August, 2022.

| (Corporate Seal) | University Park Investor, LLC |
|---|---|
| | Principal |
| | By |
| Nog 32 gran | Title MANAGER SIGNATORY |
| (Corporate Seal) | Atlantic Specialty Insurance Company |
| | Surety |
| | By OLL |
| | Attorney-in-Fact , Annette Audinot |
| (Attach Attorney-in-Fact Certificate |) Title Attorney-in-Fact |
| The rate of premium on this bond is charges is \$_27,979.00 | per thousand. The total amount of premium |
| (The above must be filled in by cor | porate attorney.) |
| THIS IS A REQUIRED FORM | |
| Any claims under this bond may be | e addressed to: |
| (Name and Address of Surety) | Atlantic Specialty Insurance Company |
| (| 605 Highway 169 North, Suite 800 |
| | Plymouth, Minnesota 55441 |
| (Name and Address of Agent or | |
| Representative for service of | 2 4 7 - 4 1 |
| process in California, if different from above) | |
| (Telephone number of Surety | (212) 440-6538 |
| and Agent or Representative for | |

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 CALIFORNIA COUNTY OF CONTY A | OSTA | |
|--|---|---|
| On August 29th appeared PAVI N | 20 <u>77</u> before me, _ | , who proved to me on the basis of satisfactory |
| me that he she/they exec | uted the same in 🕻 | /are subscribed to the within instrument and acknowledged to is/her/their authorized capacity(ies), and that by his/her/their the entity upon behalf of which the person(s) acted, executed |
| is true and correct. TOM CONTRA NOTARY P MY COM Signature of AUS | DOSIER M. # 2368910 COSTA COUNTY UBLIC-CALIFORNIA Z MISSION EXPIRES 7 UST 02, 2025 on below is not required to | WITNESS my hand and official seal. OPTIONAL oy law, it may prove valuable to persons relying on the document all and reattachment of this form to another document. |
| CAPACITY CLAIME | | DESCRIPTION OF ATTACHED DOCUMENT |
| ☐ Individual ☐ Corporate Officer | | M. |
| Title(s | 3) | Title or Type of Document |
| ☐ Partner(s) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ | Limited General | Number of Pages |
| Guardian/Conservator Other: Signer is representing: Name Of Person(s) Or Entity(ies) | | Date of Document |
| = | | Signer(s) Other Than Named Above |

NOTE: This acknowledgment is to be completed for Principal.

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.

| New York STATE OF CALIFORNIA COUNTY OF Kings | <u> </u> | | | 58 |
|--|---|--------------------------|--|--|
| On August 15, | , 20 <u>22</u> , bef | e me, <u>Te</u> | erry Ann Gonzales-Selman | , Notary Public, personally |
| appeared | Annette Audino | | , who proved to m | ne on the basis of satisfactory |
| me that he/she/they ex | xecuted the s | me in his/l | her/their authorized capac | instrument and acknowledged to ity(ies), and that by his/her/their ich the person(s) acted, executed |
| I certify under PENALT is true and correct. | Y OF PERJUF | Y under the | e laws of the State of Califo | ornia that the foregoing paragraph |
| Notary Puk Signature NPA Qualifi Commission E | I GONZALES-SI Dic, State of New 1916-06272513 ed in Kings Coun expires November | York 19, 20 24 | WITNESS my hand and Terry Ann Gonzales-Selman, OPTIONAL law, it may prove valuable to pers | Notary Public |
| and co | • | | and reattachment of this form to DESCRIPTION | of ATTACHED DOCUMENT |
| n Individual | | | | |
| ☐ Corporate Officer | | | Ω p | erformance Bond |
| Ţ | itle(s) | | Title | or Type of Document |
| | Limited General | | | Number of Pages |
| ☆ Attorney-In-Fact □ Trustee(s) | | | Δ.,, | gust 15, 2022 |
| ☐ Guardian/Conservator | | | The second secon | Date of Document |
| ☐ Other: | | | | |
| Signer is representing: | | | | 7-6 |
| Name Of Person(s) Or Entity(ies | 3) | | 0.1 - 1 | O n |
| Atlantic Specialty Insurance | Company | | Marcesca ! | ale |
| | | | Signe (s) Frances | Oper Than Named Above ca Papa |

NOTE: This acknowledgment is to be completed for the Attorney-in-Fact for Surety. The Power-of Attorney to local representatives of the bonding company must also be attached.

Bond No.: 800134560

SUBDIVISION IMPROVEMENT AGREEMENT PAYMENT (LABOR AND MATERIALS) BOND

KNOW ALL PERSONS BY THESE PRESENTS:

| T | HAT | WHEREAS, | the | City | of | Palm | Desert, | California | ("City") | and |
|-----------|-----------|---|----------|-----------|--------|-------------|-------------|----------------|-------------|--------------|
| | | University | Park In | vestor, I | JLC | | | ("P | rincipal"), | have |
| executed | an agr | eement for wo | rk con: | sisting (| of, bu | it not limi | ted to, the | furnishing all | labor, mat | terials, |
| tools, eq | uipmer | nt, services, a | nd inc | idental | s for | all grad | ing, roads | , paving, cui | rbs and g | utters, |
| | | n drains, sanita nd all other | | | | | | | | |
| Improver | nents") | | · | | | | | , | | |
| set forth | in that o | AS, the Public certain Subdivi ment Agreeme | ision Ir | | | • | • | rincipal are r | nore parti | cularly , |
| <u> </u> | | | ,. | | | | | | | |

WHEREAS, the Improvement Agreement is hereby referred to and incorporated herein by reference; and

WHEREAS, Principal is required by the Improvement Agreement before entering upon the performance of the work to provide a good and sufficient payment bond to secure the claims to which reference is made in Title 3 (commencing with Section 9000) of Part 6 of Division 4 of the California Civil Code.

NOW, THEREFORE, Principal and Atlantic Specialty Insurance Company ("Surety"), a corporation organized and existing under the laws of the State of New York, and duly authorized to transact business under the laws of the State of California, are held and firmly bound unto City and all contractors, subcontractors, laborers, material suppliers, and other persons employed in the performance of the Improvement Agreement and referred to in Title 3 (commencing with Section 9000) of Part 6 of Division 4 of the California Civil Code in the sum of Two Million Three Hundred Thirty One Thousand Five Hundred Forty Six and 00/100 DOLLARS (\$2,331,546.00), said sum being not less than one hundred percent (100%) of the total cost of the Public Improvements as set forth in the Improvement Agreement, for materials furnished or labor thereon of any kind, or for amounts due under the Unemployment Insurance Act with respect to this work or labor, that the Surety will pay the same in an amount not exceeding the amount hereinabove set forth.

As part of the obligation secured hereby, and in addition to the face amount specified therefor, there shall be included costs and reasonable expenses and fees, including reasonable attorney's fees, incurred by City in successfully enforcing such obligation, all to be taxed as costs and included in any judgment rendered.

It is hereby expressly stipulated and agreed that this bond shall inure to the benefit of any and all persons, companies, and corporations entitled to file claims under Title 3 (commencing with Section 9000) of Part 6 of Division 4 of the Civil Code, so as to give a right of action to them or their assigns in any suit brought upon this bond.

Should the condition of this bond be fully performed, then this obligation shall become null and void, otherwise it shall be and remain in full force and effect.

Surety, for value received, hereby stipulates and agrees that no change, extension of time, alteration, or addition to the terms of the Improvement Agreement, or to any plans, profiles, and specifications related thereto, or to the Public Improvements to be constructed thereunder, shall in any way affect its obligations on this bond, and it does hereby waive notice of any such change, extension of time, alteration, or addition.

This bond is executed and filed to comply with Section 66499, *et seq.*, of the California Government Code as security for labor performed and materials provided in connection with the performance of the Improvement Agreement and construction of the Public Improvements.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this $\underline{^{15}\text{th}}$ day of August, 2022.

| (Corporate Seal) | | University Park Investor, LLC Principal By |
|--|-----------------|--|
| | | Title AUTHON 1780 - 64 67 67 |
| (Corporate Seal) | | Atlantic Specialty Insurance Company |
| | | By Attorney-in-Fact , Annette Audinot |
| (Attach Attorney-in-Fact Certificate) | | Title Attorney-In-Fact |
| The rate of premium on this bond is charges is \$ 27,979.00 (The above must be filled in by corp | orate attorney. | _ per thousand. The total amount of premium) |
| Any claims under this bond may be | addressed to: | |
| (Name and Address of Surety) | | Ity Insurance Company 69 North, Suite 800 10sota 55441 |
| (Name and Address of Agent or Representative for service of process in California, if different from above) | | |
| (Telephone number of Surety and Agent or Representative for service of process in California) | (212) 440-653 | 8 |

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 CALIFORN COUNTY OF CONTY | IIA C | OSTA | |
|--|----------|---------------------------------|--|
| on August 20 | 77 2 | before me, T. | |
| appeared FAVI | 10 | ANCIVIANIA | , who proved to me on the basis of satisfactory |
| me that he/she/they | execu | ted the same in /ris/ he | e subscribed to the within instrument and acknowledged to er/their authorized capacity(ies), and that by his/her/their entity upon behalf of which the person(s) acted, executed |
| I certify under PENAL is true and correct. | IYO | T. DOSIER | aws of the State of California that the foregoing paragraph WITNESS my hand and official seal. |
| Signature o | f Notary | Public | |
| | | | PTIONAL |
| Though the infe | rmation | | w, it may prove valuable to persons relying on the document |
| and | could pi | event fraudulent removal an | d reattachment of this form to another document. |
| CAPACITY CL | AIMED | BY SIGNER | DESCRIPTION OF ATTACHED DOCUMENT |
| ☐ Individual☐ Corporate Officer | | | |
| | Title(s) | | Title or Type of Document |
| ☐ Partner(s) | | Limited | |
| Attorney-In-Fact | | General | Number of Pages |
| ☐ Trustee(s) | | | |
| ☐ Guardian/Conservato | r | | Date of Document |
| Other: Signer is representing: | | | |
| Name Of Person(s) Or Entity(i | ies) | | |
| | | | |
| | | | Signer(s) Other Than Named Above |
| · · · · · · · · · · · · · · · · · · · | | | |

NOTE: This acknowledgment is to be completed for Principal.

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.

| New York | | | |
|--|--|---|--|
| STATE OF CALIFORNIA COUNTY OF Kings | - | | |
| On August 15, 20 | 22, before me, | Terry Ann Gonzales-Selman | , Notary Public, personally |
| appearedAnnette Audinot | | , who proved to r | ne on the basis of satisfactory |
| me that he/she/they execute | d the same in | his/her/their authorized capac | n instrument and acknowledged to city(ies), and that by his/her/their nich the person(s) acted, executed |
| I certify under PENALTY OF is true and correct. | PERJURY under | r the laws of the State of Calif | ornia that the foregoing paragraph |
| 1.00 | | WITNESS my hand and | official seal. |
| Notary Public, S Signature on the Otto Otto Otto Otto Otto Otto Otto Ott | Kings County S November 19, 20 Selow is not required | Terry Am Gonzales-Selman Terry Am Gonzales-Selman OPTIONAL by law, it may prove valuable to per oval and reattachment of this form to | rsons relying on the document |
| CAPACITY CLAIMED I | BY SIGNER | DESCRIPTION | OF ATTACHED DOCUMENT |
| ☐ Individual | | | |
| ☐ Corporate Officer | | Pavm | ent Bond |
| Title(s) | | | e or Type of Document |
| ☐ Partner(s) ☐ I | _imited | | |
| | General | 47 | Number of Pages |
| 🙊 Attorney-In-Fact | | | |
| ☐ Trustee(s) | | Aug | ust 15, 2022 |
| ☐ Guardian/Conservator | | | Date of Document |
| Other: | | | |
| Signer is representing: Name Of Person(s) Or Entity(ies) | % | | |
| Atlantic Specialty Insurance Comp | oany | Trancisc | a Pala |
| | | Signer(s | Other Than Named Above |
| | | — Fi | ancesca Papa |

NOTE: This acknowledgment is to be completed for the Attorney-in-Fact for Surety. The Power-of Attorney to local representatives of the bonding company must also be attached.



Power of Attorney

Surety Bond No: 800134560

Principal: University Park Investor, LLC

Obligee: City of Palm Desert

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint:

Annette Audinot

each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: unlimited and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-Fact.

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this twenty-seventh day of April, 2020.

CORPORATE CONTROL 1986 CONTROL

Ву ___

Paul J. Brehm, Senior Vice President

STATE OF MINNESOTA HENNEPIN COUNTY

On this twenty-seventh day of April, 2020, before me personally came Paul J. Brehm, Senior Vice President of ATLANTIC SPECIALTY INSURANCE 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 the same, and being by me duly sworn, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



Notary Public

I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated 15th day of August 2022

CORPORATE OF SEAL 1986 OF SEAL STATE OF SEAL

Kara Barrow, Secretary

Please direct bond verifications to surety@intactinsurance.com



Power of Attorney

Surety Bond No: 800134560

STATE OF MINNESOTA

HENNEPIN COUNTY

Principal: University Park Investor, LLC

Obligee: City of Palm Desert

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint:

Francesca Papa

, each individually if there be more than one named, its true and lawful Autorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: unlimited and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-Fact.

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

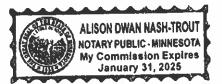
IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this twenty-seventh day of April, 2020.

SEAL 1986 O

Ву

Paul J. Brehm, Senior Vice President

On this twenty-seventh day of April, 2020, before me personally came Paul J. Brehm, Senior Vice President of ATLANTIC SPECIALTY INSURANCE 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 the same, and being by me duly swom, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



Notary Public

I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated 15th day of August , 2022

CORPORATE COMPOSED TO SEAL OF SEAL OF

Kara Barrow, Secretary

Please direct bond verifications to surety@intactinsurance.com



specialty solutions

Atlantic Specialty Insurance Company

Period Ended 12/31/2021

Dollars displayed in thousands

| Admitted Assets | | Liabilities and Surplus | |
|--|--------------|--|--------------|
| investments: | | Liabilities | |
| Bonds | \$ 1,827,267 | Loss Reserves | \$ 1,012,842 |
| Preferred Stocks | - | Loss Adjustment Expense Reserves | 307,403 |
| Common Stocks | 907,728 | Total Loss & LAE Reserves | 1,320,246 |
| Mortgage Loans | | | |
| Real Estate | - | Uneamed Premium Reserve | 655,993 |
| Contract Loans | - | Total Reinsurance Liabilities | 24,180 |
| Derivatives | - | Commissions, Other Expenses, and Taxes due | 63,766 |
| Cash, Cash Equivalents & Short Term Investments | 174,241 | Derhatives | |
| Other Investments | 20,131 | Payable to Parent, Subs or Affiliates | - |
| Total Cash & Investments | 2,929,367 | All Other Liabilities | 442,340 |
| Premiums and Considerations Due | 288,964 | Total Liabilities | 2,506,525 |
| Reinsurance Recoverable | 24,105 | | · · · · · · |
| Receivable from Parent, Subsidiary or Affiliates | 56,353 | Capital and Surplus | |
| All Other Admitted Assets | 59,690 | Common Capital Stock | 9,001 |
| | 26.5 | Preferred Capital Stock | - |
| Total Admitted Assets | 3,358,479 | Surplus Notes | - |
| | *** | Unassigned Surplus | 165,606 |
| | | Other Including Gross Contributed | 677,347 |
| | | Capital & Surplus | 851,954 |
| | | Total Liabilities and C&S | 3,358,479 |

State of Minnesota County of Hennepin

I, Kara Barrow, Secretary of Atlantic Specialty Insurance Company do hereby certify that the foregoing statement is a correct exhibit of the assets and liabilities of the said Company, on the 31st day of December, 2021, according to the best of my information, knowledge and belief.

Secretary

Subscribed and sworn to, before me, a Notary Public of the State of Minnesota on this 14th day of March, 2022.

Notary Public

KERRI RIECHERS
Notary Public
Minnesota
Ny Commission Empres January 31, 2025

My Commission Expires January 31, 2025