



The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header 1

[List View](#)

General Information

Procurement Folder: 1425026

Procurement Type: Central Purchase Order

Vendor ID: VS0000014170

Legal Name: MEADOWS ENTERPRISES LLC

Alias/DBA: MANOAH J MEADOWS

Total Bid: \$152,270.00

Response Date: 05/23/2024

Response Time: 12:06

Responded By User ID: mjm5

First Name: Manoah

Last Name: Meadows

Email: mmeadows2110@gmail.co

Phone: 3048906064

SO Doc Code: CRFQ

SO Dept: 0603

SO Doc ID: ADJ2400000017

Published Date: 5/23/24

Close Date: 5/23/24

Close Time: 13:30

Status: Closed

Solicitation Description: Camp Dawson Chalet Deck Replacement Construction

Total of Header Attachments: 1

Total of All Attachments: 1



Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Solicitation Response

Proc Folder: 1425026
Solicitation Description: Camp Dawson Chalet Deck Replacement Construction
Proc Type: Central Purchase Order

Solicitation Closes	Solicitation Response	Version
2024-05-23 13:30	SR 0603 ESR05232400000007310	1

VENDOR
VS0000014170
MEADOWS ENTERPRISES LLC

Solicitation Number: CRFQ 0603 ADJ2400000017
Total Bid: 152270
Response Date: 2024-05-23
Response Time: 12:06:28
Comments:

FOR INFORMATION CONTACT THE BUYER
David H Pauline
304-558-0067
david.h.pauline@wv.gov

Vendor		
Signature X	FEIN#	DATE

All offers subject to all terms and conditions contained in this solicitation

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	BASE BID- Camp Dawson Chalet Deck Replacement Construction				152270.00

Comm Code	Manufacturer	Specification	Model #
72000000			

Commodity Line Comments: SEALED BID: Camp Dawson Chalet Deck Replacement Construction
 BUYER: David Pauline
 SOLICITATION NO.: CRFQ 0603 ADJ2400000017
 BID OPEN DATE: 2024-05-23
 BID OPENING TIME: 13:30
 FAX NUMBER: 304-558-3970

Extended Description:
 See Exhibit "A" Pricing Page/Bid Form to input pricing.
 Contract Item #1- BASE BID- Labor & materials per the construction documents



Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

State of West Virginia
Centralized Request for Quote

Proc Folder: 1425026

Doc Description: Camp Dawson Chalet Deck Replacement Construction

Reason for Modification:

Addendum No. 1

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2024-05-23	2024-05-23 13:30	CRFQ 0603 ADJ2400000017	2

BID RECEIVING LOCATION

BID CLERK
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

VENDOR

Vendor Customer Code: VS000014170

Vendor Name : Meadows Enterprises, LLC

Address : PO Box 905

Street : 599 Breeden Road

City : Cool Ridge

State : West Virginia

Country : USA

Zip : 25825

Principal Contact : Manoah Meadows

Vendor Contact Phone: 304-890-6064

Extension:

FOR INFORMATION CONTACT THE BUYER

David H Pauline
304-558-0067
david.h.pauline@wv.gov

Vendor

Signature X 

FEIN# 46-0807273

DATE 05/23/2024

All offers subject to all terms and conditions contained in this solicitation

ADDITIONAL INFORMATION
Addendum No. 1
To publish the Mandatory Pre-bid Sign-in sheets, see attached.
Bid opening date and time remains May 23, 2024, at 1:30 pm., est.
No other changes.

INVOICE TO		SHIP TO	
ADJUTANT GENERALS OFFICE 1707 COONSKIN DR		CAMP DAWSON ARMY TRAINING SITE 240 ARMY RD	
CHARLESTON	WV	KINGWOOD	WV
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	BASE BID- Camp Dawson Chalet Deck Replacement Construction				\$152,270.00

Comm Code	Manufacturer	Specification	Model #
72000000			

Extended Description:

See Exhibit "A" Pricing Page/Bid Form to input pricing.

Contract Item #1- BASE BID- Labor & materials per the construction documents

SCHEDULE OF EVENTS		
<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	Mandatory Pre-bid Meeting at 10:30 am., est.	2024-05-16
2	Vendor Technical Questions Due By Noon est.,	2024-05-20

Subcontractor List Submission (Construction Contracts Only)

Bidder's Name: Meadows Enterprises, LLC



Check this box if no subcontractors will perform more than \$25,000.00 of work to complete the project.

Subcontractor Name	License Number if Required by W. Va. Code § 21-11-1 et. seq.

Attach additional pages if necessary

Revised 8/24/2023

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Printed Name and Title) Manoah Meadows, Owner

(Address) P0 Box 905 Cool Ridge, WV 25825

(Phone Number) / (Fax Number) 304-890-6064

(email address) mmeadows2110@gmail.com

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation/Contract for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; that I am authorized by the Vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on Vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

Meadows Enterprises, LLC

(Company)


(Signature of Authorized Representative)

Manoah Meadows, owner

(Printed Name and Title of Authorized Representative) (Date)

304-890-6064

(Phone Number) (Fax Number)

mmeadows2110@gmail.com

(Email Address)

REQUEST FOR QUOTATION – CRFQ ADJ 24*17
Camp Dawson Chalet(s) Deck Replacement Construction

- 11.1. Vendor must identify principal service personnel which will be issued access cards and/or keys to perform service.
- 11.2. Vendor will be responsible for controlling cards and keys and will pay replacement fee, if the cards or keys become lost or stolen.
- 11.3. Vendor shall notify Agency immediately of any lost, stolen, or missing card or key.
- 11.4. Anyone performing under this Contract will be subject to Agency's security protocol and procedures.
- 11.5. Vendor shall inform all staff of Agency's security protocol and procedures.

12. MISCELLANEOUS:

- 12.1. **Contract Manager:** During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Manoah Meadows

Telephone Number: 304-890-6064

Fax Number: _____

Email Address: mmeadows2110@gmail.com

- a. **Liquidated Damages:** Contractor shall pay liquidated damages in the amount of \$1,500.00 per day of delay, plus a one-time fixed cost of \$1,250.00 for Staff Judge Advocate review for work not completed after contract completion date. This clause shall in no way be considered exclusive and shall not limit the State or Agency's right to pursue any other available remedy.

EXHIBIT A – Pricing Page

Exhibit "A" Pricing Page CRFQ# ADJ24*17

ALL LABOR, MATERIALS, EQUIPMENT, AND SUPPLIES NECESSARY TO PROVIDE FOR
REPLACEMENT CONSTRUCTION OF THREE DECKS FOR CHALET(S) AT THE CAMP DAWSON ARMY
TRAINING SITE FACILITY
240 ARMY ROAD, KINGWOOD, WV

BID FORM

The undersigned, hereafter called the Bidder, being familiar with and understanding the bidding documents;
and being familiar with the site and all local conditions affecting the Project, hereby proposes to furnish labor,
material, equipment, supplies, and transportation to perform the work as described in the bidding documents.

BIDDERS COMPANY NAME: Meadows Enterprises, LLC

VENDOR ADDRESS: PO Box 905
Cool Ridge, WV 25825

TELEPHONE: 304-890-6064

FAX NUMBER: _____

E-MAIL ADDRESS: mmeadows2110@gmail.com

**CONTRACT TOTAL COST: BASE BID-CONTRACT ITEM NO.1- Replacement Construction of
three (3) decks for the Chalet(s) at Camp Dawson per the attached specifications.**

One hundred fifty-two thousand, two hundred seventy dollars and no/100

(\$ 152,270.00) *** (Contract bid to be written in words and numbers.)

SIGNATURE:  DATE: 05/22/2024

NAME: Manoah Meadows
(Please Print)

TITLE: owner



State of West Virginia
DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT
West Virginia Code §21-1D-5

I, Manoah Meadows, after being first duly sworn, depose and state as follows:

1. I am an employee of _____; and,
(Company Name)
2. I do hereby attest that Meadows Enterprises
(Company Name)

maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with **West Virginia Code §21-1D**.

The above statements are sworn to under the penalty of perjury.

Printed Name: Manoah Meadows

Signature: [Signature]

Title: Owner

Company Name: Meadows Enterprises

Date: 5/9/2024

STATE OF WEST VIRGINIA,

COUNTY OF Raleigh, TO-WIT:

Taken, subscribed and sworn to before me this 9th day of May, 2024.

By Commission expires 1/24/2028

(Seal)



[Signature]
 (Notary Public)



CONTRACTOR LICENSE

AUTHORIZED BY THE
West Virginia Contractor
Licensing Board

NUMBER: WV043311

CLASSIFICATION:
GENERAL BUILDING

MEADOWS ENTERPRISES LLC
DBA MEADOWS ENTERPRISES LLC
PO BOX 905
COOL RIDGE, WV 25825

DATE ISSUED

DECEMBER 15, 2023

EXPIRATION DATE

DECEMBER 15, 2024

Authorized Signature

Chair, West Virginia Contractor
Licensing Board



A copy of this license must be readily available for inspection by the Board on every job site where contracting work is being performed. This license number must appear in all advertisements, on all bid submissions, and on all fully executed and binding contracts. This license is non-transferable. This license is being issued under the provisions of West Virginia Code, Chapter 30, Article 42.

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ ADJ2400000017

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:


(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Meadows Enterprises, LLC

Company



Authorized Signature

05/23/2024

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/23/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER The Hilb Group of West Virginia LLC 3601 MacCorkle Ave, Ste 50 Charleston WV 25304		CONTACT NAME: Rhonda Hughes PHONE (A/C, No, Ext): (304) 926-7400 FAX (A/C, No): (304) 926-7433 E-MAIL ADDRESS: rhonda.hughes@hilbgroup.com													
INSURED MEADOWS ENTERPRISES LLC PO BOX 905 COOL RIDGE WV 25825		INSURER(S) AFFORDING COVERAGE <table><tr><td>INSURER A: State Auto Property & Casualty Insurance Co</td><td>NAIC # 25127</td></tr><tr><td>INSURER B: State Automobile Mutual Insurance Co</td><td>25135</td></tr><tr><td>INSURER C: BrickStreet Mutual Insurance Co</td><td>12372</td></tr><tr><td>INSURER D:</td><td></td></tr><tr><td>INSURER E:</td><td></td></tr><tr><td>INSURER F:</td><td></td></tr></table>		INSURER A: State Auto Property & Casualty Insurance Co	NAIC # 25127	INSURER B: State Automobile Mutual Insurance Co	25135	INSURER C: BrickStreet Mutual Insurance Co	12372	INSURER D:		INSURER E:		INSURER F:	
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INSURER C: BrickStreet Mutual Insurance Co	12372														
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES

CERTIFICATE NUMBER: 24-25 Master

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PBP2889273	01/05/2024	01/05/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			10124791CA	03/30/2024	03/30/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			PBP2889273	01/05/2024	01/05/2025	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N Y N/A			WCB1019998	08/16/2023	08/16/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Project: Camp Dawson Chalet Deck Replacement Construction

CERTIFICATE HOLDER

CANCELLATION

West Virginia Army National Guard 1707 Coonskin Dr. Charleston WV 25311	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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ACORD 25 (2016/03)

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BID BOND

KNOW ALL MEN BY THESE PRESENTS. That we, the undersigned, Meadows Enterprises LLC
of Cool Ridge, West Virginia, as Principal, and RLI Corporation
of Peoria, Illinois, a corporation organized and existing under the laws of the State of
Illinois with its principal office in the City of Peoria, as Surety are held and firmly bound unto the State
of West Virginia, as Obligor, in the penal sum of Five percent of the bid amount 5% for the payment of which,
well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for
Camp Dawson Chalet Deck Replacement Construction

NOW THEREFORE,

(a) If said bid shall be rejected, or
(b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal
attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform
the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no
way impaired or affected by any extension of the time within which the Obligor may accept such bid, and said Surety does hereby
waive notice of any such extension.

WITNESS, the following signatures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and
Surety, or by Principal individually if Principal is an individual, this 23 day of May, 20 24.

Principal Seal

Meadows Enterprises LLC

(Name of Principal)

By [Signature]
(Must be President, Vice President, or
Duly Authorized Agent)

owner
(Title)

Surety Seal

RLI Corporation

(Name of Surety)

[Signature]
Attorney-in-Fact

IMPORTANT - Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and
must attach a power of attorney with its seal affixed.

POWER OF ATTORNEY

RLI Insurance Company Contractors Bonding and Insurance Company

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

Know All Men by These Presents:

That this Power of Attorney is not valid or in effect unless attached to the bond which it authorizes executed, but may be detached by the approving officer if desired.

That **RLI Insurance Company** and/or **Contractors Bonding and Insurance Company**, each an Illinois corporation, (separately and together, the "Company") do hereby make, constitute and appoint:

Adam Homan, Nick Evans, Cassi Spigle, Prescott Engle, jointly or severally

in the City of Moorefield, State of West Virginia its true and lawful Agent(s) and Attorney(s) in Fact, with full power and authority hereby conferred, to sign, execute, acknowledge and deliver for and on its behalf as Surety, in general, any and all bonds and undertakings in an amount not to exceed Twenty Five Million Dollars (\$25,000,000.00) for any single obligation.

The acknowledgment and execution of such bond by the said Attorney in Fact shall be as binding upon the Company as if such bond had been executed and acknowledged by the regularly elected officers of the Company.

RLI Insurance Company and/or **Contractors Bonding and Insurance Company**, as applicable, have each further certified that the following is a true and exact copy of a Resolution adopted by the Board of Directors of each such corporation, and is now in force, to-wit:

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

IN WITNESS WHEREOF, the **RLI Insurance Company** and/or **Contractors Bonding and Insurance Company**, as applicable, have caused these presents to be executed by its respective Vice President with its corporate seal affixed this 11th day of July, 2022.

State of Illinois }
County of Peoria } SS



RLI Insurance Company
Contractors Bonding and Insurance Company

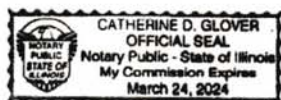
By: B. W. Davis
Barton W. Davis Vice President

CERTIFICATE

On this 11th day of July, 2022, before me, a Notary Public, personally appeared Barton W. Davis, who being by me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of the **RLI Insurance Company** and/or **Contractors Bonding and Insurance Company** and acknowledged said instrument to be the voluntary act and deed of said corporation.

I, the undersigned officer of **RLI Insurance Company** and/or **Contractors Bonding and Insurance Company**, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable; and furthermore, that the Resolution of the Company as set forth in the Power of Attorney, is now in force. In testimony whereof, I have hereunto set my hand and the seal of the **RLI Insurance Company** and/or **Contractors Bonding and Insurance Company** this 25 day of May, 2024.

By: Catherine D. Glover
Catherine D. Glover Notary Public



RLI Insurance Company
Contractors Bonding and Insurance Company

By: Jeffrey D. Pick
Jeffrey D. Pick Corporate Secretary