

BOND NO. 30190068  
PREMIUM \$100.00

## GUARANTEE AND WARRANTY BOND

WHEREAS, Meritage Homes of California, Inc., a California Corporation, as a Principal, and The Continental Insurance Company, a corporation organized under the laws of the State of Pennsylvania and duly authorized to do business in the State of California, as Surety, are held and firmly bound unto the City of Huntington Beach, California, as Obligee, in the penal sum of Six Thousand Four Hundred Sixty Three and 80/100 (\$6,463.80), representing 10 percent of the contract price entered into between the Principal and Obligee, to which payment well and truly to be made we do bind ourselves, and each of our heirs, executors, administrators, successors and assigns jointly and severally.

WHEREAS, the said Principal entered into a contract with said Obligee, dated July 18, 2019 for work described as follows:

Regatta (Gothard) - Tract No. 18106,- Off-site Improvements and Public Utilities

WHEREAS, said contract provides that the Principal will furnish a bond conditioned to guarantee and warrant for the period of one year after completion of the work and acceptance thereof by the Obligee, against all defects in workmanship and materials during said one-year period.

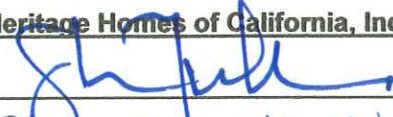
WHEREAS, said work has been completed, and accepted by Obligee on \_\_\_\_\_.

NOW, THEREFORE, the Principal and Surety, jointly and severally shall indemnify the Obligee for all loss that the Obligee may sustain by reason of any defective materials or workmanship, which become apparent during the period of one year from and after date of completion of work and acceptance thereof by Obligee.

In witness whereof, this instrument has been duly executed by the principal and surety above named, on May 18, 2023.

Meritage Homes of California, Inc., a California Corporation, as Principal

By: \_\_\_\_\_

  
Glen Turk - VP National Land  
Printed Name

The Continental Insurance Company, as Surety

By: \_\_\_\_\_

  
James I Moore, Attorney-in-Fact  
Printed Name

APPROVED AS TO FORM

By: \_\_\_\_\_  
MICHAEL E. GATES  
CITY ATTORNEY  
CITY OF HUNTINGTON BEACH



STATE OF CALIFORNIA )  
 ) SS  
COUNTY OF ORANGE )

ON \_\_\_\_\_, BEFORE ME, \_\_\_\_\_, A  
NOTARY PUBLIC IN AND FOR SAID STATE, PERSONALLY APPEARED \_\_\_\_\_  
\_\_\_\_\_ AND \_\_\_\_\_,

PROVED TO ME ON THE BASIS OF STATISFACTORY EVIDENCE TO BE THE PERSONS  
WHOSE NAMES ARE SUBSCRIBED TO THE WITHIN INSTRUMENT AND ACKNOWLEDGES TO  
ME THAT THEY EXECUTED THE SAME IN THEIR AUTHORIZED CAPACITIES, AND THAT BY  
THEIR SIGNATURES ON THE INSTRUMENT THE PERSONS, OR THE ENTITY UPON BEHALF  
OF WHICH THE PERSONS ACTED, EXECUTED THE INSTRUMENT.

WITNESS MY HAND

SIGNATURE \_\_\_\_\_  
NOTARY PUBLIC IN AND FOR SAID STATE

MY PRINCIPAL PLACE OF BUSINESS IS  
IN \_\_\_\_\_ COUNTY

\_\_\_\_\_  
PRINTED NAME

MY COMMISSION EXPIRES \_\_\_\_\_

STATE OF ILLINOIS )  
 ) SS  
COUNTY OF DUPAGE )

ON May 18, 2023, BEFORE ME, Lisa Marotta, A NOTARY  
PUBLIC IN AND FOR SAID STATE, PERSONALLY APPEARED James I Moore, Attorney-in-Fact  
\_\_\_\_\_ AND N/A,

PROVED TO ME ON THE BASIS OF STATISFACTORY EVIDENCE TO BE THE PERSONS  
WHOSE NAMES ARE SUBSCRIBED TO THE WITHIN INSTRUMENT AND ACKNOWLEDGES TO  
ME THAT THEY EXECUTED THE SAME IN THEIR AUTHORIZED CAPACITIES, AND THAT BY  
THEIR SIGNATURES ON THE INSTRUMENT THE PERSONS, OR THE ENTITY UPON BEHALF  
OF WHICH THE PERSONS ACTED, EXECUTED THE INSTRUMENT.

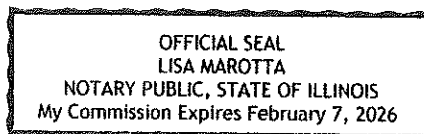
WITNESS MY HAND

SIGNATURE *Lisa Marotta*  
NOTARY PUBLIC IN AND FOR SAID STATE

MY PRINCIPAL PLACE OF BUSINESS IS  
IN DuPage COUNTY

Lisa Marotta  
PRINTED NAME

MY COMMISSION EXPIRES February 7, 2026



**POWER OF ATTORNEY APPOINTING INDIVIDUAL ATTORNEY-IN-FACT**

**Know All Men By These Presents,** That The Continental Insurance Company, a Pennsylvania insurance company, is a duly organized and existing insurance company having its principal office in the City of Chicago, and State of Illinois, and that it does by virtue of the signature and seal herein affixed hereby make, constitute and appoint

**James I Moore, Stephen T Kazmer, Dawn L Morgan, Melissa Schmidt, Amy Wickett, Kelly A Gardner, Jennifer J Mc Comb, Tariese M Pisciotto, Diane M Rubright, Martin Moss, Individually**

of Downers Grove, IL, its true and lawful Attorney(s)-in-Fact with full power and authority hereby conferred to sign, seal and execute for and on its behalf bonds, undertakings and other obligatory instruments of similar nature

**- In Unlimited Amounts -**

and to bind them thereby as fully and to the same extent as if such instruments were signed by a duly authorized officer of the insurance company and all the acts of said Attorney, pursuant to the authority hereby given is hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the By-Law and Resolutions, printed on the reverse hereof, duly adopted, as indicated, by the Board of Directors of the insurance company.

**In Witness Whereof,** The Continental Insurance Company has caused these presents to be signed by its Vice President and its corporate seal to be hereto affixed on this 20th day of June, 2021.

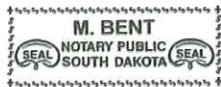


The Continental Insurance Company

*Paul T. Bruffat*  
Paul T. Bruffat Vice President

State of South Dakota, County of Minnehaha, ss:

On this 20th day of June, 2021, before me personally came Paul T. Bruffat to me known, who, being by me duly sworn, did depose and say: that he resides in the City of Sioux Falls, State of South Dakota; that he is a Vice President of The Continental Insurance Company, a Pennsylvania insurance company, described in and which executed the above instrument; that he knows the seal of said insurance company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed pursuant to authority given by the Board of Directors of said insurance company and that he signed his name thereto pursuant to like authority, and acknowledges same to be the act and deed of said insurance company.



My Commission Expires March 2, 2026

*M. Bent*  
M. Bent Notary Public

**CERTIFICATE**

I, D. Johnson, Assistant Secretary of The Continental Insurance Company, a Pennsylvania insurance company, do hereby certify that the Power of Attorney herein above set forth is still in force, and further certify that the By-Law and Resolution of the Board of Directors of the insurance company printed on the reverse hereof is still in force. In testimony whereof I have hereunto subscribed my name and affixed the seal of the said insurance company this 18th day of May, 2023.



The Continental Insurance Company

*D. Johnson*  
D. Johnson Assistant Secretary

Form F6850-4/2012

## **Authorizing By-Laws and Resolutions**

ADOPTED BY THE BOARD OF DIRECTORS OF THE CONTINENTAL INSURANCE COMPANY:

This Power of Attorney is made and executed pursuant to and by authority of the following By-Law duly adopted by the Board of Directors of the Company at a meeting held on May 10, 1995.

“RESOLVED: That any Group Vice President may authorize an officer to sign specific documents, agreements and instruments on behalf of the Company provided that the name of such authorized officer and a description of the documents, agreements or instruments that such officer may sign will be provided in writing by the Group Vice President to the Secretary of the Company prior to such execution becoming effective.

This Power of Attorney is signed by Paul T. Bruflat, Vice President, who has been authorized pursuant to the above resolution to execution power of attorneys on behalf of The Continental Insurance Company.

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following Resolution adopted by the Board of Directors of the Company by unanimous written consent dated the 25<sup>th</sup> day of April, 2012.

“Whereas, the bylaws of the Company or specific resolution of the Board of Directors has authorized various officers (the “Authorized Officers”) to execute various policies, bonds, undertakings and other obligatory instruments of like nature; and

Whereas, from time to time, the signature of the Authorized Officers, in addition to being provided in original, hard copy format, may be provided via facsimile or otherwise in an electronic format (collectively, “Electronic Signatures”), Now therefore be it resolved: that the Electronic Signature of any Authorized Officer shall be valid and binding on the Company.”

**ALL-PURPOSE ACKNOWLEDGEMENT**

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 ARIZONA )SS  
COUNTY OF MARICOPA )

On May 25, 2023 before me, Laura Gunderson, Notary Public, personally appeared

Glen A. Tulk, Vice President - National Development of Meritage Homes of California, Inc.  
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 Arizona that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Laura Gunderson



This area for official notarial seal.

**OPTIONAL SECTION - NOT PART OF NOTARY ACKNOWLEDGEMENT  
CAPACITY CLAIMED BY SIGNER**

Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the documents.

- INDIVIDUAL
- CORPORATE OFFICER(S) TITLE(S)
- PARTNER(S)       LIMITED       GENERAL
- ATTORNEY-IN-FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER

SIGNER IS REPRESENTING:

\_\_\_\_\_  
Name of Person or Entity

\_\_\_\_\_  
Name of Person or Entity

**OPTIONAL SECTION - NOT PART OF NOTARY ACKNOWLEDGEMENT**

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

**THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED BELOW**

TITLE OR TYPE OF DOCUMENT: \_\_\_\_\_

NUMBER OF PAGES \_\_\_\_\_ DATE OF DOCUMENT \_\_\_\_\_

SIGNER(S) OTHER THAN NAMED ABOVE \_\_\_\_\_