

Bond No. 467712P

SURETY BOND

AS REQUIRED BY A.R.S. TITLE 32, CHAPTER 30 – September 2016

We, TRADEZ INSTITUTE LLC DBA Tradez, of
(Name of Principal)

10279 North 79th Street, Scottsdale AZ 85258, as Principal, and

Westfield Insurance Company, a corporation
(Name of Surety)

organized under the laws of the State of Ohio and duly authorized to transact business as Surety under the laws of the State of Arizona, as Surety, are jointly and severally bound to the State of Arizona and its assigns in the sum of Fifteen Thousand and 00/100 Dollars (\$15,000.00), for the payment of which sum we hereby jointly and severally obligate and bind ourselves and our successors, all on the terms and conditions hereafter described. This bond shall be one continuing obligation, and the liability of the Surety for the aggregate of any and all claims which may arise hereunder shall in no event exceed the amount of the penalty hereof.

WHEREAS, Principal shall submit an application to the Arizona State Board for Private Postsecondary Education (“Board”) for a license under Arizona Revised Statutes, Title 32, Chapter 30 and

WHEREAS, a bond in this form must accompany such application,

NOW, THEREFORE, upon the granting of a license to Principal by the aforementioned Board, Principal shall faithfully comply with all the provisions of law, Arizona and Federal, required of Principal and all such provisions as may be hereafter imposed upon Principal by law, and Principal shall refrain from injuring or damaging any person by reason of any unlawful act, including, but not limited to, any breach of contract. Pursuant to A.R.S. § 32-3023(G), this bond is subject to claims by the aforementioned Board for failure to pay any amount required pursuant to Title 32, Chapter 30 or by any person who is damaged by the failure of the Principal to provide educational services pursuant to its published catalogs, brochures, or other publications, and any failure by Principal to so comply with the law or to so refrain from injuring or damaging any person shall impose upon the Principal and Surety joint and several liability to any person who suffers loss by reason thereof.

Principal shall not cancel this bond for the period of time for which the license to Principal is issued and that this bond shall inure to the benefit of any person who suffers loss by reason of any unlawful act of Principal, including, but not limited to, any breach of contract by Principal. The Surety reserves the right to cancel the bond upon sixty days written notice to Principal and the Board.

No suit may be commenced on this bond after the expiration of three years following the commission of the act on which the suit is based except that time for purposes of claims for fraud shall be measured as provided in A.R.S. § 12-543.

IN WITNESS WHEREOF, the parties have executed this bond at Columbia, Missouri

February 12, 2025, this 12th day of February, 2025 .

EFFECTIVE DATE:

By _____

Principal

Joshua Kayser

Producer Name

Westfield Insurance Company

Surety

N/A Retaliatory

Countersignature of Resident Agent

By _____


Attorney in Fact

CERTIFIED COPY

Know All Men by These Presents, That WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY, corporations, hereinafter referred to individually as a "Company" and collectively as "Companies," duly organized and existing under the laws of the State of Ohio, and having their principal offices in Westfield Center, Medina County, Ohio, do by these presents make, constitute and appoint **MATTHEW BOCKLAGE, JAMIE BRIGGS, BRAD BULLERDIECK, SEDA GULER, BRIAN D. RUSSELL, JR., BERNARDO C. SCORZA GASPAS, ROBERT J. WOLF, BLAKE OLIVER, MARK KARR, JOSHUA KAYSER, ZACK LENZ, JOINTLY OR SEVERALLY**, of COLUMBIA and State of MO their true and lawful Attorney(s)-in-Fact, with full power and authority hereby conferred in their names, place and stead, to execute, acknowledge and deliver any and all bonds, recognizances, undertakings, or other instruments or contracts of suretyship in any penal limit -----

LIMITATION: THIS POWER OF ATTORNEY CANNOT BE USED TO EXECUTE NOTE GUARANTEE, MORTGAGE DEFICIENCY, MORTGAGE GUARANTEE, OR BANK DEPOSITORY BONDS.

and to bind any of the Companies thereby as fully and to the same extent as if such bonds were signed by the President, sealed with the corporate seal of the applicable Company and duly attested by its Secretary, hereby ratifying and confirming all that the said Attorney(s)-in-Fact may do in the premises. Said appointment is made under and by authority of the following resolution adopted by the Board of Directors of each of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY and OHIO FARMERS INSURANCE COMPANY.

BE IT RESOLVED, that the President, any Senior Executive, any Secretary or any Fidelity & Surety Operations Executive or other Executive shall be and is hereby vested with full power and authority to appoint any one or more suitable persons as Attorney(s)-in-Fact to represent and act for and on behalf of the Company subject to the following provisions:

The Attorney-in-Fact may be given full power and authority for and in the name of and on behalf of the Company, to execute, acknowledge and deliver, any and all bonds, recognizances, contracts, agreements of indemnity and other conditional or obligatory undertakings and any and all notices and documents cancelling or terminating the Company's liability thereunder, and any such instruments so executed by any such Attorney-in-Fact shall be as binding upon The Company as if signed by the President and sealed and attested by the Corporate Secretary."

"BE IT FURTHER RESOLVED, that the signature of any such designated person and the seal of the Company heretofore or hereafter affixed to any power of attorney or any certificate relating thereto by facsimile, and any power of attorney or certificate bearing facsimile signatures or facsimile seal shall be valid and binding upon the Company with respect to any bond or undertaking to which it is attached." (Each adopted at a meeting held on February 8, 2000.)

In Witness Whereof, WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY have caused these presents to be signed by their **National Surety Leader** and **Senior Executive** and their corporate seals to be hereto affixed this **27th** day of **July**, A.D., **2022**.

Corporate
Seals
Affixed



WESTFIELD INSURANCE COMPANY
WESTFIELD NATIONAL INSURANCE COMPANY
OHIO FARMERS INSURANCE COMPANY

By: **Gary W. Stumper**,

National Surety Leader and Senior Executive

State of Ohio
County of Medina ss.:

On this **27th** day of **July**, A.D., **2022**, before me personally came **Gary W. Stumper**, to me known, who, being by me duly sworn, did depose and say, that he resides in **Medina, Ohio**; that he is **National Surety Leader** and **Senior Executive** of WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY, the companies described in and which executed the above instrument; that he knows the seals of said Companies; that the seals affixed to said instrument are such corporate seals; that they were so affixed by order of the Board of Directors of said Companies; and that he signed his name thereto by like order.

Notarial
Seal
Affixed



By:

David A. Kotnik, Attorney at Law, *Notary Public*
My Commission Does Not Expire (Sec. 147.03 Ohio Revised Code)

State of Ohio
County of Medina ss.:

CERTIFICATE

I, **Frank Carrino**, Secretary of the WESTFIELD INSURANCE COMPANY, WESTFIELD NATIONAL INSURANCE COMPANY, and OHIO FARMERS INSURANCE COMPANY, do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney, executed by said Companies, which is still in full force and effect; and furthermore, the resolutions of the Board of Directors, set out in the Power of Attorney are in full force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seal of said Company at Westfield Center, Ohio, this **12** day of **February**, A.D., **2025**.

BPOAC
(03-22)



By:

Frank Carrino, *Secretary*

**ADDITIONAL INFORMATION REQUIRED
FOR SURETY COMPANY**

**The Surety Company must have a BEST rating of A or higher
pursuant to A.R.S. § 32-3023 (D)**

Contact Name: Joshua Kayser

Address: One Park Circle

City, State, Zip: Westfield Center, OH 44251-5001

Phone #: 800-243-0210

Fax #: _____

E-mail Address: customer@suretybonds.com

Web Site Address: www.suretybonds.com

BEST Rating: A (Excellent)
(Attach copy of print out of rating)

Updated July 2018