Corrected Original	
Bond No 0847082	

### SURETY BOND

## (AS REQUIRED BY NORTH CAROLINA GENERAL STATUTE GS 116-15)

We, University of Massachusetts Global	of
(Name of Principal)	
16355 Laguna Canyon Dr. #3, Irvine, CA 96218	, as principal, and
Harco National Insurance Company	, as surety, a corporation
(Name of Surety)	
organized under the laws of the State of Illinois at the laws of the State of North Carolina, are jointly and severally bound to (the "Board") and its assigns in the sum of Eighty Thousand and 00/100 Dollars	nd duly authorized to transact business as a surety under the Board of Governors of the University of North Carolina , for the
payment of which sum we hereby jointly and severally obligate and bind hereafter described. This bond shall be one continuing obligation, and the which may arise hereunder shall in no event exceed the amount of the per	liability of the surety for the aggregate of any and all claims
WHEREAS, Principal has submitted or shall submit an application for a l "License") to the Board pursuant to North Carolina General Statute 116-1	
WHEREAS, a bond in this form must accompany such application,	
NOW, THEREFORE, upon the granting of the License to Principal by the provisions of law required of Principal, including but not limited to NCG provisions as may be hereafter imposed upon Principal by law or regulation person by reason of any unlawful act, including, but not limited to, any but or to so refrain from injuring or damaging any person shall impose upon the person who suffers loss by reason thereof.	S 116-15 and its implementing regulations, and all such on, and Principal shall refrain from injuring or damaging any reach of contract, and any failure by Principal to so comply
Principal shall not cancel this bond for the period of time for which the Lethe benefit of any person who suffers loss by reason of any unlawful act contract by Principal. The Surety reserves the right to cancel the bond upous Such written notice to the Board must be made by registered mail to: Stat Carolina, 27603 with an electronic copy to stateauthorization@northcarolina.	of Principal, including, but not limited to, any breach of on sixty days written notice to Principal and to the Board. e Authorization Unit, 223 S. West Street, Raleigh, North
Effective this 12 <sup>th</sup> day of April , 2024.	
	University of Massachusetts Global Principal By:
SEAL COLUNDS	By: Sandra Corona, Attorney-In-Fact

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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 Los Angeles				
On APR 12 2024 before me, Marina	Tapia, Notary Public			
Date	Here Insert Name and Title of the Officer			
Personally appeared Sandra Corona				
	Name(s) of Signer(s)			
the within instrument and acknowledged to me that h	e to be the person(s) whose name(s) is/are subscribed to e/she/they executed the same in his/her/their authorized ne instrument the person(s), or the entity upon behalf of			
MARINA TAPIA COMM. # 23333302 NOTARY PUBLIC - CALIFORNIA COMMY LOS ANGELES COUNTY My Comm. Expires Oct 7, 2024	certify under PENALTY OF PERJURY under the laws of the tate of California that the foregoing paragraph is true nd correct.  VITNESS my hand and official seal.  ignature			
Signature of Notary Public				
Place Notary Seal Above	PTIONAL			
Though this section is optional, completing this	PTIONALinformation can deter alteration of the document or is form to an unintended document.			
Though this section is optional, completing this	information can deter alteration of the document or			
Though this section is optional, completing this fraudulent reattachment of th	information can deter alteration of the document or			
Though this section is optional, completing this fraudulent reattachment of th  Description of Attached Document  Title or Type of Document	information can deter alteration of the document or is form to an unintended document.			
Though this section is optional, completing this fraudulent reattachment of th  Description of Attached Document  Title or Type of Document	information can deter alteration of the document or is form to an unintended document.  Document Date			
Though this section is optional, completing this fraudulent reattachment of the Description of Attached Document  Title or Type of Document  Number of Pages Signer(s) Other  Capacity(ies) Claimed by Signer(s)  Signer's Name Corporate Officer—Title(s) Partner Limited General Individual Attorney in Fact	information can deter alteration of the document or is form to an unintended document.  Document Date r Than Named Above  Signer's Name Corporate Officer—Title(s) Partner Limited General Individual Attorney in Fact			

# POWER OF ATTORNEY

## HARCO NATIONAL INSURANCE COMPANY

### INTERNATIONAL FIDELITY INSURANCE COMPANY

Member companies of IAT Insurance Group, Headquartered: 4200 Six Forks Rd, Suite 1400, Raleigh, NC 27609

KNOW ALL MEN BY THESE PRESENTS: That HARCO NATIONAL INSURANCE COMPANY, a corporation organized and existing under the laws of the State of Illinois, and INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation organized and existing under the laws of the State of New Jersey, and having their principal offices located respectively in the cities of Rolling Meadows, Illinois and Newark, New Jersey, do hereby constitute and appoint

D. GARCIA, TIMOTHY J. NOONAN, SANDRA CORONA, ETHAN SPECTOR, JENNIFER G. OCHS, SARAH CAMPBELL, JANINA MONROE, MARINA TAPIA, KD WAPATO, EDWARD C. SPECTOR, ERIN BROWN, SIMONE GERHARD, JAREN A. MARX, RACHEL A. MULLEN, B. ALEMAN

#### Los Angeles, CA

their true and lawful attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise, and the execution of such instrument(s) in pursuance of these presents, shall be as binding upon the said HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY, as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by their regularly elected officers at their principal offices.

This Power of Attorney is executed, and may be revoked, pursuant to and by authority of the By-Laws of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY and is granted under and by authority of the following resolution adopted by the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY at a meeting duly held on the 13th day of December, 2018 and by the Board of Directors of HARCO NATIONAL INSURANCE COMPANY at a meeting held on the 13th day of December, 2018.

\*RESOLVED, that (1) the Chief Executive Officer, President, Executive Vice President, Senior Vice President, Vice President, or Secretary of the Corporation shall have the power to appoint, and to revoke the appointments of, Attorneys-in-Fact or agents with power and authority as defined or limited in their respective powers of attorney, and to execute on behalf of the Corporation and affix the Corporation's seal thereto, bonds, undertakings, recognizances, contracts of indemnity and other written obligations in the nature thereof or related thereto; and (2) any such Officers of the Corporation may appoint and revoke the appointments of joint-control custodians, agents for acceptance of process, and Attorneys-in-fact with authority to execute waivers and consents on behalf of the Corporation; and (3) the signature of any such Officer of the Corporation and the Corporation's seal may be affixed by facsimile to any power of attorney or certification given for the execution of any bond, undertaking, recognizance, contract of indemnity or other written obligation in the nature thereof or related thereto, such signature and seals when so used whether heretofore or hereafter, being hereby adopted by the Corporation as the original signature of such officer and the original seal of the Corporation, to be valid and binding upon the Corporation with the same force and effect as though manually affixed."

> IN WITNESS WHEREOF, HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY have each executed and attested these presents on this 31st day of December, 2022

STATE OF NEW JERSEY County of Essex

STATE OF ILLINOIS County of Cook

Kenneth Chapman

Executive Vice President, Harco National Insurance Company

and International Fidelity Insurance Company

, before me came the individual who executed the preceding instrument, to me personally known, and, On this 31st day of December, 2022 being by me duly sworn, said he is the therein described and authorized officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY; that the seals affixed to said instrument are the Corporate Seals of said Companies; that the said Corporate Seals and his signature were duly affixed by order of the Boards of Directors of said Companies.



IN TESTIMONY WHEREOF, I have hereunto set my hand affixed my Official Seal, at the City of Newark, New Jersey the day and year first above written.

a Notary Public of New Jersey My Commission Expires April 16. 2024

**CERTIFICATION** 

I, the undersigned officer of HARCO NATIONAL INSURANCE COMPANY and INTERNATIONAL FIDELITY INSURANCE COMPANY do hereby certify that I have compared the foregoing copy of the Power of Attorney and affidavit, and the copy of the Sections of the By-Laws of said Companies as set forth in said Power of Attorney, with the originals on file in the home office of said companies, and that the same are correct transcripts thereof, and of the whole of the said originals, and that the said Power of Attorney has not been revoked and is now in full force and effect.

IN TESTIMONY WHEREOF, I have hereunto set my hand on this day-

Irene Martins, Assistant Secretary

### CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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A notary public or other officer completing this to which this certificate is attached, and not the	certificate verifies only the identit ne truthfulness, accuracy, or valid	y of the individual wi ity of that document	no signed the document
State of California County of San Diego	}	*	•
County ofSan Diego	J		
On April 22, 2024 before	ore me, Katherine	Hogan	Notary Public
Date	Here Insert	Name and Title	of the Officer
personally appearedDaniel	Devine		
	Name(s) of Signe	r(s)	
	\$00-00 pix		
who proved to me an the basis of action	-1		

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.

Signature

KATHERINE HOGAN COMM, # 2471702 NOTARY PUBLIC CALIFORNIA COUNTY OF SAN DIEGO MY COMM. EXP. NOV. 14, 2027

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Place Notary Seal and/or Stamp Above

Signature of Notary Public