SUBDIVISION BOND

Bond No. 609202843 KNOW ALL MEN BY THESE PRESENTS, that we Meritage Homes of Texas, LLC, 8920 Business Park Drive, Suite 350, Austin, TX 87859 as Principal, and Liberty Mutual Insurance Company authorized to do business in the State of Massachusetts _____, as Surety, are held and firmly bound unto _____ City of Dripping Springs, P.O. Box 384, Dripping Springs, TX 78620 as Obligee, in the penal sum of Three Million Eight Hundred Forty Eight Thousand Six Hundred Forty One and 61/100 _____ (\$ 3,848,641.61) DOLLARS, lawful money of the United States of America, for the payment of which well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents. WHEREAS, Meritage Homes of Texas, LLC has agreed to construct in Big Sky Ranch the following improvements: Phase 1 Development Improvements NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the said Principal shall construct, or have constructed, the improvements herein described and shall save the Obligee harmless from any loss, cost or damage by reason of its failure to complete said work, then this obligation shall be null and void; otherwise to remain in full force and effect. Signed, sealed and dated this 1st day of November Meritage Homes of Texas, Principal VA-NATIONALLAND DEVELORMENT Liberty Mutual Insurance Company

Kristin D. Thurber, Attorney-in-Fact

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Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Certificate No: 8200754-024127

onfirm the validity of this Power of Attorney call 0-832-8240 between 9:00 am and 4:30 pm EST on any business day.

POWER OF ATTORNEY

Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, the Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, James A. Bracy, Terry Crull, David G. Jensen, Hillary D. Shepard, Kristin D. Thurber
all of the city of Scottsdale state of Arizona each individually if there be more than one named, its true and lawful attorney-in-fact to make execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own propersons.
IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this21st day ofMarch,2019
Liberty Mutual Insurance Company The Ohio Casualty Insurance Company West American Insurance Company The Ohio Casualty Insurance Company West American Insurance Company The Ohio Casualty Insurance Company West American Insurance Company The Ohio Casualty Insurance Company The Ohio Casualty Insurance Company West American Insurance Company The Ohio Casualty Insurance Company T
State of PENNSYLVANIA ss County of MONTGOMERY
On this <u>21st</u> day of <u>March</u> , <u>2019</u> before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purpose therein contained by signing on behalf of the corporations by himself as a duly authorized officer.
IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at King of Prussia, Pennsylvania, on the day and year first above written.
COMMONWEALTH OF PENNSYLVANIA Notarial Seal Teresa Pastella, Notary Public Upper Merion Twp., Montgomery County My Commission Expires March 28, 2021 Member, Pennsylvania Association of Notaries COMMONWEALTH OF PENNSYLVANIA Notarial Seal Teresa Pastella Teresa Pastella, Notary Public Teresa Pastella, Notary Public
This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of The Ohio Casualty Insurance Company, Liberty Mutual Insuranc Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:
ARTICLE IV – OFFICERS: Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the Presider may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and a undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have fu power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments sha be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of thi article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.
ARTICLE XIII – Execution of Contracts: Section 5. Surety Bonds and Undertakings. Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as signed by the president and attested by the secretary.
Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other suret obligations.
Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.
I, Renee C. Llewellyn, the undersigned, Assistant Secretary, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company d hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect an has not been revoked.
IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 1st day of November , 2019 .
1912 0 1919 By: Renee C. Llewellyn, Assistant Secretary

Figure: 28 TAC §1.601(a)(3)

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1 IMPORTANT NOTICE

To obtain information or make a complaint:

2 You may contact Home Office Surety at 1-610-832-8240

3 You may call (company)'s toll-free telephone number for information or to make a complaint at:

(800) 472-5357 Surety Option #7

4 You may also write to Liberty Mutual Surety at:

175 Berkeley Street Boston, MA 02116

5 You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights or complaints at:

(800) 252-3439

6 You may write the Texas Department of Insurance:

P.O. Box 149104 Austin, TX 78714-9104 Fax: (512) 475-1771

Web: http://www.tdi.state.tx.us

E-mail: ConsumerProtection@tdi.state.tx.us

7 PREMIUM OR CLAIM DISPUTES:

Should you have a dispute concerning your premium or about a claim you should contact the (agent) (company) (agent or the company) first. If the dispute is not resolved, you may contact the Texas Department of Insurance.

8 ATTACH THIS NOTICE TO YOUR POLICY:

This notice is for information only and does not become a part or condition of the attached document.

AVISO IMPORTANTE

Para obtener información o para someter una queja:

Usted puede contactar a servicio de la oficina principal de Surety al: 1-610-832-8240

Usted puede llamar al número de teléfono gratis de (company)'s para información o para someter una queja al:

(800) 472-5357 Surety Opción De #7

Usted también puede escribir a Liberty Mutual Surety

175 Berkeley Street Boston, MA 02116

Puede comunicarse con el Departmento de Seguros de Texas para obtener información acerca de compañías, coberturas, derechos o quejas al:

(800) 252-3439

Puede escribir al Departamento de Seguros de Texas:

P.O. Box 149104 Austin, TX 78714-9104 Fax: (512) 475-1771

Web: http://www.tdi.state.tx.us

E-mail: ConsumerProtection@tdi.state.tx,us

DISPUTAS SOBRE PRIMAS O RECLAMOS:

Si tiene una disputa concerniente a su prima o a un reclamo, debe comunicarse con el (agente) (la compañía) (agente o la compañía) primero. Si no se resuelve la disputa, puede entonces comunicarse con el departamento (TDI).

UNA ESTE AVISO A SU POLIZA:

Este aviso