Name of owner: 4130 Fisher L	LC	Owner's tele	ephone number:	913.303.1817
Owner's address: 1709 Roc Ale.		Skanonee	MUSSION, ILS LOI	(Jac)
IF SIGNER IS DIFFERENT FROM				
Name of signer:	Juan Tol	XXV		
State Basis of Legal Authority to Sign:	Manager	LLC		
Signer's telephone number:	913.303	1817		
Signer's mailing address:	11709 Poe	Ave St. DI	66. Shawnee M	ission, KS-66211
If owner is an individual:	Singl	e Ma	arried	
	c		Lite Dawn	

If owner is not an individual, state what type of entity (Mark Applicable Box):

	Corporation		General Partnership
-	Limited Partnership	X	Limited Liability Company
	Partnership		Urban Redevelopment Corporation
	Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-14-03-00-0-00-000	429	954,560

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

re of person signing for owner

18 Date: DEC 2023

STATE OF FLOR SS

COUNTY OF Miami On this 18 day of December 023, before me personally appeared Olan G. to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

th day of December 2023

Printed Name of Notary: Luis Rivas

My Commission Expires



LUIS F. RIVAS Commission # HH 385562 Expires April 11, 2027

otary Public

500 E 18th LLC

Name of owner: 500 E 18th-LLC Owner's telephone number: <u>8/6-304-154</u>

Owner's address: 2727 Southwest Blvd Kansas City, MO 64108 2007 Brown 1911 IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Matt Abbott
State Basis of Legal Authority to Sign:	duner
Signer's telephone number:	P. O. B 0x 411857
Signer's mailing address:	Lansas City, MO. 64141

If owner is an individual: _____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
 Limited Partnership	x	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-06-06-00-0-00-000	520	196000
		,

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: March 19, 2024

Signature of person signing for owner

STATE OF <u>Kansas</u>) COUNTY OF <u>Johnson</u>) ss

On this 19 day of <u>Mouch</u> 2024, before me personally appeared <u>Matt allegation</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this ______ day of ______ day of ______, 2024.

10-22-2027 My Commission Expires:



Sharon Jende Landess Notary Public Printed Name of Notary: Sharow Hendee LANdess

Name of owner: 509east LLC Owner's telephone number: 913.961. 1013

Owner's address: 509 E 18th St Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	TYLER ENDERS
State Basis of Legal Authority to Sign:	LEAAL OWNER OF LLC
Signer's telephone number:	913-961-1013
Signer's mailing address:	2915 SouTHWEST BLUD
	KANSAS CITT, MO 64109
If owner is an individual:	Single X Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-11-04-00-0-00-000	600	60416
29-510-11-05-00-0-00-000	599	42912

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: <u>MAY</u> 30, 2024

STATE OF	XO,	
COUNTY OF	Sackson) s	SS

On this 5 day of 30 2024, before me personally appeared TYLER ENDERS, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my har	nd and official seal this5	day of 30, 20	¥.
My Commission Expires:	N	lotary Public	h Melhar
	ABEJAH MCKAY Notary Public - Notary Seal Jackson County - State of Missouri Commission Number 23284880 My Commission Expires Oct 11, 2027	tinted Name of Notary:	h richag

Name of owner: 7th & Central Investment Co Owner's telephone number: (816) 257-3440 Owner's address: 5151 E Geospace Dr Independence, MO 64056

IF SIGNER IS DIFFERENT FROM OWNER:

r. «

Lori Cohee
CFO
(816)257-3440
5151 East Geospace Drive
Independence MO 64056

_____ Single _____ Married If owner is an individual:

If owner is not an individual, state what type of entity (Mark Applicable Box):

1	✓ Corporation General Partnership	
	Limited Partnership	Limited Liability Company
	Partnership	Urban Redevelopment Corporation
	Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-10-13-00-0-00-000	59 [219 W. 18th St]	\$460,032

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Geur A. Chee Signature of person signing for owner

Date: 8/30, 2024

STATE OF <u>MO</u>) ss COUNTY OF <u>JackSon</u>) ss On this <u>36</u> day of <u>Auscust</u> 2024, before me personally appeared <u>Lori A (chee</u> , to me personally known to be the individual described in and who executed the foregoing instrument.
WITNESS my hand and official seal this Joth day of August, 2024.
My Commission Expires: 11/03/20 REBEKAH LYNN SHILEY Notary Public-Notary Seal Notary Public-Notary Seal STATE OF MISSOURI Jackson County My Commission # 17642673 Gertimission # 17642673

Owner's telephone number: 816-724-724S Name of owner: A & L I LLC Owner's address: 1803 Wyandotte St Unit 307 Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

IF SIGNER IS DIFFERENT FROM	OWNER:			
Name of signer:	Aaron	Berger	-	Sold and a straight and a straight and a straight a str
State Basis of Legal Authority to Sign:	Dun	ent	an a falan an a	#53054767
Signer's telephone number:	1803	Wyandolk	. Unit 307	PIRIO
Signer's mailing address:	Lans	as city p	1064108	E CS YRATON 32
	816	- 724-7	24 5	A PRICE
If owner is an individual:	- 5	Single	Married	

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership	nyan mina mangang mina pang mangang ang
Limited Partnership	X	Limited Liability Company	
 Partnership		Urban Redevelopment Corporation	
Not-for-Profit Corporation		Other	mynet fan te sjoer en tijde yn oerse de

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-30-04-01-0-00-000	161	324000

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date & - July , 2024

Signature of person signing for owner

STATE OF	MO)	
COUNTY OF	Jackson)	SS

On this <u>8</u> day of <u>July</u> 2024, before me personally appeared <u>Aaron Berger</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _____

_____day of July_, 2024.

My Commission Expires: 01/12/2027

Notary Public Printed Name of Notary: Abby Price

Name of owner: Abbott HQ LLC Owner's telephone number: 816.304.1541

Owner's address: PO Box 411857, Kansas City, MO 64141

2007 Broadway, Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	_Matt Abbott
State Basis of Legal Authority to Sign: _	Owner
Signer's telephone number:	816.304.1541
Signer's mailing address:	P.O.Box 411857, KCMO 64141

If owner is an individual: _____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

	Corporation		General Partnership	
	Limited Partnership	X	Limited Liability Company	
	Partnership		Urban Redevelopment Corporation	
4	Not-for-Profit Corporation		Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-240-35-03-00-0-00-000	470 [1718 Oak St]	\$140,800
29-510-08-07-00-0-00-000	471 [1722 Oak St]	\$131,616
29-510-03-21-00-0-00-000	672 [800 E. 18 th St]	\$512,000
29-520-28-16-01-0-00-000	122 [2007 Broadway Blvd]	\$129,840

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: Ulme, 18, 2025

STATE OF Yars

COUNTY OF

On this 184 ay of June 2025, before me personally appeared <u>Matt</u> allott to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _

SS

80 day of lon

My Commission Expires:



Notary Public Printed Name of Notary: Sharon Hendeet Andess

Name of owner: A C Properties Inc Owner's telephone number: 310.745.4050 Owner's address: 6717 Shawnee Mission Pkwy Mission, KS 66202

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Christophic Accordo
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	310-745.4050
Signer's mailing address:	6717 Shawnee Mission Parkway
	Mission, KS. 66202
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

X	Corporation	General Partnership
	Limited Partnership	Limited Liability Company
	Partnership	Urban Redevelopment Corporation
	Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-520-25-07-00-0-00-000</u>	156 [218 W. 19th Terr]	\$667,840

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 8/22,2024

Signature of person signing for owner

STATE OF <u>California</u>) ss COUNTY OF <u>Los Angeles</u>) ss

On this 22^{hd} day of <u>August</u> 2024, before me personally appeared <u>Christopher Louis Accardo</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand	d and official seal this	22nd	day ofday of, 2024.	
My Commission Expires: February 17, 2027	MELINDA E. COOK Notary Public - California Los Angeles County Commission # 2438551 My Comm. Expires Feb 17, 2027	Notary Pub Printed Nar	lCook_ Nic me of Notary: Melinda E.	Coot

CALIFORNIA ALL-PURPOSE CERTIFICATE OF 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 this document.

State of California	}	
County of LOS Angeles	}	
	before me, <u>Melinda E. Cook</u>	,
0	Lewis AL in 1 Apoulo	

Notary Public, personally appeared LOUIS Christopher Accardo 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 California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Notary Public Signature

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-15

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT	T_{i}
Execution lage for Petition for the Creation of the Crossroads	n
the Creation of the Crossroads	W
(Title or description of attached document)	
Community Improvement District	-
(Title or description of attached document continued)	
Number of Pages Document Date, Z	1211
Humber of Fuges Boountent Bate	7
CAPACITY CLAIMED BY THE SIGNER	
Individual(s)	
Corporate Officer	
(Title)	
Partner(s)	
Attorney-In-Fact	
Trustee(s)	
Other	

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.

Date of notarization must be the date that the signer(s) personally appeared which must also be the same date as the acknowledgment is completed.

The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization.

Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they is/are) or circling correct forms. Failure to correctly indicate this information may lead to rejection of document recording.

The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.

Signature of the notary public must match the signature on file with the office of the county clerk.

Additional information is not required but could help to ensure this acknowledgment I not misused or attached to a different document.

Indicate title or type of attached document, number of pages and date.

Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document with a staple.

Name of owner: Abbott Properties LLC	Owner's telephone number:	816-304-1541
% Matthew Abbott		
Owner's address: PO Box 411857, Kansas C	<u>Sity, MO 64141</u>	

2007 Broadway, Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Matt Abbott
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	816.304.1541
Signer's mailing address:	P.O. Box 411857
	Kansas (14, MO. 6414)

If owner is an individual:

_____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
 Limited Partnership	X	Limited Liability Company
 Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-24-06-00-0-00-000	582 [1926 Oak]	\$118,816

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF <u>Xansas</u>) ss COUNTY OF <u>Johnson</u>) ss

Date: 1/13/25

On this 13 day of 2025 before me personally appeared <u>Matthue alfalt</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	3 th day of genery, 2025
My Commission Expires	Notary Public Printed Name of Notary: Sharon Hendee hAndess

Name of owner: Abundant Life Baptist Church Owner's telephone number: 816-554-8181 Owner's address: 414 SW Persels Rd, Lee's Summit, MO 64063

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Cory D. Weeda
State Basis of Legal Authority to	Sign: Chief Operating Officer
Signer's telephone number:	816-607-5867
Signer's mailing address:	414 SW Persels Rd
0	Lee's Summit, MO 64081
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

	Corporation	General Partnership	
	Limited Partnership	Limited Liability Company	
	Partnership	Urban Redevelopment Corporation	
X	Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-510-11-17-00-0-00-000</u>	609	\$407,008

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF <u>MISSOURE</u>)) ss COUNTY OF <u>CASS</u>)

	Date:	July	9	, 2024
Notary Pu State Ca Commiss	A HANCOCK blic, Notary Se of Missouri ss County ion # 21770048 n Expires 07-28			

On this 9 day of JUCY 2024, before me personally appeared CORY UEGDA to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

My Commission Expires: July 28, 2025

day of JULY

Notary Public Printed Name of Notary: MICAECA HANCOCK

Name of owner: JAMES L,	ADAMS Owner's telephone number: 713 805 7638
Owner's address: 1014 E	E. 19th, KC, MO 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	James Adams
State Basis of Legal Authority to Sign:	owner
Signer's telephone number:	713.805.7639
Signer's mailing address:	1014 E. 19th, KCMO 64108
If owner is an individual:	Single Married
If owner is not an individual, state what	type of entity (Mark Applicable Box):
Corporation	General Partnership

Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-16-12-00-0-00-000	736	\$40,800.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: <u>AUG [8</u>, 2023

Signature of person signing for owner

STATE OF ______) ss COUNTY OF ______) ss

On this <u>18</u> day of <u>August</u> 2023, before me personally appeared <u>Adams L James</u> to me personally known to be the individual described in and who executed the foregoing instrument.

18 day of <u>August</u>, 2023. WITNESS my hand and official seal this Notary Public Printed Name of Notary: Abby Price ATEO ission Expires: 01/12/2027 ANNUM HURITANIA

Name of owner: Af Real Estate Holdings LLC Owner's telephone number: 310.745.4050 Owner's address:6717 Shawnee Mission Pkwy Overland Park, KS 66202

Δ

	IF	SIGN	ER IS	DIF	FEREN	T FR	OM	OWN	IER:
--	----	------	-------	-----	-------	------	----	-----	------

Name of signer:	Christophir Accourdio
State Basis of Legal Authority to Sign:	Ouver
Signer's telephone number:	310.745.4050
Signer's mailing address:	6717 Shawnee Mission Parlavay
	Overland Park, KS. 66202
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	x	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-520-25-06-00-0-00-000</u>	155 [1911 Central St.]	\$114,016

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 8/22, 2024

Signature of person signing for owner

STATE OF Calif	iornia)
COUNTY OF LO	s Angeles) ss

On this <u>22nd</u> day of <u>August</u> 2024, before me personally appeared <u>Christopher Louis Accardo</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand	d and official seal this	22nd	day of <u>August</u> , 2024.	
My Commission Expires: February 17, 2027	MELINDA E. COOK Notary Public - California Los Angeles County Commission # 2438551 My Comm. Expires Feb 17, 2027	Notary Pub Printed Nar	<u>MCook</u> Dic me of Notary: <u>Melinda</u> E	<u>. C</u> ook

CALIFORNIA ALL-PURPOSE CERTIFICATE OF 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 this document.

State of California	}	
County of LOS Angeles	}	
On August 22, 2024 before me,	Melinda E. Cook	
Notary Public, personally appeared	s Christopher Accardo	

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 California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Notary Public Signature

Charles of a

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT Execution Page for Petition for <u>HAE Creation of the Crossroads</u> (Title or description of attached document) Community Improvement District	T n o w
(Title or description of attached document continued)	
Number of Pages Document Date August 22, 20	24
CAPACITY CLAIMED BY THE SIGNER	
Individual(s) Corporate Officer (Title) Partner(s) Attorney-In-Fact Trustee(s) Other	

(Notary Public Seal)

INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.

Date of notarization must be the date that the signer(s) personally appeared which must also be the same date as the acknowledgment is completed.

MELINDA E. COOK

Notary Public - California Los Angeles County Commission # 2438551 V Comm. Expires Feb 17, 2027

The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization.

Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they is/are) or circling correct forms. Failure to correctly indicate this information may lead to rejection of document recording.

The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.

Signature of the notary public must match the signature on file with the office of the county clerk.

Additional information is not required but could help to ensure this acknowledgment I not misused or attached to a different document.

Indicate title or type of attached document, number of pages and date.

Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document with a staple.

Owner's telephone number: 816-456-9024 Name of owner: Aki 1704 Grand LLC Owner's address: 1509 W 12th St Kansas City, MO 64101

IF SIGNER IS DIFFEREN	FROM OWNER:	
	AC	Kiayani
Name of cigner:	ASA	Finyani

Name of signer:

State Basis of Legal Authority to Sign: Manager of AKI-1704 Grand, LLC 816-456-9024 Signer's telephone number: 1509 W. 12th Street, Kansas City, Missouri 64101 Signer's mailing address:

If owner is an individual:

_____ Single_____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	x	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-42-12-00-0-00-000	320	134208

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: August 9 , 2024

Signature of person signing for owner Asif Kiayani, Manager of AKI-1704 Grand, LLC

STATE OF MISSOURI) ss) COUNTY OF JACKSON

On this 9 day of August 2024, before me personally appeared Asif Kiayani , to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this <u>9th</u> day of August , 20	024.
--	------

Jackson County - State of Missouri Commission Number 21572458 My Commission Expires Jun 8, 2025

My Commission Expires: June 81 2025

unde s. Katchen Notary Public - Notary SeaPrinted Name of Notary: REND A 5- KITCHEW kson County - State of Missouri

Name of owner: Arthel Buildin	guc	Owner's telephone number: <u>816 - 510 · 4396</u>	
Owner's address: 7441 A Bro	adwa	y, KC MO 64114	
IF SIGNER IS DIFFERENT FROM OWNER:			
Name of signer:	Diane	Botwin Alpert	
State Basis of Legal Authority to Sign:	Mana	Botwin Alpert-	
Signer's telephone number:		10.4896	
Signer's mailing address:	Same		
If owner is an individual:		Single Married	
If owner is not an individual, state what type of entity (Mark Applicable Box):			
Corporation		General Partnership	
Limited Partnership	×	Limited Liability Company	
Partnership		Urban Redevelopment Corporation	
Not-for-Profit Corporation		Other	
Tax Parcel Number(s):	Parcel N	umber(s) from Exhibit B: Assessed Value(s):	

74.295202014-0000000 29-520-20-14-00-0-00.000	401	\$1445000

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 27 July, 2023

STATE OF Missouri) ss)

On this 27 day of \int_{U} 2023, before me personally appeared D_{anc} By H_{anc} A_{ber} , to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	27	day of Jul	<u>/</u> , 2023.
	K	211970'	1

My Commission Expires: May 27 Notary Public Printed Name of Notary: Denald Taffe Jr



Name of owner: <u>Avelina Logan LLC</u>	Owner's telephone number: 816-918-7170
Owner's address: 609 E 17th Street,	Kansas City, MO 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Kevin Martinez
State Basis of Legal Authority to Sign:	Member/Owner
Signer's telephone number:	816-918-7170
Signer's mailing address:	PO Box 410094, Kansas City, MO 64141
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	xx	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29240381100000000	631	42,400
2924038020000000	632	182,016.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

09/28/2023 Date: ,2023

Signature of person signing for owner

STATE OF <u>Missouri</u>)) ss COUNTY OF <u>Jackson</u>)

On this $\underline{28}$ day of $\underline{564}$ 2023, before me personally appeared <u>Kevin Martinez</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _	Zatu	day of <u>SEP+</u> , 2023.
	(de c	E Bur

My Commission Expires:



Notary Public Printed Name of Notary: An E. Basim

Name of owner: Baltimore Avenue Investors LLC Owner's telephone number: 86-985-1421Owner's address: 2000 Baltimore Ave Ste 600 Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Charlie Barnard
State Basis of Legal Authority to Sign:	MO-Owner
Signer's telephone number:	816-985-1421
Signer's mailing address:	2008 Baltimore the
	KCMO
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

	Corporation		General Partnership
	Limited Partnership	X	Limited Liability Company
	Partnership	1	Urban Redevelopment Corporation
z	Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-32-01-00-0-00-000	354	664032

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

(Barles Barna Signature of person signing for owner

Date: Dec. 7th , 2023

, 2023.

STATE OF) ss COUNTY OF Jackson

On December this day of 2023, before personally appeared me Charlie Barnard to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _ Seventh day of Dec Expires: 01 / 12/2027 Notary Public 6 Printed Name of Notary: Abby Price

Name of owner: Baritone Properties LLC Owner's telephone number: 913-669-6331 Owner's address: % Bernstein-Rein Advertising Inc 4600 Madison Kansas City, MO 64112

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Charles Luetje
State Basis of Legal Authority to Sign:	Property Manager
Signer's telephone number:	913-669-6331
Signer's mailing address:	% Bernstein-Rein Advertising Inc 4600 Madison KCMO 64112
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-25-02-00-0-000	168	39616
29-520-25-03-00-0-000	167	225216

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: JUNE 20 , 2025

STATE OF MISSONRI)) ss

COUNTY OF JACKSON)

On this 20^{+} day of \underline{JUNE} 2025, before me personally appeared $\underline{CHARUES}$ <u>LUETJE</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _	20th day of JUNE, 2025.
ARA GRA	Alton
My Commission Expires:	Notary Public
NOTARY SEAL	Printed Name of Notary: LARA GRAY
EAST County County	0
11 (Sein + 238? - NI	

Name of owner: BDB Propertie	<u>Owner's telephone number</u> : <u>913 - 383 - 2170</u>
Owner's address: PO Box 8190	Prairie Village, KS 66208
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Brin Ousley
State Basis of Legal Authority to Sign:	takiness turnet
Signer's telephone number:	(913)530-2897
Signer's mailing address:	briand beenned.com/1809 McGee St. Kansas Gity, Mi 64109
If owner is an individual:	Single Married
If owner is not an individual state what	type of entity (Mark Applicable Box):

If owner is not an individual, state what type of entity (Mark Applicable Box):

(Corporation		General Partnership
I	Limited Partnership		Limited Liability Company
I	Partnership	4	Urban Redevelopment Corporation
1	Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-16-02-00-00-00-000	557	\$12,600.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

) SS

)

STATE OF MISSUMEL

Date: January 24 _, 202**4**

COUNTY OF JACKSON

On this 24 day of Annual 2024, before me personally appeared Brran T. Ousley to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this day of Annaly, 2025. My Commission Expires Notary Publid Printed Name of Notary: LARA GRA NOTARY SEA lackson

Name of owner: Belger Realty Co Inc Owner's telephone number: 816-474-736

Owner's address: 2100 Walnut St Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

State Basis of Legal Authority to Sign:	Richard Belger	
Signer's telephone number:	Owner	
Signer's mailing address:	816.474-7316	
	2100 Walnut St Kouses	Lity, MO. 64108
	9	,

If owner is an individual:

_____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

×	Corporation	General Partnership	
	Limited Partnership	Limited Liability Company	
	Partnership	Urban Redevelopment Corporation	
	Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-38-02-00-0-00-000	436 [2101 Walnut]	55584
29-520-34-10-00-0-00-000	416 [2100 Walnut]	611616

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF KANSAS) COUNTY OF Johnson) ss

Date: 26 July , 2024

On this $\frac{\mathcal{H}}{\mathcal{H}}$ day of $\frac{\mathcal{T}_{uly}}{\mathcal{T}_{uly}}$ 2024, before me personally appeared $\frac{\mathcal{C}}{\mathcal{R}_{i}}$ and $\frac{\mathcal{R}_{uly}}{\mathcal{R}_{uly}}$, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 2672 day of 522, 2024.

My Commission Expires: April 19, 7026

NOTARY PUBLIC - State of Kansas JAMES E TAYLOR My Appt. Expires 0 4/

Notary Public Printed Name of Notary: JAMES E TAylor

Name of owner: <u>Big Brothurs Big Sisters of Kansas City</u> Owner's telephone number: <u>816 561 5269</u> Owner's address: <u>1709 Walnut St. Kansas City</u>, <u>Mo 64108</u>

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Erica Ostroski
State Basis of Legal Authority to Sign:	MO - MANAGER
Signer's telephone number:	8/67772880
Signer's mailing address:	1709 Walnut St. KC, MD
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

	Corporation General Partnership	
	Limited Partnership	Limited Liability Company
	Partnership	-Urban Redevelopment Corporation
×	Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-42-11-00-0-00-000	315	594,016
29-230-42-02-00-0-00-000	313	680,800

29-230-42-03-06-0-00-000 By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 8/23 ,2023

Signature of person signing for owner

STATE OF M0) ss COUNTY OF Jackson

On this 23 day of <u>August</u> 2023, before me personally appeared <u>Erica</u> <u>Ostrosk-i</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _____ 23 day of <u>Auaust</u>, 20

Expires: 01/12/2027 ommission the state of the s

2.3 day of August, 2023. Multiple Notary Public Printed Name of Notary: Abby Price

Name of owner: BIC Building Vertwee, LLC Owner's telephone number: (816) 727-86	35
Name of owner: OIC Dullang Vertwee, LLC Owner's telephone number:	
Owner's address: 504 Sunget Drive	
Kansas Gtz, MO 64/12	

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Matthew Burchan
State Basis of Legal Authority to Sign:	Marager
Signer's telephone number:	(846) 722-8635
Signer's mailing address:	POBox 413823
	Mansas lit, MO 64141
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	\times	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-570-12-01-00-0-00-0	00 367	\$ 340,000

SIGNATURE ON NEXT PAGE

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 8-16-2023, 2023 Signature of person signing for owner STATE OF Kansas) ss) COUNTY OF Johnson With day of August this 2023, On before me personally appeared Matthew Burchan , to me personally known to be the individual described in and who executed the foregoing instrument. WITNESS my hand and official seal this 1144 day offAusust, 2023. Notary Public Printed Name of Notary: Debova & Kurg Hoskins My Commission Expires: Lett 25 **DEBORAH KAY HOSKINS** NOTARY PUBLIC STATE OF KANSAS My Appt. Exp. Lel12/25

Name of owner: Black Star Society,	LLC	Owner's telephone number:	913-710-7214
Owner's address: 821 W 17th St. Ko	CMO 64108		ABBY PO
IF SIGNER IS DIFFERENT FROM			Omm. Exp. Official
Name of signer:	Cindy August	ine	PUBLIC
State Basis of Legal Authority to Sign:	Co-Owner		SEAL
Signer's telephone number:	913-710-7214		TX 0024767
Signer's mailing address:	821 W 17th S	t. KCMO 64108	MISSOURIANNER
If owner is an individual:	Single	Married	······································
If owner is not an individual, state what t	type of entity (N	fark Applicable Box):	

General Partnership Corporation Limited Partnership Limited Liability Company х Partnership Urban Redevelopment Corporation Not-for-Profit Corporation Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-22-01-00-0-00-000	335	2007600

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF $M \partial$

Date: February 13, 2028

) ss

COUNTY OF Jackson) 4 On this 13 day of Feb 2023, before me personally appeared Cindy Augustice, to me personally known to be the individual described in and who executed the foregoing instrument. day of Feb, 2023.4 12th WITNESS my hand and official seal this

My Commission Expires: 01/12/2027

Notary Public Printed Name of Notary: Aby Ince

Owner's telephone number: 1816 - 469 - 5287 Name of owner: Blue Duck Holdings LLC

Owner's address: 808 E 31st Ter Kansas City, MO 64109

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Y Eric Mart	
State Basis of Legal Authority to Sign	X Owner
Signer's telephone number:	× 913-209-4030
Signer's mailing address:	∑ 512 E 18th Street
	Kansas City, Mo 64108

If owner is an individual:

_____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership	
Limited Partnership	X	Limited Liability Company	
Partnership		Urban Redevelopment Corporation	
Not-for-Profit Corporation		Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-510-06-07-00-0-00-000</u>	533	216960

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: <u>April 30</u>, 2024

STATE OF <u>MISSOWR</u>)) ss COUNTY OF <u>JACKSON</u>) On this <u>30</u>th day of <u>APRIL</u> 2024, before me personally appeared <u>ERIC MARTENS</u>, to me personally known to be the individual described in and who executed the foregoing instrument. WITNESS my hand and my ferry seen this _ 30th day of APRIL, 2024. My Commission Expire mission NOTARY SEAL Notary Public Printed Name of Notary: LARA GRAY Jackson

Owner's telephone number: 316 2217010 Name of owner: Bonfire LLC Owner's address: 1903 Wyandotte Ste 200 Kansas City, MO 64108

Fachary Rickel

IF SIGNER IS DIFFERENT FROM OWNER:

T T	0		
Name	ot	dianor.	
INALLIC	U1	signer:	

State Basis of Legal Authority to Sign:

Signer's telephone number:

Signer's mailing address:

2 Wher
314 2217010
1903 mandote Ste 200
KCM0 64108
Single Married



If owner is an individual:

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	x	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-22-04-00-0-00-000	333	420162

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

gnature of person signing for owner

Date: March 28, 2024

STATE OF <u>MO</u>) COUNTY OF <u>Jackson</u>) ss

On this <u>28</u> day of <u>March</u> 2024, before me personally appeared <u>Eachary</u> <u>Bickel</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

28th _____day of March, 2024. WITNESS my hand and official seal this

Notary Public Printed Name of Notary: Abby Price

My Commission Expires: 01/12/2027

		Q11 200	11.11
Name of owner: BP Properties KCMO LLC	Owner's telephone number:	15 66	3604
Owner's address: 9900 Little Salt Rd Waverly.	NE 68462	2.2.3	

vad

Konsas

_____ Single

712-981-3142

Cit

Wyendote

y Mo 64113

K Married

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

State Basis of Legal Authority to Sign:	Co-Ownes
Signer's telephone number:	913-981-

Signer's mailing address:

If owner is an individual:

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-230-29-17-00-0-01-001</u>	297	192032
<u>29-230-29-17-00-0-02-001</u>	297	192032
<u>29-230-29-17-00-0-00-000</u>	297	3
<u>29-230-29-17-00-0-03-001</u>	297	222813

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

ARA GHA
Signature of person signing for owner Date: April 30, 2024
NOTARY SEAL
STATE OF MISSOWRY) COUNTY OF JACKSON) SS Jackson County of JACKSON)
1 Kinama and a kinam
On this <u>30</u> ^t day of <u>APPIL</u> 2024, before me personally appeared <u>BLADLEY LEWLS</u> , to me personally known to be the individual described in and who executed the foregoing instrument.
WITNESS my hand and official seal this 30 th day of $APRIL$, 2024.
199 July

Name of owner: Broadway Bank Building LLC Owner's telephone number: 7-20-220-482 | Owner's address: 2660 Walnut St Denver, CO 80205

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Ken Wolf
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	720-220-4821
Signer's mailing address:	2660 Walnut St. Denver, CO. 80205
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	Х	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-41-11-00-0-00-000	140	84800

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 10.27. ,2023 Signature of person signing for owner STATE OF ______O COUNTY OF Jackson) ss October this day of 2023, before personally On me appeared to me personally known to be the individual described in and who NOLF Kun executed the foregoing instrument. 27th RICE WITNESS my hand and official seal this _____ day of Octobel, 2023. "HILL CONTRACTOR CONTRACTOR OF mission Expires: 01/12/2027 Notary Public Printed Name of Notary: Abby Price

Name of owner: <u>Broadway Square Partners</u>, LLPOwner's telephone number: <u>(816) 499-8334</u> Owner's address: <u>2114 Central Kansas City</u>, <u>MO 64108</u>

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	<u>Michelle O'Brien, P</u> roperty Manager
State Basis of Legal Authority to Sign:	
Signer's telephone number:	(816) 499-8334
Signer's mailing address:	114 W. 11th Street, Ste. 200 KC, MO. 64105
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	Х	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-43-07-00-0-00-000	217	824000
29-520-33-25-00-0-00-000	(West of Broadway)	-247200

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Mahllel Bheeve

Date: Dec. 18 , 2023

Signature of person signing for owner

STATE OF Missour)) SS COUNTY OF Jackson

On this 18 day of Accember 2023, before me personally appeared Michelle O'Brien to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

18 day of December 2023.

Notary Public Printed Name of Notary: Taylor Hines

My Commission Expires:



Name of owner: Bshu Property Group LLC Owner's telephone number: (13) 520-4784

Owner's address: 810 Cherry St Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: GREG MOORE

State Basis of Legal Authority to Sign:	CINEF OPERATING OFFICER
Signer's telephone number:	(816) 520-4784
Signer's mailing address:	ZOI WEST 115TH STUDET
	KANUSAS CITY NO 64108
If owner is an individual:	Single X Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-11-10-00-0-00-000	604	95616
<u>29-510-11-15-00-0-00-000</u>	607	212832

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: <u>May 21</u>, 2024

STATE OF MISSOURI COUNTY OF <u>JACKSON</u>) ss

On this 21^{st} day of <u>MAY</u> 2024, before me personally appeared <u>GREG MODRE</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	21 ST day of MAY, 2024.
My Commission Expires	Notary Public
NotARY SEAL	Printed Name of Notary: LARA GRAY

Name of owner: Building 100	5 LLC	Owner's telephone	number: <u>816 - 830 - 255</u> 2
Name of owner: <u>Building 100</u> Owner's address: <u>115 W. 18th St</u>	r. KCMO	64108	
IF SIGNER IS DIFFERENT FROM	OWNER:		
Name of signer:	Jeff T. O	wens	
State Basis of Legal Authority to Sign:	Missouri	- Owner	
Signer's telephone number:	816-830-	-3552	
Signer's mailing address:	115 W.18	mst. Kcmo	64(08
If owner is an individual:	Single	Married	
If owner is not an individual, state what	type of entity (M	lark Applicable Box):

Corporation		General Partnership	
Limited Partnership	X	Limited Liability Company	
Partnership		Urban Redevelopment Corporation	
Not-for-Profit Corporation		Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-22-09-00-0-00-000	339	\$ 111, 200

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Tergs

Date: <u>August 9</u>, 2023

_,

Signature of person signing for owner

STATE OF <u>M</u>O)) ss COUNTY OF <u>Jackson</u>)

My

On this $\underline{9}$ day of August 2023, before me personally appeared $\underline{\text{Jeff } T}$. Owens to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my han	d and official seal this	9th	day of Augus	<u>t</u> , 2023.
Commission Expires:	01/12/2027	Notary Py Printed N	Mar	PPRICK 01/125 01 000000000000000000000000000000000

Name of owner: Building 110	\underline{UC} Owner's telephone number: $\underline{816}$ - $\underline{830}$ - $\underline{255}$
Owner's address: 115 W 18th C	t. K.C.MO. 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Jeff T. Owens
State Basis of Legal Authority to Sign:	Missouri - Owner
Signer's telephone number:	816-830-2552
Signer's mailing address:	115W18th St. KC. MO. 64108
If owner is an individual:	Single Married
TC ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-22-08-00-0-00-000	338	\$402,816

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Lye 82

My

Date: <u>August 9</u>, 2023

Signature of person signing for owner

STATE OF <u>MD</u>) ss COUNTY OF <u>Jackson</u>)

On this \underline{q} day of \underline{August} 2023, before me personally appeared \underline{Jeff} T. Owens to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	9th day of August, 2023.
Commission Expires: Ol/12/2027	Notary Public Printed Name of Notary: Abby Reverse and the second

Name of owner: <u>Camelotte</u> Ca	Owner's telephone number: <u>816 - 283 - 980</u> 7
Owner's address: <u>SIQ E 19TH</u> ST	KABSAS CIM MO 64105
IF SIGNER IS DIFFERENT FROM	I OWNER:
Name of signer:	Keith Hyder
State Basis of Legal Authority to Sign:	COMPANY OFFICER
Signer's telephone number:	516 253 9707
Signer's mailing address:	STA E 1978 ST, KANNO CIM MO 64105
If owner is an individual:	Single Married
If owner is not an individual state who	t type of entity (Mark Applicable Pox):

If owner is not an individual, state what type of entity (Mark Applicable Box):

	Corporation	General Partnership
	Limited Partnership	Limited Liability Company
X	Partnership	Urban Redevelopment Corporation
	Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-14-22-02-0-00-000 29-510-14-14-00-0-00-000	707713	\$7616.00 \$12384.00
29-510-14-15-00-00-000	714	\$ 24384.00
29-510-19-03-00-0-00-000	721	\$1744000.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 1/15 , 202

hny

Signature of person signing for owner

STATE OF <u>MO</u>)) ss COUNTY OF <u>Jackson</u>)

On this 19 day of <u>January</u> 202⁴, before me personally appeared <u>keth Hyder</u> to me personally known to be the individual described in and who executed the foregoing instrument.

day of January, 2024. WITNESS my hand and official seal this 18^{+1} alum Notary Public 01/12/2027 pires: Printed Name of Notary: Abby Pace Summer and Sum