		0 1	cle		<b>h</b>	
Name of owner:	Myers 1	nonorties	ILC Owner's t	elephone numbe	or: 816.221.	7434
Owner's address:	1715	Baltin	Lose Ave	KENIO	64108	

IF SIGNER IS DIFFERENT FROM OWNER: Rolph E. Myer, JR.

Name of signer:

State Basis of Legal Authority to Sign: <u>Member of LLC currenship</u> Signer's telephone number: <u>816.221.7434</u> Signer's mailing address: <u>1715 Baltinuese</u> Ave. 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
L	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):
29-230-40-04 -00-0-00-000	256	1,000,000
29-230-40-10-00 -0-00-000	255	54,816

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.

Date: 10/21/2023, 2023

Signature of person signing for owner

STATE OF KS

) ss COUNTY OF JOHNSON On this 27 day of a lot 2023, before me personally appeared Ralph Myers to me personally known to be the individual described in and who executed the foregoing instrument.

27

WITNESS my hand and official seal this

My Commission Expires: 2/22/25



Notary Public Printed Name of Notary: CRAIG L WESTHOFF

day of October, 2023.

Name of owner: New Frontier Properties LLC	Owner's telephone number:	816-853-7726
Owner's address: 6021 N Norton Ave, Claycomo.		

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Austin Miller
State Basis of Legal Authority to Sign:	Member
Signer's telephone number:	816-853-7786
Signer's mailing address:	anstin@the MaxenickKe.com
	1911 Broadway DIvel KCMO 64108
If owner is an individual:	$\underline{X}$ 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):
29-520-26-05-00-0-00-000	118 [1911 Broadway]	\$296,448

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 M. SSIW; COUNTY OF Thelson ) ss )

On.

this

day

September 2024, before me personally appeared to me personally known to be the individual described in and who

2024

executed the foregoing instrument.

WITNESS my hand and official seal this

of

My Commission Expires: 11/16/1015

93

Date: 00

Notary Public Printed Name of Notary: Cody Buttan

)			
)		CODY BUTLAND	К
X		Notary Public - Notary Seal	Ķ
X		STATE OF MISSOURI	K
X		Jackson County	Ķ
SI.	Miv	Commission Evolution March	K.

Name of owner: New Life Ministries of Konsas Owner's telephone number: 816-421-7729				
Owner's address: 1717 MC Gee St.	KENIN EXY MO 6410P			
IF SIGNER IS DIFFERENT FROM				
Name of signer:	Je PPrey L. Shrout			
State Basis of Legal Authority to Sign:	Pastar			
Signer's telephone number:	757-375-7796			
Signer's mailing address:	629 E. Armour Blud, #3E, KE, MO			
If owner is an individual:	Single Married			
If owner is not an individual, state what type of entity (Mark Applicable Box):				
Corporation	General Partnership			

	Corporation	Ocherar i arutership
	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):
29-230-44-03-00-0-00-000	462	\$ 161,600.00

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.

Q

Date: Jantary 24, 2024

Signature of person signing for owner

)

STATE OF Missouri ) ss COUNTY OF JAckson

On this <u>24</u> day of <u>Shrow</u> 2029, before me personally appeared <u>Shrow</u> Shrowt to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this twenty furth 202. day of January, My Commission Expires: Notary Public Printed Name of Notary: LARA GRAN mission 19-200 NOTARY SEAL Jackson County

Name of owner: Nicholson Br	adley Owner's telephone number: 816-531-6885
Owner's address: PO BOX 1048	35 KCM0 64171
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Bradley Nicholson
State Basis of Legal Authority to Sign:	owned
Signer's telephone number:	816.531 6885
Signer's mailing address:	P.O. Box 10485. Kansas City. Mo. 64171
If owner is an individual:	SingleX 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):
29-230-35-16-00-0-00-000	271	\$ 70,240.00
29-230-35-04-00-0-00-000	272	\$ 287,285.00

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

Date: \_\_\_\_ 18 . 2025

Signature of person signing for owner

MO STATE OF ) ss COUNTY OF Jackson )

On this 18 day of 3auary 2025, before me personally appeared 3radley Nicholson 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 January, 2024.

My Compassion Expires: 01/12/2027 NOTARY NOTARY SEAL #23024767 % Sockson Course

Notary Public Printed Name of Notary: <u>Abby Price</u>

Name of owner: Nicholson Bradley W & Owner's address: PO Box 1048.5 Lin	Owner's telephone number: <u>816 531-6885</u>
KCM0 6417	(

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

State Basis of Legal Authority to Sign:

Signer's telephone number:

Signer's mailing address:

<u>Monager member</u> <u>816-289-3606</u> <u>PO Boy 10485</u> Kansas Uty, MO 64171 <u>Single X Married</u>

If owner is an individual:

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):
29-230-35-17-00-0-00-000	277	\$ 242,432.00
29-230-36-11-00-0-00-000	247	\$\$ 45,216.00
29-230-36-10-00-0-00-000	249	\$ 45 216.00
29-230-36-09-00-0-00-000	250	\$45120.00
29-230-36-08-00-0-00-00	0 252	\$ 45,216.00
29-230-40-11-00-0-00-000	259	\$167,360.00
29-230-35-05-00-0-000	273	\$ 43904.00
29-230-35-07-00-000	275	\$43776.00
29-230-35-08-00-0-00-000	276	\$ 1029600.00
29-230-35-17-00-0-00-000		\$ 242432.00

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.

Signature of person signing for owner Date: 1-18, 2023
STATE OF
On this $13^{\text{th}}$ day of $\overline{200000}$ 2023, before me personally appeared by $\overline{100000}$ , to me personally known to be the individual described in and who executed the foregoing instrument.
WITNESS my hand and official seal this 18th day of January 2021

My Commission Expires: 01/12/2027

Notary Public Printed Name of Notary: Abby price



Name of owner:North of the Border LL	.COwner's telephone number:	720-220-484
Owner's address:2660 Walnut St Dem	ver, CO 80205	
IF SIGNER IS DIFFERENT FROM O	WNER:	
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	X	Limited Liability Company	an kan dera sedan sama sedan sama dara kan di Urba
-	Partnership		Urban Redevelopment Corporation	
	Not-for-Profit Corporation		Other	nan fagta fokkense skraft som det som d

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-41-10-00-0-00-000	141	49600

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 <u>MO</u> COUNTY OF <u>JackSon</u> ) ) ss 2023, personally On this 27 day of October before me appeared to me personally known to be the individual described in and who ken Wolf executed the foregoing instrument. 27th day of October, 2023. WITNESS my hand and official seal this \_\_\_\_\_ Notary Public Printed Name of Notary: Abby Price sion Expires: 0(/12/2027 SHOLIN MANAGANATA

Name of owner: Novorr Shirley A Trustee Owner's telephone number:  $\frac{916-221-0000}{2000}$ Owner's address: 4100 W 85 Apt 2203 Leawood, KS 66206

IF SIGNER IS DIFFERENT FROM OWNER: Name of signer:

State Basis of Legal Authority to Sign: OWNER Signer's telephone number: <u>611-221-0000</u> Signer's mailing address: <u>1630 Mar A</u> SE

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 Trust

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-10-00-0-00-000	370 [1830 Main]	\$126,080
29-520-12-09-00-0-00-000	371 [1834 Main]	\$ 32,640

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: 10 23 , 2025 Signature of person signing for owner over STATE OF \_\_\_\_\_) ) ss COUNTY OF ) On this 23-day of 0 Clober 2024; before me personally appeared Keith Novor, 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 October, 2024. 232

My Commission Expires:

Notary Public: Printed Name of Notary: David Johnson

DAVID JOHNSON Notary Public - Notary Scal STATE OF MISSOURI **Jackson County** My Commission Expires: June 11, 2027 Commission #12354166

Name of owner: Old Town KASTUPOS Owner's telephone number: 816 502-4725 no Owner's address: 1732 D IF SIGNER IS DIFFERENT FROM OWNER: Name of signer: State Basis of Legal Authority to Sign: Signer's telephone number: VIEW, STE 300, KC MD 64111 Signer's mailing address: Single Married If owner is an individual:

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

	Corporation	•	General Partnership
$\times$	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):
29-510-08-08-00-0-	468	845,000
00-060		

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 24, 2023

Signature of person signing for owner

STATE OF M. 5 SOURI) ACKCON COUNTY OF 2023, before me appeared DAR Schulte, to On this 24 day of July me personally known, who, being by me duly sworn did say that he she/they is the MANAGER OFG of OW RALTMERS TILL and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity. 2023 WITNESS my hand and official seal this RACHELLE M. BIONDO My Commission Expires Expires: July 31, 2024 Notary Public My Co: Jackson County m BIONDO Commission #12499262

Name of owner: OIZ Town PARTuers XIV Owner's telephone number: 816 50 2-4725 KC MO Owner's address: 1700 DAKST IF SIGNER IS DIFFERENT FROM OWNER: DALE Schulte Name of signer: State Basis of Legal Authority to Sign: MgR oF G. P.Signer's telephone number: 816 502 47254510 Belleview, Ste 300 KC MD 64111 Signer's mailing address: Single \_\_\_\_\_ Married If owner is an individual:

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

	Corporation	General Partnership	
X	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):
29-240-35-01-00-0-	4-73	2,152,700
10-010		

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 MISSCURI

Date: July 24, 2023

COUNTY OF  $\overline{\int 4c/K50n}$ ) ss On this  $\overline{24}$  day of  $\overline{\int uly}$  2023, before me appeared  $\overline{\int 4le Schulte}$ , to me personally known who, being by me duly sworn did say that he she/they is the  $\underline{MANAgrA of Crit.of Old Volument Act me KSVIV L. P.$  and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this \_\_\_\_\_\_

My Counties of Ex	RACHELLE M. BIONDO
NOTARY *=	July 31, 2024
SEAL SEAL	Jackson County
OF MISS	Commission #12499262

Rinted NAME OF Notrag

Name of owner: OID TOWN PARTMERS AV Owner's telephone number: 816 502 4725 Owner's address: 2006 WyANdotte ST KC, MO IF SIGNER IS DIFFERENT FROM OWNER: 1)AIP Name of signer: Mar of G.F State Basis of Legal Authority to Sign: Signer's telephone number: Belleview, STE 300, KC MO 64111 Signer's mailing address: If owner is an individual: Married Single

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):
29-520-30-10-00-0	- 164	1,339,000
00-000		

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.

all 1

Expirestly 31, 2024

Signature of person signing for owner

STATE OF MASSOUR,

COUNTY OF

Date: July 24, 2023

2023, before me appeared DALE Schulte to On this 24 day of July me personally known, who, being by me duly sworn did say that he/she/they is the MANAGER of Cloud Town TAPTNERS XV L.T. and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

day of WITNESS my hand and official seal this \_\_\_\_\_ RACHELLE M. BIONDO My Commission Expires Jackson County Commission #12499262

Name of owner: Outreach International Owner's telephone number: <u>816-833-0883</u> Owner's address: 112 W. 18<sup>th</sup> St Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Charlotte	Employee, Local Representative
State Basis of Legal Authority to Sign:	Employee, Local Representative
Signer's telephone number:	970-227-3879
Signer's mailing address:	7624 LOCUST ST
	KC, MO 67131

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):
29-520-06-07-00-0-00-000	236 [114 W. 18 <sup>th</sup> St]	279632

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 or owner

STATE OF SS COUNTY C

Date: , 2024

On this <u>May of July</u> 2024, before me personally appeared <u>Charlotte Belshe</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

Notary Public Printed Name of Notary: Laura Goettsch

My Commission Expires:

LAURA GOETTSCH Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: Sept. 14, 2024 Commission #20238747

Name of owner: PAC Development Owner's address: 4801 Rock ha	ent, Inc. Owner's telephone number: 816-932-1282
IF SIGNER IS DIFFERENT FROM	L *
Name of signer:	David Lady
State Basis of Legal Authority to Sign:	President
Signer's telephone number:	816-932-1282
Signer's mailing address:	Same as above
If owner is an individual:	Single Married
If owner is not an individual, state what t	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):
See attached		

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 MISSONR

) ss COUNTY OF, TACKSON

On this <u>26</u> day of <u>SEPTEMBER</u> 2023, before me personally appeared <u>DAVID</u> <u>C. LADY</u> to me personally known to be the individual described in and who executed the foregoing instrument.

26 WITNESS my hand and official seal this day of SEPTEMPER, 2023.

My Commission Expires:

Notary Public Printed Name of Notary: ESTELA C. FENNEL

Date: DEPTEMPER 26, 2023

ESTELA C. FENNEL NOTARY PUBLIC - NOTARY SEAL STATE OF MISSOURI MY COMMISSION EXPIRES DECEMBER 30, 2024 JACKSON COUNTY COMMISSION #16744366 PAC Development Inc.

Tax Parcel Number	Parcel Number from Exhibit B	Assessed Value
29-340-17-12-00-0-00-000	19	\$60,576
29-340-17-28-00-0-00-000	17	\$22,464
29-520-09-02-02-0-00-000	53	\$3,424
29-520-09-02-01-0-00-000	5	\$3,424
29-520-09-01-01-0-00-000	5 5	\$176,800
29-520-09-02-03-0-00-000	54	\$320
29-520-08-07-00-0-00-000		\$528,800

Name of owner: PAC Holding	<u>Inc</u> . Owner's telephone number: <u>816-932-1282</u>
Owner's address: 480 Rock Ki	11 Rd. Kansas City MO 64110
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	David Lady
State Basis of Legal Authority to Sign:	President
Signer's telephone number:	816-932-1282
Signer's mailing address:	same as above
If owner is an individual:	Single Married
If owner is not an individual, state what t	type of entity (Mark Applicable Box):
Corporation	General Partnership

	p m	Seneral Future ship
	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):
29-230-39-25-00-0-00-0	× 227	\$1,569,888
29-230-38-25-00-0-00-00	0	\$0

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

· 1/C1 la lasili-t

Date: SEPTEMBER 26, 2023

Signature of person signing for owner

STATE OF MISSOUR ) COUNTY OF JACKSON ) ss

On this <u>26</u> day of <u>SEPTEMBER</u> 2023, before me personally appeared <u>DAVID</u> <u>C. LADY</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 SEPTEMBER 2023. Ziela C.

My Commission Expires:

Notary Public Printed Name of Notary: ESTELA C. FENNEL

ESTELA C. FENNEL
NOTARY PUBLIC - NOTARY SEAL
STATE OF MISSOURI
MY COMMISSION EXPIRES DECEMBER 30, 2024
JACKSON COUNTY
COMMISSION #16744366

Name of owner: Palette Works LLC Owner's telephone number: \_(816) 442-5518 \_\_\_\_\_ Owner's address: 11300 Slater St Overland Park, KS 66210 *IF SIGNER IS DIFFERENT FROM OWNER:* Name of signer: Paul Mattli State Basis of Legal Authority to Sign: \_\_\_\_\_ OWhevSigner's telephone number: g16.442.5518

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
and a comment	Not-for-Profit Corporation		Other

Single

11300 Slatur St.

Overland Park.

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-22-02-00-0-00-000	332	140416

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: 11/8/2023

KS. 66210

Married

Signature of person signing for owner

STATE OF MISSOULI COUNTY OF JUCKSON

On this  $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$ , before me personally appeared  $\frac{\$}{2020}$   $\frac{\$}{2023}$  day of  $\frac{\$}{2023}$  day o

WITNESS my hand and official seal this

My Commission E

an and a few middless and characteristic and a second s
LEANNE L. FITZGERALD
xpires. State of Missouri
State of Missouri
Commissioned for Jackson County
Ay Commission Expires: December 20, 2024 Commission Number: 12648614
Gentiniosion nullipel. 12040014

<u>'icela</u> o h. F\_H. gerald Notary Public Printed Name of Notary:

day of A

)01),2023.

Name of owner: Pensacola Apartment G	roup LLC Owner's telephone number: 816-309-7591		
Owner's address: 2727 Southwest Blvd I	Kansas City, MO 64108		
Owner's address: 2727 Southwest Blvd Kansas City, MO 64108 2007 Brock of Much IF SIGNER IS DIFFERENT FROM OWNER:			
Name of signer:	Malt Abbott		
State Basis of Legal Authority to Sign:	Owner		
Signer's telephone number:	876,256.8586		
Signer's mailing address:	P.O. Box 411857		
	Kansas hty. MU 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):
29-520-04-11-00-0-00-000	283	262400

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: March 19, 2024

STATE OF Konsors ) ss COUNTY OF Johnson

On this get day of march\_ 2024, before me personally appeared matt allott \_\_\_, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

19th day of March, 2024. ion Mende Jandess

My Commission Expires: 10 - 22 - 2027



Notary Public Printed Name of Notary: Sharon Hendee LANdess

Name of owner: Port Authority of Kansas City, Missouri	Owner's telephone number: (816) 559-3750
Owner's address: 110 Berkley Plaza, Kansas City, Missour	i, 64120
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Brian T. Rabineau
State Basis of Legal Authority to Sign:	General Counsel
Signer's telephone number:	(816) 559-3725
Signer's mailing address:	110 Berkley Plaza, Kansas City, MO 64120
If owner is an individual:	Single Married
If owner is not an individual, state what t	type of entity (Mark Applicable Box):
Corporation	General Partnershin

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

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-13-03-00-0-00-000	393	\$37,440
29-520-13-11-00-0-00-000	394	\$1,121,920
29-520-13-06-00-0-00-000	400	\$7,872,000
29-520-14-04-00-0-00-000	423 419	\$154,400
29-520-14-15-00-0-00-000	424 420	\$1,659,616

By executing this pedition, 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: July 2, 202

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

On this <u>2nd</u> day of <u>July</u> 2027, before me personally appeared <u>Brian T. Rabineau</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 \_\_\_\_\_, 2023

My Commission Expires:

COUNTY OF Jackson

April 23, 2027

Notary Public Printed Name of Notary: Jocelyn Knight JOCELYN E. KNIGHT Notary Public-Notary Seal STATE OF MISSOURI **Commissioned for Jackson County** My Commission Expires: April 23, 2027 ID. #23761870

Name of owner: Port Authority of Kansas City, Missouri Owner's telephone number: <u>816.559.3750</u> Owner's address: 110 Berkley Plaza, Kansas City, Missouri, 64120

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Brian T. Rabineau
State Basis of Legal Authority to Sign:	General Counsel
Signer's telephone number:	816.559.3750
Signer's mailing address:	110 Berkley Plaza, Kansas City, Missouri, 64120

If owner is an individual: \_\_\_\_\_\_ Single \_\_\_\_\_\_ Married

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

Со	orporation		General Partnership
Lir	mited Partnership		Limited Liability Company
Par	rtnership		Urban Redevelopment Corporation
No	ot-for-Profit Corporation	Х	Other <u>Political Subdivision</u>

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-47-04-00-0-00-000	410 [2001 Main]	\$473,3632
29-520-13-09-00-0-00-000	397 [1812 Walnut]	\$ 61,600

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	IISSOURI	)
COUNTY OF	JACKSON	) ss )

Date: 11 20, 2024

On this <u>20th</u> day of <u>November</u> 2024, before me personally appeared <u>Brian T. Rabineau</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 November, 2024.	
My Commission Expires: My Commission Expires: Notary Public Printed Name of Notary: My Commission Expires: Notary State Notary Public Printed Name of Notary: My Commission Expires: Notary Public Printed Name of Notary: Notary Public Printed Name of Notary: Notary Public Notary Public Printed Name of Notary: Notary Public Notary Public Printed Name of Notary: Notary Public	

Sion # 14

<u>Name of owner:</u> Port Authority of Kansas City, Missouri <u>Owner's telephone number:</u> 816.559.3750 <u>Owner's address:</u> 110 Berkley Plaza, 1815 Griffin, Ste 403, Dania Beach, FL 33004

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Brian T. Rabineau
State Basis of Legal Authority to Sign:	_General Counsel
Signer's telephone number:	816.559.3750
Signer's mailing address:	_110 Berkley Plaza, Kansas City, Missouri 64120

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 Corporatio	n X	Other Political Subdivision	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-13-01-00-0-00-000	[395] 1800 Walnut	\$102,816
29-520-13-10-00-0-00-000	[396] 1808 Walnut	\$ 61,600

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: 2024

Signature of person signing for owner

STATE OF MISSOURI

On this <u>20th</u> day of <u>November</u> 2024, before me personally appeared <u>Brian T. Rabineau</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

SS

My Commission Expires:

day of November 2024. Notary Public Mal Printed Name of Notary:



Name of owner: Port Authority of Kansas City Missouri Owner's telephone number: <u>816.559.3750</u> Owner's address: 110 Berkley Plz, Kansas City, MO 64120

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Brian T. Rabineau
State Basis of Legal Authority to Sign:	General Counsel
Signer's telephone number:	816.559.3750

110 Berkley Plz, KCMO 64120 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		Limited Liability Company
Partnership		Urban Redevelopment Corporation
 Not-for-Profit Corporation	X	Other Political Subdivision

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):	
29-520-12-15-00-0-00-000	368	\$448,000	

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 9, 2025

STATE OF MISSOURI COUNTY OF JACKSON

) SS

On this 9th day of June, 2025, before me personally appeared Brian T. Rabineau, 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:

JOCELYN E. KNIGHT Notary Public-Notary Seal STATE OF MISSOURI Commissioned for Jackson County My Commission Expires: April 23, 2027 ID. #23761870

+h. 2025. day of Notary Public yn E. Knight Printed Name of Notary:

Name of owner: <u>Rensenhouse LLC</u> Owner's telephone number: <u>917.709.1129</u>

Owner's address: 1919 Cherry St., Kansas City, MO 64108

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Kyle Rensenhouse
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	913.709.1129
Signer's mailing address:	1919 Cherry Storet
	Kausas Lity. Mo. 14108
If owner is an individual:	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):	
29.510.02.10.00.0.00.000	611 [19th & Oak_Lot 4]	\$693,824	

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.

Name of owner: Rkbk1927 LLC Owner's telephone number: <u>917-509-6948</u> Owner's address: 1927 McGee Kansas City, MO 64108

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Ryan Brazeal

State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	917.509.6948
Signer's mailing address:	1927 McGree
	Kanses Gty, MO. 64108
If owner is an individual:	Single Married

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

Co	Corporation General Partnership		General Partnership
Li	imited Partnership	Х	Limited Liability Company
Partnership			Urban Redevelopment Corporation
No	ot-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):	
29-520-17-08-00-0-00-000	579	289600	

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: 12-50,2023,2023

Signature of person signing for owner

STATE OF <u>Missouri</u> ) COUNTY OF <u>Jackson</u> ) ss
COUNTY OF Jackson) ss
On this $\frac{17}{\text{Brazeal}}$ day of $\frac{\text{December 2023}}{\text{to me personally known to be the individual described in and who executed the foregoing instrument.}$
WITNESS my hand and official seal, this day of day of day of My Commission Expires:
My Commission Expires: My Commission Expires: NOTARY SEAL COMMISSION #13473839 #13473839 COMMISSION #13473839 #13473839 COMMISSION #13473839 #134738 #13473839 #134738 #134738 #134738 #13473

Name of owner: $5alow$ 122, LLC Owner's telephone number: $913 - 530 - 6279$			
Owner's address: 5525 MISSION RD., FAIRWAY, KS 66205			
IF SIGNER IS DIFFERENT FROM OWNER:			
Name of signer: $3v ZANNE A 20 N$			
State Basis of Legal Authority to Sign: MCMBER, SALON (22, LLC			
Signer's telephone number: 913 - 530-6279			
Signer's mailing address: 5AAE AGOWNER			
If owner is an individual: $N/A$ Single $MA$ Married			
If owner is not an individual, state what type of entity (Mark Applicable Box):			
Corporation General Partnership			
Limited Partnership Limited Liability Company			

F	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):
29-520-22-06-00-0-00-600	336	321,600

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.

Incer E Signature of person signing for owner

<u>10g1-2023</u>2023 Date: (

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

On this <u>1</u> day of <u>August</u> 2023, before me personally appeared <u>Suzanne</u> <u>Aavon</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 <u>August</u>, 2023.



Notary Public Printed N Printed Name of Notary: Abby Price

Name of owner: Semref Crossroads LLC Owner's telephone number: 954-985-2300; 11535 Owner's address: 5700 Griffin Rd Davie, FL 33314

#### IF SIGNER IS DIFFERENT FROM OWNER:

Xn

Name of signer:	Jonathan Levy
State Basis of Legal Authority to Sign:	Authorized Signatory
Signer's telephone number:	954-985-2300; 11535
Signer's mailing address:	1815 Griffin Rd Davie FL 33004

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):
29-520-39-06-00-0-00-000	180 [2100 Wyandotte]	\$7,817,168

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: December 12 , 2024
Signature of person signing for owner	
STATE OF = lovida )	
STATE OF <u>Florida</u> ) ) ss COUNTY OF <u>Broward</u> )	
On this $\underline{12^{\dagger}}$ day of $\underline{December}$ 2024, before me personally appear personally known to be the individual described in and who exect	ared <u>Jonathan Levy</u> , to me uted the foregoing instrument.
WITNESS my hand and official seal this 12 + ^	day of December 2024.
Ninette Minguez	
My Commission Expires Comm.: HH 123858 Notary I	Public
My Commission Expires: Printed	Name of Notary: Ninetle Ringuez
April 28, 2025	0 0

Shell, Mandy	0
Shell, Mandy Name of owner: Shell Law +7	
Owner's address: 105 E. Str. S	Keno 04105 1617 Walnut, KCMO 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	mardy Shell
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	816-617-6115
Signer's mailing address:	1617 Walnut; KCMO 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

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-34-03-00-00-00-00	305	247.040

Other

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.

M m. Signature of person signing for owner

Not-for-Profit Corporation

STATE OF -115SOUTL ) ss COUNTY OF & ackson)

SS

Printed Name of Notary: 4

Date:

On this 4 day of April 2029, before me personally appeared Mandy H Shell 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 April, 2024. lessa Notary Public

4/4/24

,202m

LSSA NRINdom

My Commission Expires:



Name of owner: <u>Sixteen Twenty-One Baltimore LLC</u> Owner's address: <u>1621 Baltimore Kansas City</u>, MO 64108 Owner's telephone number: 816.471.4881

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

Rik N. Siro

State Basis of Legal Authority to Sign: Managing Member

816.471.4881

Signer's telephone number: Signer's mailing address:

1621 Baltimore, 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	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):
29-230-36-07-00-0-00-000	251	204032

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: 6/12\_\_\_\_, 2025

Signature of person signing for owner

STATE OF 🥂	lissouri	)	
COUNTY OF	Jackson	)	SS

On this  $\mathcal{M}^{\text{day}}$  day of  $\mathcal{J}^{\text{unc}}$  2025, before me personally appeared  $\mathcal{R} : \mathcal{K} \cup \mathcal{N}$ , 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 June , 2025. DI Vam

My Commission Expires: 11 - 20 - 26



Notary Public Printed Name of Notary: Dom ... ch Uallejo

Name of owner: <u>217 Holdings LLC</u> Owner's address: 1621 Baltimore Kansas City, MO 64108 Owner's telephone number: 816.471.4881

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

Eric W. Smith

State Basis of Legal Authority to Sign: Managing Member

Signer's telephone number:

Signer's mailing address:

816.471.4881

1621 Baltimore, 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	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>29-230-36-07-00-0-00-000</u>	251	204032

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: Dure 11, 2025

Signature of person signing for owner

STATE OF $\land$	nissouri	)
COUNTY OF	Jackson	) ss )

On this  $12^{tb}$  day of 30ne 2025, before me personally appeared  $Eric \ w \ sm.th$ , to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this  $12^{th}$  day of  $\overline{J^{Jne}}$ , 2025.

My Commission Expires: 11-20.26

ang an a high strategy and an	DOMINICK VALLEJO
	NOTARY PUBLIC - NOTARY SEAL
	STATE OF MISSOURI
MYC	OMMISSION EXPIRES NOVEMBER 20, 2026
	JACKSON COUNTY
	COMMISSION #22692400

Notary Public Printed Name of Notary: Dominick Valleyo

Du valhe

Name of owner: <u>NES Properties LLC</u> Owner's address: 1621 Baltimore Kansas City, MO 64108 Owner's telephone number: 816.471.4881

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

Athena Dic

State Basis of Legal Authority to Sign: Managing Member

Signer's telephone number:

Signer's mailing address:

816.471.4881

1621 Baltimore, 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	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>29-230-36-07-00-0-00-000</u>	251	204032

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: 9 12, 2025

STATE OF Missouri ) COUNTY OF Jackson ) ss

On this 2<sup>th</sup> day of <u>June</u> 2025, before me personally appeared <u>Athena Dickson</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this  $12^{m}$  day of 70nc, 2025.

My Commission Expires: 11 - 20 - 26



Notary Public Printed Name of Notary: Dominicle Vallejo

· · · ·

Dr vultu

Owner's address: 1919 Cherry St Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM O	WNER:
Name of signer:	Kyle Rensenhouse
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	913.709.1129
Signer's mailing address:	1919 Cherry
	Kansas Lity, 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	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):
29.510.21.04.00.0.00.000	686 [1919 Cherry]	\$498,816
29.510.21.03.00.0.00.000	685 [1911 Cherry]	\$182,400

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  $MISSO_{UV}$  Date: co/2a/24State: co/2a/24NOTARY SEA NOTARY SEA NOTARY PUNE NOTARY SEA NOTARY SEA NOTARY PUNE NOTARY SEA NOTARY PUNE NOTARY SEA NOTARY PUNE NOTARY SEA NOTARY PUNE NOTARY SEA NOTARY SEA NOTARY SEA NOTARY PUNE NOTARY Date: 10/29/24, 2024 , to me day of 00000 , 2024. WITNESS my hand and official seal this My Commission Expires: Notary Public Printed Name of Notary: Meter M Wa 06/23/28

785-330-6333

229 Ward PKWY HEGOLB KCMO 64112

Single Married

Name of owner: SMS Delectations LLC Owner's telephone number: 785-331-6333 Owner's address: 7500 W 110th St Ste 500 \Overland Park, KS 66210

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

State Basis of Legal Authority to Sign: Michael Edmonson - MANAGER

Signer's telephone number:

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):
29-520-41-12-00-0-00-000	153	691200

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: . 2024

\*\*\*\*\*\*\*\*\*\*\*

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

On this 25<sup>th</sup> day of <u>June</u> 2024, before me personally appeared <u>Michael Echnordson</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**, 2024.

My Commission Expires: 01/12/2027

Notary Public Printed Name of Notary: Abby frice

Name of owner: Sobel Properties, LLC	Owner's telephone number: 816-753-553/
Owner's address: 4520 nuinSt. Ste. 1062	KCMO 64111
IF SIGNER IS DIFFERENT FROM OWNER:	
Name of signer: Shirler	1 Bush Helzberg
State Basis of Legal Authority to Sign:	ger
Signer's telephone number: <u>913-3</u>	320-414L
Signer's mailing address: Same a	is above
If owner is an individual: Sir	gle Married
If owner is not an individual, state what type of entity	y (Mark Applicable Box):
Corporation G	eneral Partnership

Corporation		-	General Tarmership
Limited Partnersh	nip	X	Limited Liability Company
Partnership			Urban Redevelopment Corporation
Not-for-Profit Co	orporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-06-13-00-0-00-010	233	912,000

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

27,20284 Date:

STATE OF Kansas

COUNTY OF Johnson

On this and day of <u>June</u> 2027, before me personally appeared <u>Shurley Bash Helpberg</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this \_\_\_\_\_

SS

day of June, 2028.4

My Commission Expires:

12/29/24

ale Of Ka And Ale Of Ko

Mary K. M. Mamara Notary Public Printed Name of Notary: Mary K. M. Namara

Name of owner: Southwest Boulevard Partners LLC Owner's telephone number:  $\frac{\$16 - \$35 - 6529}{0$  Owner's address: 329 Southwest Blvd Kansas City, MO 64108 Suite B

#### IF SIGNER IS DIFFERENT FROM OWNER:

Brady Miller
Partner
Same as above
Same " "

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	$\times$	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):
29-520-41-07-00-0-00-000	144	64000

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.

!/a-

Date: 7-11-24,2024

Signature of person signing for owner

STATE OF MISSON ) ss

COUNTY OF JACKSON

On this 11th day of July 2024, before me personally appeared _	KIM	BRADY-MILLER,	to
me personally known to be the individual described in and who executed t			

WITNESS my hand and official seal this	day of JULY, 2024.
My Commission Expires: NOTARY SEAL Jackson County	Notary Public Printed Name of Notary: LARA GRAY

THE STATE

Name of owner: Stephanie E Leedy Trust U/A	Owner's telephone number: $816 - 510 - 537$ Gwner's
address: 5821 Fontana Dr Fairway, KS 66205	5392

#### **IF SIGNER IS DIFFERENT FROM OWNER:**

Name of signer:	Stephanie E Leedy	And the second s
State Basis of Legal Authority	to Sign: 0 Whee-	0, 2004 5 Thinks 50
Signer's telephone number:	816.510.5392	PRI 011 11 11 11 11 11 11 11 11 11 11 11 11
Signer's mailing address:	5821 Fontana Drive	No Sector
	Fairway, KS. 66205	THE ALL WULLOO
If owner is an individual:	Single Married	and the second and a second and a second a secon

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 Tryst

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-33-03-00-0-00-000	385	90547
29-520-32-09-00-0-00-000	356	517817

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.

Stiphanie E. Juely Signature of person signing for owner

Date: \_\_\_\_\_0 S / (0, 2024

STATE OF <u>Mo</u>) ss COUNTY OF <u>JackSon</u>)  $10^{t^{h}}$  day of  $M_{0.1}$  2024, before me personally appeared to me personally known to be the individual described in and who On this executed the foregoing instrument.

WITNESS my hand and official seal this tenth day of May, 2024. mmission Expires: 01/(2/2027) Notary Public

My Commission Expires: 01/12/2027

Printed Name of Notary: Abby Price

#### EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE

CROSSROADS COMMUNITY IMPROVEMENT DISTRICT

Name of owner: Stucker & Hess LLC	Owner's telephone number: _	816.213.3675
Owner's address: 1701 Main St Kansas City, MC	D 64108	

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	steven Revare
State Basis of Legal Authority to Sign:	Managing Member
Signer's telephone number:	(816) 213-3675
Signer's mailing address:	1701 Main 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):

Corpor	ation		General Partnership
Limite	l Partnership	Х	Limited Liability Company
Partner	ship		Urban Redevelopment Corporation
Not-for	-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):	
29-230-41-09-00-0-00-000	278	656416	

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.

1

Date: 2/29 , 2024

Signature of person signing for owner

STATE OF KANSAS COUNTY OF Johnson SS 29 m , to me personally known to be the individual described in and who On this 19 da day of executed the foregoing instrument. 29 th day of teb , 2024.

WITNESS my hand and official seal this

My Commission Expires: 7/27/2026

Notary Public Notary Public Printed Name of Notary: Matthew Steinbock

MATTHEW STEINBOCK Notary Public-State of Kansas My Appt. Expires 7/

Name of owner: 56 02 co 118, LLC Owner's telephone number: 913-530-6279
Owner's address: 5525 MISSION RD., FAIEWAY, KS 66205
IF SIGNER IS DIFFERENT FROM OWNER:
Name of signer: <u>SUZANNE ACO</u>
State Basis of Legal Authority to Sign: MCMBCm, STUDIO AB, LLC
Signer's telephone number: <u>913 - 530 - 6259</u>
Signer's mailing address: 5AME AS OWNER
If owner is an individual: <u>V(A</u> Single <u>J(A</u> 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):
29-520-22-07-00-0-00-000	337	559616
		1

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.

Incenor D

Signature of person signing for owner

Date: L ,2023

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

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

WITNESS my hand and official seal this \_\_\_\_\_ 1 \_\_\_\_ day of <u>AuguSt</u>, 2023.

Commission Expires: 1/12/2027 WAT----

Notary Public Printed Name of Notary: Abby Price

Name of owner: Sugar Magnolia Holdings LLC Owner's telephone number: <u>866 210 436</u> Owner's address: PO Box 74 Weston, MO 64098

IF SIGNER IS DIFFERENT	FROM OWNER:
Name of signer:	Sarah Hoffmann
State Basis of Legal Authority	to Sign:ப்பால் வல்
Signer's telephone number:	8162104362
Signer's mailing address:	19935 MT Bethel Rd
	Weston MO 64093
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):
29-240-20-07-00-0-00-000	482	36000
29-240-33-02-00-0-00-000	483	210016

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.

ans gnature of person signing for owner

Date: JULY 16 , 2024

STATE OF MISSDURI SS COUNTY OF JACKSON

On this 16<sup>TH</sup> day of <u>JULY</u> 2024, before me personally appeared SARAH HOFFMANN 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 M

My Commission Expires:

Notary Public Printed Name of Notary: LARA GRAY

2024.



Name of owner: Sufferlin Investment, LLC Owner's telephone number: 816-679-4 554 Owner's address: 13907 Bond St overland Park 146 66221 IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Steven E. Sutherlin
State Basis of Legal Authority to Sign:	Manasing Partner
Signer's telephone number:	816-679-4854
Signer's mailing address:	13907 Bond ST OP KS 66221
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	L	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-24-05-00-0-00-00-00-000	158	222,016

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.

<u>*HE Lock</u></u> Signature of person signing for owner</u>* 

Date: \_//~/\_\_\_\_, 2023

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

On this 1 day of NOWMER 2023, before me personally appeared Steven Sutherlin 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 November, 2023.

My Commission Expires: $O(\ell/05/202.7)$	MAREAS Notary Public MAREAS Printed Name of Notary: EMMA LEASER
06/03/202/	A literation of the state of th
	8 POLARY B
	B PUBLIC S
	for many start
	E OF Kr

Name of owner: Tension Envelope Corp Owner's telephone number: 816.471.3800 address: 819 E 19th St Kansas City, MO 64108

Owner's

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Keith Hyder

State Basis of Legal Authority to Sig	n: Company Officer
Signer's telephone number:	516 283 9807
Signer's mailing address:	SIQ E 19TH ST
	Kansas City MO 64185
If owner is an individual:	Single Married

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

Corporation		General Partnership	
<i>{</i>	Limited Partnership	Limited Liability Company	
an Stanson (seiner anders	Partnership	Urban Redevelopment Corporation	
	Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-14-12-00-0-00-000	711	28800
29-510-14-13-00-0-00-000	712	28800
29-510-14-16-00-0-00-000	720	45376

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

18 . 2024 Date:

STATE OF MO COUNTY OF Jackson

Tanuary 2024, before me personally appeared to me personally known to be the individual described in and who day this leith executed the foregoing instrument.

WITNESS my hand and official seal this \_\_\_\_\_\_ day of January, 2024. My Commission Expires: 01/12/2027 Notary Public Printed Name of Notary: \_\_\_\_\_\_ Abby\_\_\_\_\_ RTICe



Name of owner: The 1819 Baltimore Lofts Condominium Owner's telephone number:  $816 - 213 \cdot 0618$ Owner's address: 1819 Baltimore Lofts LLC Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER: Name of signer: Chr-13 Abele HOA President State Basis of Legal Authority to Sign: 816 213 0618 1819 Baltimore Kansas City, MO64108 Signer's telephone number: Signer's mailing address: If owner is an individual: Single

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

Corpor	ation		General Partnership
Limite	d Partnership		Limited Liability Company
Partner	ship		Urban Redevelopment Corporation
Not-for	-Profit Corporation	×	Other HOA

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-02-0-00-000	366	2
		s.,

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.

ature of person signing for owner

STATE OF MISSOURI ) COUNTY OF ACIES ) ss

Commission #12354166

Date: 10 July \_, 2024

On this 10th day of 1 alog 2024, before me personally appeared CHILL'S ABELE, to me personally known to be the individual described in and who executed the foregoing instrument.

IOM day of July , 2024. WITNESS my hand and official seal this My Commission Expires: Notary Public Printed Name of Notary: David Johnson DAVID JOHNSON Notary Public - Notary Scal STATE OF MISSOURI **Jackson County** My Commission Expires: June 11, 2027

Name of owner: The Helping Hand of Goodwill Industries Owner's telephone number:  $(\underline{\$l}_{b}) \underline{590} - \underline{3059}$ Owner's address: 1817 Campbell Kansas City, MO 64108

> (1816) 590 - 3059 <u>800 E 18th St</u> <u>Kaussas City</u> Mo 64108 \_\_\_\_\_ Single X\_ Married

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: MIKE SANETT

State Basis of Legal Authority to Sign:

Signer's telephone number:

Signer's mailing address:

If owner is an individual: *LEO* 

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

	Corporation	General Partnership
2	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):
29-510-15-23-00-0-00-000	729 [912 E. 19 <sup>th</sup> Street]	16800
29-510-15-09-00-0-00-000	722 [901 E. 18 <sup>th</sup> Street]	4800
29-510-15-22-00-0-000	726 [1817 Campbell]	613216
29-510-15-21-00-0-00-000	723 [903 E. 18 <sup>th</sup> Street]	37280
29-510-15-06-00-0-000	724 [907 E. 18 <sup>th</sup> Street]	35616
29-510-15-05-00-0-000	725 [911 E. 18 <sup>th</sup> Street]	8800
29-510-15-12-00-0-000	727 [900 E. 19 <sup>th</sup> Street]	13600

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.

you	PLESSCEO	Date: JULY 9, 2024
Signature of person signing for	owner	
STATE OF <u>Missouri</u> COUNTY OF <u>Jackson</u>	) ) SS )	TAMI JEAN HULL Notary Public - Notary Seal Jackson County - State of Missouri Commission Number 22652177 My Commission Expires Oct 23, 2026
On this $\underline{9}$ day of $\underline{0}$ day of \underline{0} day of \underline{0} day of \underline{0} day of $\underline{0}$ day of \underline{0}	2024, before me pe	rsonally appeared <u>Michael Sinnett</u> , and who executed the foregoing instrument.

to me

WITNESS my hand and official seal this  $\underline{\qquad}$  day of  $\underline{\qquad}$ , 2024.

# My Commission Expires: 10/23/2026

14

Jami Jean Hell Notary Public Printed Name of Notary: Tami Jean Hull

1

Name of owner: The Studios I	Owner's telephone number: 818-994-7134			
Owner's address: 1708 Campbell	st Kansas City, MO 64108			
IF SIGNER IS DIFFERENT FROM OWNER:				
Name of signer:	Brad Nicholson			
State Basis of Legal Authority to Sign:	manager member			
	816-289-3606			
Signer's mailing address:	P.O. Box 10485, Kansas City, MO. 64171			
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
1	Limited Partnership	٠	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):
29-240-40-09-00-0-00-000	671	\$625,088.00

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.

Expires: 01/12/2027

Date: 1-18-2024, 2024

Signature of person signing for owner

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

COUNTY OF Jackson

ANTHIN MILLING

"In the second second

On this 18 day of <u>January</u> 2024, before me personally appeared <u>Bradley Nicholson</u> to me personally known to be the individual described in and who executed the foregoing instrument.

day of January 2025. <u>Allflee</u> Notary Public Printed Name of Notary: <u>Abby Price</u> WITNESS my hand and official seal this

Name of owner: Tracks 215 LLC	Owner's telephone number: 913.530.8992
Owner's address: 2100 Central St, Kans	as City, MO 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Larkin O'Keefe
State Basis of Legal Authority to Sign:	LLC Manager
Signer's telephone number:	913,530.8992
Signer's mailing address:	2100 Central St, Kansas Lity. 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	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):
29-520-35-09-00-0-00-000	430	\$200,416
29-520-35-03-00-0-00-000	431	\$115,900

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: , 2023

STATE OF ) SS ackson COUNTY OF

On this 12 day of <u>August</u> 2023, before me appeared <u>(ackin Offeele</u>, to me personally known, who, being by me duly sworn did say that he/she/they is the <u>lauager</u> of <u>racks 25 UC</u> and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this \_

My Commission Expires:

a a a a a a a a a a a a a a a a a a a	(handba
Catherine Coulter Stowe Notary Public Notary Seal State of Missouri Jackson County	
Jackson County Jackson County My Commission Expires 4/19/2026 Commission # 22469900	٠
Commission # 22455500	

Notary Public Printed Name of Notary Catherine Coul

day of

LAUST. 2023.

Name of owner: Trade Services Group International LLC Owner's telephone number: 816 210 10012

Owner's address: Michael Oneill 1232 W 65th St Kansas City, MO 64108

#### IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Mic	chael ONeill
State Basis of Legal Authority to Sign	Manager
Signer's telephone number:	816 210 1012
Signer's mailing address:	1232 W. 65th St.

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):
29-520-21-04-01-0-00-000	375	127616

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.

2024 Signature of person signing for own

STATE OI SS COUNTY

On this day of <u>to me personally known to be the individual described in and who</u> executed the foregoing instrument.

WITNESS my hand and official seal this \_

2024. day of Notary Public Printed Name of Notary

My Commission Expires:

NOTARY PUBLIC - State of Kansas ANGANETTA, RUFFIN Appt, Expires

Name of owner: Treco Enterprises Owner's telephone number: 816, 471.3800 Owner's address: 819 E 19th St Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Keith Hyder
State Basis of Legal Author	rity to Sign: COMPMY OFFICE
Signer's telephone number:	516 253 9807
Signer's mailing address:	SIG E 19TH SI
	KANSAS CITY MO 64156
If owner is an individual:	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	Limited Liability Company
Z	Partnership	Urban Redevelopment Corporation
	Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-510-14-22-01-0-00-000	706	14432
29-510-14-05-00-0-00-000	708	4000
29-510-14-25-00-0-00-000	715	11200
29-510-14-26-00-0-00-000	716	4416
29-510-14-27-00-0-00-000	717	6816
29-510-14-20-00-0-00-000	718	14336
29-510-14-23-00-0-00-000	719	36416

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.

, 2024 Date:

Signature of person signing for owner

STATE OF MO ) ss COUNTY OF Jackson

 $\overline{January}$  2024, before me personally appeared , to me personally known to be the individual described in and who On this day of Keith Hyer executed the foregoing instrument.

8th WITNESS my hand and official seal this \_

day of \_

My Commission Expires: 01/12/2027

Notary Public Printed Name of Notary: <u>Abby Price</u>

, 2024.



Name of owner: Trident 704 LLC Owner's telephone number: 816-807-3717

Owner's address: 7500 W. 119th St. Ste 500, Overland Park, KS. 66210

#### **IF SIGNER IS DIFFERENT FROM OWNER:**

Name of signer:	Dylan Mors
State Basis of Legal Authority to Sign:	MISSOWN, Property Managor & Son
Signer's telephone number:	413-787-2681
Signer's mailing address:	1 9500 W 110th St, Overland
	Park, 45 66210 # 500
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):
29-510-13-13-00-0-0000	695 [704 E. 19th Street]	\$145,600

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. ath

Date: 01

Janary

,2025

Signature of person signing for owner

STATE OF MISSOURI, ) \$\$ COUNTY OF JUCKSUN

On this day of January 2025, before me personally appeared to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

OR 101 2025. day of Notary Public

My Commission Expires:

Fea Joy Shultz Printed Name of Notary: