

**EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT**

Name of owner: A & L I LLC Owner's telephone number: 816-724-7243
Owner's address: 1803 Wyandotte St Unit 307 Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Aaron Berger

State Basis of Legal Authority to Sign: Owner

Signer's telephone number: _____

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 _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
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.

execute this petition on behalf of the

John B. Clegg

Date: 08 - July , 2024

STATE OF MO)
COUNTY OF Jackson)
) ss

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

WITNESS my hand and official seal this 8th day of July, 2024.

My Commission Expires: 01/12/2027

Notary Public
Printed Name of Notary: Abby Price



EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT

Name of owner: A C Properties Inc Owner's telephone number: 310-745-4050
address: 6717 Shawnee Mission Pkwy Mission, KS 66202

Owner's

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Christopher Accardo

State Basis of Legal Authority to Sign: Owner

Signer's telephone number: _____

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):

<input checked="" type="checkbox"/>	Corporation	General Partnership
	Limited Partnership	Limited Liability Company
	Partnership	Urban Redevelopment Corporation
	Not-for-Profit Corporation	Other _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<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.



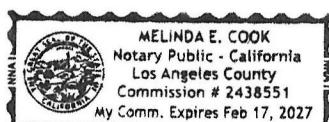
Date: 8/22, 2024

Signature of person signing for owner

STATE OF California)
COUNTY OF Los Angeles) ss

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

WITNESS my hand and official seal this 22nd day of August, 2024.



Notary Public

Printed Name of Notary: Melinda E. Cook

My Commission Expires:
February 17, 2027

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 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.

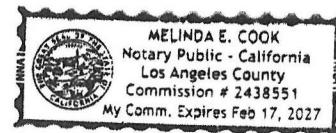
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Melinda E. Cook

Notary Public Signature

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Execution Page for Petition for
the Creation of the Crossroads
Community Improvement District
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date August 22, 2024

CAPACITY CLAIMED BY THE SIGNER



Individual(s)



Corporate Officer

Director

(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 is 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.

EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT

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: Matthew Abbott
State Basis of Legal Authority to Sign: Owner
Signer's telephone number: _____
Signer's mailing address: _____

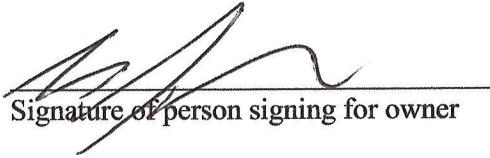
If owner is an individual: _____ Single _____ Married

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 _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-240-35-03-00-0-00-000</u>	470 [1722 Oak St]	\$140,800
<u>29-510-08-07-00-0-00-000</u>	471 [1722 Oak St]	\$131,616
<u>29-510-03-13-00-0-00-000</u>	670 [1735 Charlotte St]	\$185,600
<u>29-520-28-16-00-0-00-000</u>	122 [2007 Broadway Blvd]	\$180,000 [2023]
<u>29-510-03-21-00-0-00-000</u>	672 [800 E. 18 th St]	\$512,000

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: 1/13/25, 2025



STATE OF Kansas)
COUNTY OF Johnson) ss

On this 3 day of January 2023, before me personally appeared Matthew Abbott, to me personally known to be the individual described in and who executed the foregoing instrument

WITNESS my hand and official seal this 13

day of Jan, 2023.


Sharon Hendee Landess

EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT

Name of owner: Abbott Properties LLC Owner's telephone number: 816-304-1591
% Matthew Abbott

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: _____

Signer's mailing address: _____

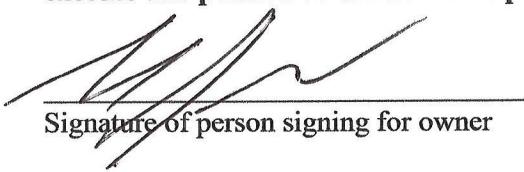
If owner is an individual: _____ Single _____ Married

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):
<u>29-510-24-06-00-0-00-000</u>	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

Date: 1/13/25 2025

STATE OF Kansas)
COUNTY OF Johnson) ss

On this 13 day of January 2025 before me personally appeared Matthew Abbott,
to me personally known to be the individual described in and who executed the foregoing instrument.




Notary Public
Printed Name of Notary: Sharon Hendee Landess

EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT

Name of owner: Abele R Christopher - Trustee Owner's telephone number: 816-213-0618

Owner's address: 1819 Baltimore Ave Unit 205 KCMO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: _____

State Basis of Legal Authority to Sign: _____

Signer's telephone number: _____

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		Other _____

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-520-12-13-00-0-02-001</u>	<u>366</u>	<u>\$80,560.00</u>

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.

Chris Abele

Signature of person signing for owner

Date: August 31, 2023

STATE OF Missouri)
) ss
COUNTY OF Jackson)

On this 31st day of August 2023, before me personally appeared Chris Abele, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 31st day of August, 2023.

David Johnson

Notary Public
Printed Name of Notary: David Johnson

My Commission Expires: 6/11/2027



**EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT**

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

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
<input checked="" type="checkbox"/>	Not-for-Profit Corporation	Other <u> </u>

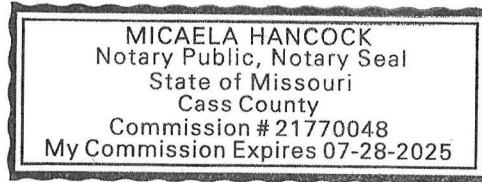
Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-510-11-17-00-0-00-000</u>	609	<u>\$407,008</u>

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.

Cory D. Weeda
Signature of person signing for owner

Date: July 9, 2024

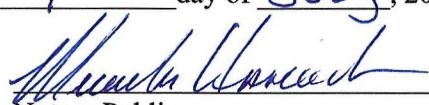
STATE OF MISSOURI)
) ss
COUNTY OF CASS)



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

WITNESS my hand and official seal this 9 day of JULY, 2024.

My Commission Expires: July 28, 2025


Notary Public
Printed Name of Notary: MICAEALA HANCOCK

**EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT**

Name of owner: JAMES L. ADAMS Owner's telephone number: 713 805 7638
Owner's address: 1014 E. 19th, KC, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

State Basis of Legal Authority to Sign:

Signer's telephone number:

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	Other _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
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.

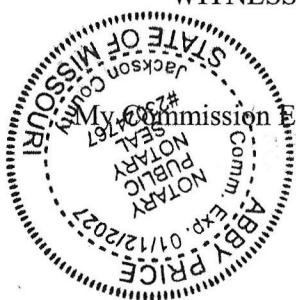
Signature of person signing for owner

Date: Aug 18, 2023

STATE OF Mo)
COUNTY OF Jackson) ss

On this 18 day of August 2023, before me personally appeared Adams L James, 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 August, 2023.



Notary Public
Printed Name of Notary: Abby Price

**EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT**

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

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Christopher Accardo

State Basis of Legal Authority to Sign: Owner

Signer's telephone number: _____

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 _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<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.

J. L. M.

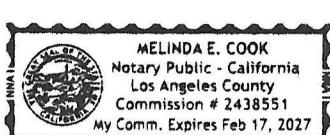
Date: 8/22, 2024

Signature of person signing for owner

STATE OF California)
COUNTY OF Los Angeles)

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

WITNESS my hand and official seal this 22nd day of August, 2024.



My Commission Expires:
February 17, 2027

Notary Public
Printed Name of Notary: Melinda E. Cook

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 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.

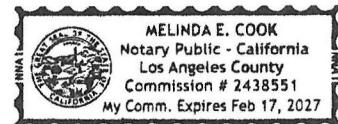
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Notary Public Signature

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Execution Page for Petition for
the creation of the Crossroads
Community Improvement District
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date August 22, 2024

CAPACITY CLAIMED BY THE SIGNER



Individual(s)



Corporate Officer

Director

(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 is 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.

**EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT**

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

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

OWNER: Asf Kiyani

State Basis of Legal Authority to Sign: Manager of AKI-1704 Grand, LLC

Signer's telephone number: 816-456-9024

Signer's mailing address: 1509 W. 12th Street, Kansas City, Missouri 64101

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 _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-230-42-12-00-0-00-000</u>	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.

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

Date: August 9, 2024

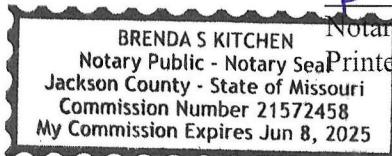
STATE OF MISSOURI)
COUNTY OF JACKSON)
) ss

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 9th day of August, 2024.

My Commission Expires:

June 81 2025



EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT

Name of owner: Arthel Building LLC Owner's telephone number: 816-510-4896
Owner's address: 7441 A Broadway, KC MO 64114

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Diane Botwin Alpert

State Basis of Legal Authority to Sign: Managing Member

Signer's telephone number: 816-510-4896

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	<input checked="" type="checkbox"/>	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>JA 295 202014 00000000 29-520-20-14-00-0-00-000</u>	<u>401</u>	<u>\$1445000</u>

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.

Diane Botwin Alpert
Signature of person signing for owner

Date: 27 July, 2023

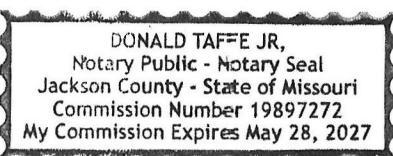
STATE OF Missouri)
) ss
COUNTY OF Jackson)

On this 27 day of July, 2023, before me personally appeared Diane Botwin Alpert, 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 July, 2023.

D. Taff Jr.
Notary Public
Printed Name of Notary: Donald Taff Jr.

My Commission Expires: May 28 2027



**EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE
CROSSROADS COMMUNITY IMPROVEMENT DISTRICT**

Name of owner: Avelina Logan LLC Owner's telephone number: 816-918-7170

Owner's address: 606 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 _____

<u>Tax Parcel Number(s)</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
29240381100000000	631	42,400
29240380200000000C	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.

 Signature of person signing for owner

Date: 09/28/2023 , 2023

STATE OF Missouri)
COUNTY OF Jackson) ss

On this 28 day of Sept 2023, before me personally appeared Kevin Martinez, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 28th day of Sept, 2023.

My Commission Expires:

Notary Public
Printed Name of Notary: Am E. Baum

