

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

Name of owner: EDDY TAVIO Owner's telephone number: 913 991 4448

Owner's address: 1803 WYANDOTTE, KANSAS CITY, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER: UNIT 204

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):

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-520-11-11-00-0-02-003</u>	<u>302</u>	<u>\$52,734</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.

Eddy TAVIO
Signature of person signing for owner

Date: January 3rd, 2025
~~2023~~

STATE OF Missouri)

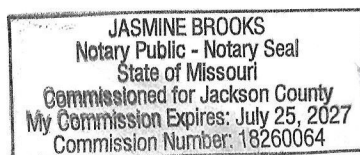
COUNTY OF Jackson) ss

On this 3rd day of January, 2025, before me personally appeared Eddy TAVIO, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 3rd day of January, 2025
~~2023~~

My Commission Expires:
July, 25, 2027

Jasmine Brooks
Notary Public
Printed Name of Notary: Jasmine Brooks



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

Name of owner: Tension Envelope Corp Owner's telephone number: _____ 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 Authority to Sign: Company Officer

Signer's telephone number: 916 283 9507

Signer's mailing address: 819 E 19th St
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):

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

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-510-14-12-00-0-00-000</u>	711	28800
<u>29-510-14-13-00-0-00-000</u>	712	28800
<u>29-510-14-16-00-0-00-000</u>	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.

Keith Hyder
Signature of person signing for owner

Date: 1/18, 2024

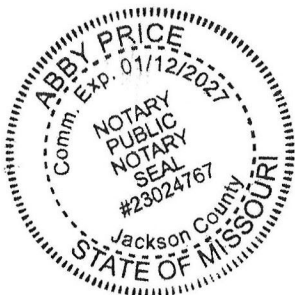
STATE OF MO)
COUNTY OF Jackson) ss

On this 18 day of January 2024, before me personally appeared Keith Hyder, 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, 2024.

My Commission Expires: 01/12/2027

Abby Price
Notary Public
Printed Name of Notary: Abby Price



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

Name of owner: Terrace On Walnut LLC Owner's telephone number: 913-529-3888

Owner's address: 9000 W. 64th Ter, Merriam, KS 66202

IF SIGNER IS DIFFERENT FROM OWNER

Name of signer: ANNA HICKOK
State Basis of Legal Authority to Sign: MANAGER
Signer's telephone number: 913-488-1140
Signer's mailing address: 9000 W 64th Terrace
Merriam KS 66202

If owner is an individual: Single ☒ Married

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

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

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-520-21-08-00-0-00-000</u>	<u>317 [1721 Walnut St]</u>	<u>\$5,770,663</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.

Anna Hickok
Signature of person signing for owner

Date: DEC. 10th, 2024

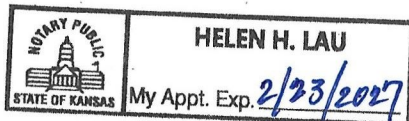
STATE OF KANSAS)
COUNTY OF JOHNSON) ss

On this 10 day of DEC., 2023, before me personally appeared ANNA HICKOK,
to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 10th day of DEC., 2024.

My Commission Expires:

Helen Lau
Notary Public
Printed Name of Notary: HELEN LAU

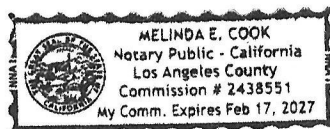


STATE OF California)
) ss
COUNTY OF Los Angeles)

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



MELINDA E. COOK
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 23, 2024 before me, Melinda E. Cook,

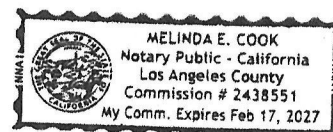
Notary Public, personally appeared Louis Christopher Accardo,
Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that 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
(Title or description of attached document)
Community Improvement District

(Title or description of attached document continued)

Number of Pages 2 Document Date August 23, 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: The Danial R Merker Trust Owner's telephone number: 913-579-5055
Dated 12/14/2018
Owner's address: 1535 Walnut St. #309

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):

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-230-29-16-00-0-03-003</u>	<u>295</u>	<u>\$73,950.00</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.

[Signature]
Signature of person signing for owner

Date: Feb. 7, 2028

STATE OF MO)

) ss

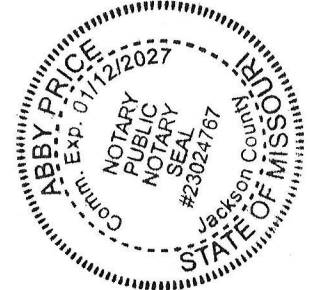
COUNTY OF Jackson) 4

On this 7 day of Feb, 2028, before me personally appeared Danial R Merker,
to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 7th day of Feb, 2028.

My Commission Expires: 01/12/2027

[Signature]
Notary Public
Printed Name of Notary: Abby Price



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

My Commission Expires: 10/23/2026

Tami Jean Hull

Notary Public

Printed Name of Notary: Tami Jean Hull

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

Name of owner: The Studios Inc Owner's telephone number: 816-494-7134

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

Signer's telephone number: 816-289-3606

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-240-40-09-00-0-00-000</u>	<u>671</u>	<u>\$625,088.00</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.

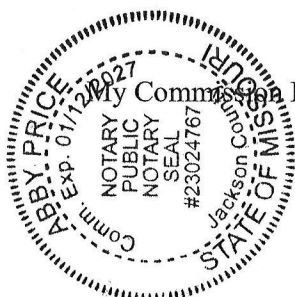
[Signature]
Signature of person signing for owner

Date: 1-18-2024, 2024

STATE OF MO)
) ss
COUNTY OF Jackson)

On this 18 day of January, 2024, before me personally appeared Bradley Nicholson, 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, 2024.



Expires: 01/12/2027

[Signature]
Notary Public
Printed Name of Notary: Abby Price

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

Name of owner: Sheila M. Thompson Owner's telephone number: 816-824-7130

Owner's address: 2029 Wyandotte St, Unit 409

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Sheila M. Thompson

State Basis of Legal Authority to Sign: Owner

Signer's telephone number: _____

Signer's mailing address: 2029 Wyandotte St, Unit 409, KC, MO 64108

If owner is an individual: _____ Single X Married

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

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-520-31-11-01-0-000-002</u>	<u>351</u>	<u>36,100</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.

Sheila Marie Thompson
Signature of person signing for owner

Date: 10/4, 2023

STATE OF Missouri)

) ss

COUNTY OF Jackson)

On this 4th day of October 2023, before me personally appeared Sheila Marie Thompson
to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 4th day of October, 2023.

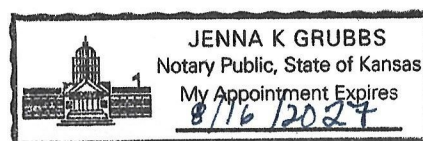
My Commission Expires:

8/16/2027

Jenna K. Grubbs

Notary Public

Printed Name of Notary: Jenna K. Grubbs



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

Name of owner: Tracks 215 LLC Owner's telephone number: 913.530.8992
Owner's address: 2100 Central St, Kansas 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: _____
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 type="checkbox"/>	Corporation	<input type="checkbox"/>	General Partnership
<input type="checkbox"/>	Limited Partnership	<input checked="" type="checkbox"/>	Limited Liability Company
<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Urban Redevelopment Corporation
<input type="checkbox"/>	Not-for-Profit Corporation	<input type="checkbox"/>	Other _____

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-520-35-09-00-0-00-000</u>	<u>430</u>	<u>\$200,416</u>
<u>29-520-35-03-00-0-00-000</u>	<u>431</u>	<u>\$115,900</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.

C. O'Keefe
Signature of person signing for owner

Date: 8/17, 2023

STATE OF Mo)
COUNTY OF Jackson) ss

On this 17 day of August, 2023, before me appeared Larkin O'Keefe, to me personally known, who being by me duly sworn did say that he/she/they is the Manager of Tracks 215 LLC 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 17 day of August, 2023.

My Commission Expires:



Catherine Coulter Stowe
Notary Public
Printed Name of Notary Catherine Coulter Stowe

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

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: Michael O'Neill

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 ☒ Married

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

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

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-520-21-04-01-0-00-000</u>	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.~~

Michael O'Neill
Signature of person signing for owner

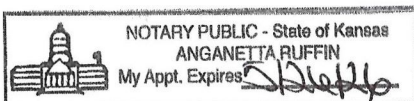
Date: 05 March, 2024

STATE OF KS)
COUNTY OF Jensen) ss

On this 5 day of MAR, 2024, 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 5 day of MAR, 2024.

My Commission Expires:



Anganetta Ruffin
Notary Public

Printed Name of Notary: Anganetta Ruffin

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

Name of owner: Treco Enterprises Owner's telephone number: _____
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 Authority to Sign: Company Officer
Signer's telephone number: 816 263 9807
Signer's mailing address: 819 E 19th St
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):

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

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

Thuy
Signature of person signing for owner

Date: 1/18, 2024

STATE OF MO)
COUNTY OF Jackson) ss

On this 18 day of January 2024, before me personally appeared Keith Hyer, 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 Jan., 2024.

My Commission Expires: 01/12/2027

Abby Price
Notary Public

Printed Name of Notary: Abby Price



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

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 Moss
State Basis of Legal Authority to Sign: Missouri, Property Manager & son
Signer's telephone number: 913-787-2681
Signer's mailing address: 7500 W 110th St, Overland Park, KS 66210 #500

If owner is an individual: _____ Single ☒ Married

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

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

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
<u>29-510-13-13-00-0-00-000</u>	<u>695 [704 E. 19th Street]</u>	<u>\$145,600</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.

Dylan Moss
Signature of person signing for owner

January 9th
Date: 01/09, 2025

STATE OF Missouri)
) ss
COUNTY OF Jackson)

On this 9 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 9th day of Jan, 2025.

My Commission Expires:

Andrea Joy Shultz
Notary Public

Printed Name of Notary: Andrea Joy Shultz



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

Name of owner: Troost Ave Enterprises LLC

Owner's telephone number: 310 954 7050

Owner's address: 4340 Warwick Blvd Kansas City, MO 64111

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Vahid Namini

State Basis of Legal Authority to Sign: MO

Signer's telephone number: 310 951-7050

Signer's mailing address: 4340 Warwick Blvd
KCMO 64111

If owner is an individual: _____ Single _____ Married

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

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-520-33-01-00-0-00-000</u>	<u>388 [2012 Main]</u>	<u>\$340,000</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.

[Signature]
Signature of person signing for owner

Date: oct/8/, 2024

STATE OF Missouri)
) ss
COUNTY OF Jackson)

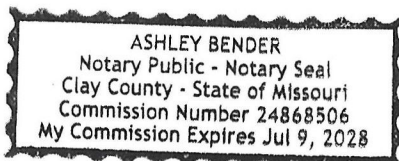
On this 8 day of October, 2024, before me personally appeared Vahid Mchdzadeh-Namini to me personally known to be the individual described in and who executed the foregoing instrument.

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

My Commission Expires: 07/09/2028

[Signature]
Notary Public

Printed Name of Notary: Ashley Bender



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

Name of owner: Troske Kaitlyn & Dana Owner's telephone number: 407 560 0728
Owner's address: 1535 Walnut St. #207 KCMO

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: _____

State Basis of Legal Authority to Sign: _____

Signer's telephone number: _____

Signer's mailing address: 4701 Wyoming St, KCMO 64112

If owner is an individual: X Single _____ Married _____

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

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-230-29-16-00-0-02-004</u>	<u>295</u>	<u>\$58,237.00</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.

[Signature]
Signature of person signing for owner

Date: 2/7/2024, 2024

STATE OF MO)
COUNTY OF Jackson) ss

On this 7 day of Feb, 2024, before me personally appeared Kaitlyn Troske,
to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 7th day of Feb, 2024.

My Commission Expires: 01/12/2027

[Signature]
Notary Public
Printed Name of Notary: Abby Price



Notary Public
Printed Name of Notary: Chiani Pearce

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

Name of owner: Tunnell Barry J Owner's telephone number: 816-721-0642

Owner's address: 1535 Walnut St Unit 101 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):

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-230-29-16-00-0-01-001</u>	<u>295</u>	<u>\$47,690.00</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.

[Signature]
Signature of person signing for owner

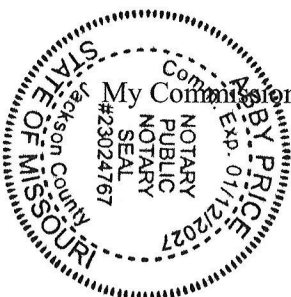
Date: September 21, 2023

STATE OF MO)
) ss
COUNTY OF Jackson)

On this 21 day of September 2023, before me personally appeared Barry Tunnell,
to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 21st day of September, 2023.

[Signature]
Notary Public
Printed Name of Notary: Abby Price



My Commission Expires: 01/12/2027

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

Name of owner: Twa Lofts LLC Owner's telephone number: 816-531-6885

Owner's address: PO Box 10485 Kansas City MO 64171

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Brad Nicholson

State Basis of Legal Authority to Sign: manager member

Signer's telephone number: 816-289-3606

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

<u>Tax Parcel Number(s):</u>	<u>Parcel Number(s) from Exhibit B:</u>	<u>Assessed Value(s):</u>
<u>29-S20-05-03-00-0-00-000</u>	<u>258</u>	<u>\$313,832.00</u>
<u>29-S20-05-04-01-0-00-000</u>	<u>261</u>	<u>\$104,312.00</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.

[Signature]
Signature of person signing for owner

Date: 1-18, 2024

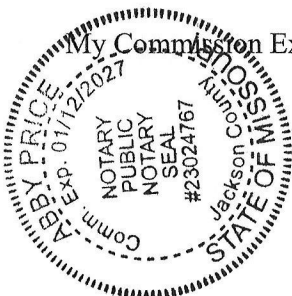
STATE OF MO)

) ss

COUNTY OF Jackson)

On this 18 day of January, 2024, before me personally appeared Bradley Nicholson, 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, 2024.



[Signature]
Notary Public
Printed Name of Notary: Abby Price