

## Corporate / Unincorporated Resolution Form

Account Registration:

Date: Apr 19, 2024

Account Number (10-digits):

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Branch #: 34649

Financial Advisor #: \_\_\_\_\_

Destination: ESTATES

Scan Title: CORPORATE RESOLUTION

- This form **must** be dated within the last **twelve** months for firm named processing.
- If this form is being used for certificate processing, this form must be dated within the last six months, and the certificate/stock power must be endorsed by someone **other than** the authorized individual who signed this form.

### A. Authorized Representative Acknowledgement Regarding Resolution of the Board of Directors

I, \_\_\_\_\_ (Name of officer signing resolution below), being duly constituted

\_\_\_\_\_ (Title of officer signing below) of \_\_\_\_\_

(Name of Legal Entity) a Legal Entity organized and existing under and by virtue of the laws

of the State of \_\_\_\_\_, (hereinafter called this Legal Entity), do hereby certify that the following is

a true and complete copy of resolutions duly adopted at a meeting of the Board of Directors (Trustee) of this Legal Entity, duly called and

held on \_\_\_\_\_, (date) at which time a quorum was present and voting; that said resolutions are still in full force

and effect and have not been rescinded; and that said resolutions are not in conflict with the Charter or By-laws of this Legal Entity.

Representing this Legal Entity, the undersigned be and they hereby are, fully authorized and empowered to transfer, endorse, sell, assign, and deliver any and all certificates of stock, bonds, debentures, notes, subscriptions, warrants, stock purchase warrants, evidences of indebtedness, or other securities now or hereafter registered in the name of or owned by this Legal Entity, and to make execute and deliver any and all written instruments necessary to effectuate the authority hereby conferred.

I certify that the individuals identified in section B shall have the full power and authority to accept, receipt for, exercise, release, reject, renounce, assign, disclaim, demand, claim and recover any legacy, bequest, devise, gift or other property interest or payment due or payable to or for the Legal Entity;

I certify that the mentioned individual(s) are authorized to transfer, endorse, etc. on behalf of the Legal Entity, hold the position or office set opposite their names in section B.

### B. Authorized Person(s)

Name and title of the individuals authorized to act on behalf of the Legal Entity as outlined in section A.

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Printed Name and Title

### C. Authorized Representative Acknowledgement and Indemnification

In consideration of Edward Jones accepting this form, the undersigned agrees and certifies that all information provided in this form is true and accurate, and will promptly notify Edward Jones if any of the information provided becomes inaccurate, misleading or incomplete. The undersigned acknowledges that all of the individuals listed in Section B are authorized representatives of the Legal Entity. Further, the undersigned acknowledges and agrees that the resolution identified in Section A above is still in full force and effect and has not been rescinded, modified or amended. This certification may be relied upon by Edward Jones until such time as Edward Jones is notified in writing of such change in the information or authority reflected in this document.

The undersigned agrees to release, indemnify and hold harmless Edward Jones, its affiliates, agents, principals and employees for any and all claims, damages, liability and losses (including attorney fees and expenses) arising out of or related to Edward Jones relying upon the information provided in this form.

Further, the undersigned acknowledges that, by this form, Edward Jones has advised the undersigned to consult a legal advisor if there are any questions regarding this form and its contents.

### D. Signature – Authorized Person

The authorized person signing this form must be an officer other than an officer(s) identified in section B.

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Date



USCORPRES-----