

BUSINESS WORLD MARKETS®

New account application

To apply for any of our WorldCurrency® accounts, MarketSafe® Certificates of Deposit or **non-FDIC insured** Metals Select® accounts, complete this application online or by hand using blue or black ink. To apply for other accounts, visit us online at everbank.com.

Submit application and required documentation



EverBank—Business Banking
PO Box 44060
Jacksonville, FL 32231

For new accounts funded by check, mail the check to:

EverBank—New Account Deposits
PO Box 11622
Newark, NJ 07101-9940

Notes for Non Residents of the United States:

Due to rules applicable to individuals located outside of the United States, EverBank does not offer its products and services to businesses in the following circumstances: 1) If the business has any authorized signers or beneficial owners located in the following countries: Austria, Belgium, Bulgaria, Croatia, Republic of Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden and the United Kingdom; 2) If the business has any authorized signers who are not presently residents of the United States.

As a result, if the business meets either of these circumstances, please do not proceed with this application or provide us with any personal information of any authorized signer or beneficial owner, as EverBank will be unable to process your request.

New account documents

We'll need a few things from you before we can open your account. Some documents are required for all accounts, and other items are account specific. So to help make this step a little easier, we've made the following list:

Needed for all accounts

- Certificate of Good Standing/Active Status

If physical address of business or non-profit organization is less than 3 months, provide a copy of 1 of the following:

- Utility bill
- Insurance bill
- Complete lease agreement
- Property tax statement

Needed for specific accounts

Provide all that apply.

Corporation

- Copy of Articles of Incorporation

Limited Liability Company (LLC)

- Copy of Operating Agreement and/or Articles of Organization

Partnership (General, Limited, or Limited Liability Partnership (LLP))

- Copy of Partnership Agreement

Sole Proprietorship

- Fictitious Name Registration (DBA)

Non-profit Organization

- Copy of Document of Origination (Articles of Incorporation, Partnership Agreement, etc.)
- Copy of most recent meeting minutes reflecting authorized officers
- Form 501(c)(3)

Business other

- Origination documentation filed with federal, state or local government



Download a PDF by clicking on the icon
or by visiting

For security purposes and to help the government fight terrorism and money-laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. For this reason, we will ask you for your name, address, date of birth, Social Security number or other Tax Identification Number, and other information that will allow us to identify you. We may also ask other questions or request other documents meant to verify your identity.

1. How did you hear about us?

Provide the referring person, publication, website, or offer referral code (If provided)

2. Choose business type

Select only one of the following account types:

- ☐ Corporation
 ☐ Limited Liability Company
☐ Partnership
 ☐ Sole Proprietorship
☐ Non-Profit Organization
 ☐ Business other (Specify organization type) _____

3. Tell us about the Business or non-profit organization

To meet government requirements for opening an account, please tell us:

Is the business organized/registered in the U.S.?

- ☐ Yes (If yes, provide the state or territory where the business is registered) _____
☐ No (If no, we cannot open the account)

Is the business entity a self-directed IRA? ☐ No ☐ Yes (If yes, we cannot open the account)

Name of business or organization (Account title)

Doing Business As (DBA) name (If applicable)

Is this business owned, directly or indirectly, by any other business entity? ☐ No ☐ Yes If yes, provide the following information for each entity. (If there are more than two entities that own, directly or indirectly, the business applicant, please include that information with this application)

Name of business entity	Percentage owned
-------------------------	------------------

If a domestic entity (i.e., organized/incorporated in the U.S.), provide the state of organization/incorporation: _____

If an international entity:

(a) Provide the country where organized/incorporated: _____

(b) Provide the U.S. state or territory where the business is located and registered in the U.S.: _____

Name of business entity	Percentage owned
-------------------------	------------------

If a domestic entity (i.e., organized/incorporated in the U.S.), provide the state of organization/incorporation: _____

If an international entity:

(a) Provide the country where organized/incorporated: _____

(b) Provide the U.S. state or territory where the business is located and registered in the U.S.: _____

All fields below must be completed.

Note: Business street address must be the physical operating location of the business, must be in the U.S. or territories only and cannot be a PO box.

Business street address (No PO boxes)	City	State	Country	ZIP
Business mailing address (If different from above)	City	State	Country	ZIP
U.S. Tax Identification Number	Business phone			
Business web address	Business email			
Year established	Number of employees			
Industry type or NAICS Code (If known)	Estimated gross annual revenue			

Provide a brief description of the business and any specialties that apply

Select all that apply:

This is a public company

This is a non-bank financial institution

This is a cash intensive business

This business owns or operates an ATM

This business has multiple locations

This is a home-based business

This is a jewels, precious metals and stone dealer

This business operates in foreign locations

This business expects to conduct international transactions

This business will receive more than \$10,000 cash in one transaction or two or more related transactions? ☐ No ☐ Yes

If yes, please note you must file IRS Form 8300 for these transactions. [\(Consult the IRS for specific requirements\)](#)

This business provides money services to customers (check cashing, money orders, traveler's checks, foreign exchange, prepaid cards, transmitting money in any form, wiring funds as a courtesy or for a fee, or other money services)?

☐ No ☐ Yes [\(If yes, we cannot open the account\)](#)

Does the business or the Tenant(s) of the business have any source of income related to the following industries: casino, gambling or gaming, marijuana related businesses/dispensaries, virtual currency Operator, Embassy or Consulates, Third Party Payment Processor? ☐ No ☐ Yes [\(If yes, we cannot open the account\)](#)

If this business is involved in real estate investment, please answer the following:

Is the business involved with any property off-shore? ☐ No ☐ Yes

4. Authorized signer(s)

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As a result, if the business meets either of these circumstances, please do not proceed with this application or provide us with any personal information of any authorized signer or beneficial owner, as EverBank will be unable to process your request.

Authorized signer*

Personal information

Business title: ☐ **President** ☐ **Vice President** ☐ **Partner** ☐ **Treasurer** ☐ **Member** ☐ **Other:** _____

Title First name M.I. Last name Suffix

Authorized signer Social Security number/ITIN Date of birth

Home phone** Mobile phone** Email

Are you a Beneficial Equity Owner who directly or indirectly owns 25% or more of the business. ☐ **Yes** ☐ **No**

Percentage owned: _____ (For more information on Beneficial Equity Owners, please see Section 5)

Address information

Residential address (No PO boxes) City State Country ZIP

Is your residential address also your mailing address? ☐ **Yes** ☐ **No** (If no, provide your mailing address below)

Mailing address (If different from above) City State Country ZIP

Security information

Your security code is a PIN, phrase or combination of letters and numbers that provides an added layer of security we use to help verify your identity. You'll be asked to provide your code when contacting us with questions about your account.

Security code must be 6-20 letters and/or numbers, no special characters. Do not use your Social Security number, date of birth or mother's maiden name.

Create your security code

Security code hint (Enter a keyword or phrase that may be used to help you recall your code)

Citizenship information

I am a: ☐ **U.S. citizen**

☐ **U.S. resident alien** (Please provide your country and passport #) _____

Are you authorized to work in the United States? ☐ **Yes** ☐ **No**

* Only Authorized Signer(s) can make account transactions or changes.

** By providing your phone number, you expressly consent and agree that EverBank, its affiliates, agents, subsidiaries, service providers or any other company acting on its behalf may contact you at that number for any reason about your accounts, now or in the future, by any method, including with an automatic telephone dialing system, prerecorded message, or text message, and including at a number for a cellular phone or other wireless device, regardless of whether you incur charges as a result. To learn more about our privacy practices, please go to everbank.com/legal/privacy.

Authorized signer*

If you have additional Authorized signers, complete the **Additional Authorized Signer form** as needed and return with application.

Personal information

Business title: ☐ **President** ☐ **Vice President** ☐ **Partner** ☐ **Treasurer** ☐ **Member** ☐ **Other:** _____

Title First name M.I. Last name Suffix

Authorized signer Social Security number/ITIN Date of birth

Home phone** Mobile phone** Email

Are you a Beneficial Equity Owner who directly or indirectly owns 25% or more of the business. ☐ **Yes** ☐ **No**

Percentage owned: _____ (For more information on Beneficial Equity Owners, please see Section 5)

Address information

Residential address (No PO boxes) City State Country ZIP

Is your residential address also your mailing address? ☐ **Yes** ☐ **No** (If no, provide your mailing address below)

Mailing address (If different from above) City State Country ZIP

Security information

Your security code is a PIN, phrase or combination of letters and numbers that provides an added layer of security we use to help verify your identity. You'll be asked to provide your code when contacting us with questions about your account.

Security code must be 6-20 letters and/or numbers, no special characters. Do not use your Social Security number, date of birth or mother's maiden name.

Create your security code

Security code hint (Enter a keyword or phrase that may be used to help you recall your code)

Citizenship information

I am a: ☐ **U.S. citizen**
☐ **U.S. resident alien** (Please provide your country and passport #) _____

Are you authorized to work in the United States? ☐ **Yes** ☐ **No**

* Only Authorized Signer(s) can make account transactions or changes.

** By providing your phone number, you expressly consent and agree that EverBank, its affiliates, agents, subsidiaries, service providers or any other company acting on its behalf may contact you at that number for any reason about your accounts, now or in the future, by any method, including with an automatic telephone dialing system, prerecorded message, or text message, and including at a number for a cellular phone or other wireless device, regardless of whether you incur charges as a result. To learn more about our privacy practices, please go to everbank.com/legal/privacy.

5. Control person and beneficial equity owners

Notes for Non Residents of the United States:

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As a result, if the business meets either of these circumstances, please do not proceed with this application or provide us with any personal information of any authorized signer or beneficial owner, as EverBank will be unable to process your request.

To help the government fight financial crime, Federal regulation requires us to obtain, verify, and record information about the "Beneficial Owners" of business applicants. Businesses can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

As defined by relevant Federal regulation, "Beneficial Owners" are:

- (1) an individual with significant responsibility for managing the business (for example, a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer), and
- (2) individuals that directly or indirectly own 25% or more of the business.

For purposes of completing this application, the individual who satisfies (1) above is the "Control Person" and the individuals, if any, who satisfy (2) above are the "Beneficial Equity Owners".

The number of individuals that satisfy the government's definition of "Beneficial Owner" may vary. Under Section 5b, depending on the factual circumstances, up to four Beneficial Equity Owners (but as few as zero) may need to be identified. Regardless of the number of Beneficial Equity Owners identified under Section 5b, you must provide the identifying information of the one Control Person under Section 5a. It is possible that in some circumstances the same individual might be identified under both sections (for example, the President of Acme, Inc. who also holds a 30% equity interest). Therefore, to complete this Section 5, you must provide the identifying information of at least one individual under Section 5a, and up to five individuals in total (that is, the one Control Person under Section 5a and up to four Beneficial Equity Owners that directly or indirectly own 25% or more of the business under Section 5b).

5a. Control Person information

If any Authorized Signer, previously identified in Section 4, is the Control Person, provide that person's name:

Control Person name

If the Control Person is not an Authorized Signer, provide the following information for the Control Person:

Control Person name

Title (e.g., CEO, CFO, COO)

Date of birth

Control Person Social Security number/ITIN

Business phone

Physical address (No PO boxes)

City

State

Country

ZIP

Is the Control Person also a Beneficial Equity Owner who directly or indirectly owns 25% or more of the business.

☐ Yes ☐ No

Percentage owned: _____

Citizenship information

The Control Person is a: ☐ U.S. citizen

☐ U.S. resident alien (Please provide country and passport #) _____

☐ Non-resident alien (Please provide country and passport #) _____

5b. Beneficial Equity Owner(s) Information

Are there any other Beneficial Equity Owners who directly or indirectly own 25% or more of the business who you did not previously identify in Section 4 (Authorized Signers) or Section 5a (Control Person). ☐ **Yes** ☐ **No** (If yes, please provide the following information for each such Beneficial Equity Owner.)

Note: Non-Profit applicants do not need to identify any Beneficial Equity Owners.

1.	Beneficial Equity Owner name			Date of birth	
	Beneficial Equity Owner Social Security number/ITIN		Business phone		Percentage owned
	Physical address (No PO boxes)	City	State	Country	ZIP
	Citizenship information				
	The Beneficial Equity Owner is a: <input type="radio"/> U.S. citizen				
	<input type="radio"/> U.S. resident alien (Please provide country and passport #)				
	<input type="radio"/> Non-resident alien (Please provide country and passport #)				
	Beneficial Equity Owner's country and passport #				
2.	Beneficial Equity Owner name			Date of birth	
	Beneficial Equity Owner Social Security number/ITIN		Business phone		Percentage owned
	Physical address (No PO boxes)	City	State	Country	ZIP
	Citizenship information				
	The Beneficial Equity Owner is a: <input type="radio"/> U.S. citizen				
	<input type="radio"/> U.S. resident alien (Please provide country and passport #)				
	<input type="radio"/> Non-resident alien (Please provide country and passport #)				
	Beneficial Equity Owner's country and passport #				
3.	Beneficial Equity Owner name			Date of birth	
	Beneficial Equity Owner Social Security number/ITIN		Business phone		Percentage owned
	Physical address (No PO boxes)	City	State	Country	ZIP
	Citizenship information				
	The Beneficial Equity Owner is a: <input type="radio"/> U.S. citizen				
	<input type="radio"/> U.S. resident alien (Please provide country and passport #)				
	<input type="radio"/> Non-resident alien (Please provide country and passport #)				
	Beneficial Equity Owner's country and passport #				
4.	Beneficial Equity Owner name			Date of birth	
	Beneficial Equity Owner Social Security number/ITIN		Business phone		Percentage owned
	Physical address (No PO boxes)	City	State	Country	ZIP
	Citizenship information				
	The Beneficial Equity Owner is a: <input type="radio"/> U.S. citizen				
	<input type="radio"/> U.S. resident alien (Please provide country and passport #)				
	<input type="radio"/> Non-resident alien (Please provide country and passport #)				
	Beneficial Equity Owner's country and passport #				

6. Choose EverBank World Markets® account(s)

Select account(s) and provided deposit amount(s) for each.

WorldCurrency Access® Deposit account^{1, 2}

Specify your currency and deposit amount. (\$2,500 minimum per account)

Currency	Deposit (in U.S. \$) ³
1.	
2.	
3.	
Total deposit	

WorldCurrency® Certificate of Deposit¹ (3-month term)

Specify your currency and deposit amount. (\$10,000 minimum per CD)

Currency	Deposit (in U.S. \$) ³
1.	
2.	
3.	
Total CD deposit	

WorldCurrency® CD Basket¹ (3-month term)

Specify your Basket and deposit amount. (\$20,000 minimum per CD)

Basket	Deposit (in U.S. \$) ³
1.	
2.	
Total CD Basket deposit	

MarketSafe® Certificate of Deposit⁴ (\$1,500 minimum)

Series	Issue date	Deposit (in U.S. \$) ³
1.		
2.		
Total CD deposit		

1. EverBank, N.A. is an FDIC insured national bank. The standard FDIC insurance limit of \$250,000 applies per depositor, per insured depository institution for each account ownership category. FDIC insurance covers against loss due to the failure of the institution, but not due to fluctuations in currency values. Due to the nature and volatility of the foreign exchange market, the values of currencies are subject to wide fluctuations against the U.S. dollar. Foreign currency denominated instruments will entail significant risk exposure to adverse movements of the foreign currency relative to the U.S. dollar. The amount of deposit insurance available for products denominated in foreign currency will be determined and paid in the United States dollar equivalent of the foreign currency, as the value of such currency is determined by the FDIC under its regulations, on the institution's date of default. You can lose money, including principal, due to currency fluctuations. Please only deposit money that you can afford to risk, and as part of a broadly diversified strategy.
2. WorldCurrency Access Deposit Accounts may be subject to a monthly maintenance fee. Any monthly maintenance fee will be disclosed on the rate sheet or on a separate disclosure that we will provide to you at least 30 days prior to imposing or changing any monthly maintenance fee, and will be charged in the Foreign Currency in which the applicable Access Account is denominated.
3. Accounts opened with foreign currency must meet the U.S. dollar equivalent minimum opening balances.
4. MarketSafe® CDs, if held to the Maturity Date, will have a guaranteed return of the deposited principal ("Principal Protection"). Principal Protection only applies to CDs held to maturity. In the event of EverBank, N.A.'s failure, all of your deposits with EverBank, N.A. (including this MarketSafe CD) will be aggregated and insured by the FDIC up to the \$250,000 maximum. Except in the event of death or adjudication of incompetence of the holder of the MarketSafe CD, you may not withdraw any part of the CD prior to maturity. If you do withdraw early, even if that is due to the death or adjudicated incompetency of the holder of the CD, you will NOT receive Principal Protection and will NOT benefit from any upside potential of the Reference Index, experiencing a loss of principal as an early withdrawal penalty. See the Specific Terms–MarketSafe Certificate of Deposit Accounts section in your Account Terms, Disclosures and Agreements Booklet for more information.

9. Tell us about the business service needs

Will this account send or receive domestic wires? ☐ Yes ☐ No

Will this account send or receive foreign wires? ☐ Yes ☐ No

If yes, please specify which countries: _____

What is the purpose for this account?

General operating account

Accounts payable only

Accounts receivable only

Payroll only

Savings—general

Savings—specific purpose

Other:(Describe) _____

To help us meet our client due diligence obligations under federal law, please tell us:

a) What is the source of future business deposits?

Sale of property

Rent proceeds

Business revenue

Other:(Describe) _____

b) If the total initial deposit is \$500,000 or greater, what is the source of the initial business deposit?

Sale of property

Rent proceeds

Business revenue

Other:(Describe) _____

10. Agreements and certifications

By signing section 11 or 12, opening or otherwise using an EverBank account, EverBank World Markets or EverBank

Metals Select account, I understand and agree that EverBank, National Association ("EverBank") will rely on the veracity and completeness of the information on this application in opening the requested account(s). I hereby certify, to the best of my knowledge, that the information provided in the application and any accompanying documentation, as well as the statements in the Certificate of Authority and Resolution set forth in the Business and Non-Personal Account Terms, Disclosures, and Agreements Booklet, are true, complete, and accurate and that I will promptly notify EverBank of any material change in such information or statements. I agree/understand and certify to EverBank that:

- I have read and agree to be bound by the terms and conditions of the account or services as set forth in the Business and Non-Personal Account Terms, Disclosures and Agreements Booklet, the Deposit Account Fee Schedule, Online Banking Service Agreement, and any other disclosures or addenda related to the accounts or services I have requested on this application, and to which I give my consent to EverBank opening and/or providing, each of which may be amended from time to time.
- I authorize EverBank to obtain verifications on me as an individual, in connection with the account application and any other account applications made by the business, and I acknowledge that EverBank requests this information to help verify individuals' identities, to reduce fraudulent accounts, to prevent access to financial information and accounts by unauthorized persons, and for other legitimate business reasons. Further, I authorize EverBank to communicate either explicitly or implicitly, to any co-applicant and to any co-owner, director, officer, or employee of the business if the information obtained from any such verification or report causes, in whole or in part, EverBank to decide to deny the account application for the business.
- I authorize EverBank to make or have made investigative inquiries it deems appropriate in connection with its determination to open, renew, update, maintain, or collect on the account(s) applied for on this application.
- I understand that EverBank cannot honor any request to require multiple authorized signers for any transaction on any account.
- I understand that all information I supply when applying for an account or requesting new or additional products or services becomes property of EverBank and will not be returned, except as required by law.

By signing section 11 or 12, opening or otherwise using an EverBank World Markets account, including without limitation any WorldCurrency Access Deposit Account, WorldCurrency Certificate of Deposit Account, or WorldCurrency CD Basket denominated in a foreign currency, or any, MarketSafe Certificate of Deposit Account, or MarketSafe Cash Account, I agree/understand and certify to EverBank that:

- **I have read the WorldCurrency Account Terms and Conditions and understand that acquiring Foreign Currencies and Currency Exchanges are high risk transactions potentially subject to substantial loss, including the loss of the principal in my account, and that Non-Deliverable Currencies ("NDCs") present higher risk to me than Foreign Currencies from other countries. I represent and agree that I am willing and financially able to undertake these risks, and that I accept these risks and hold EverBank harmless for any losses I may incur as a result of these high-risk transactions. I also agree and understand that the disclosures in this Application are in addition to, and do not replace, the Business and Non-Personal Account Terms, Disclosures and Agreements Booklet for my deposit accounts or any other disclosures that I am provided regarding foreign currency transactions.**

- I understand that my EverBank deposits are insured by the FDIC for up to the standard maximum deposit insurance amount. FDIC insurance covers against loss due to the failure of the institution, but does not insure against any loss in value of my WorldCurrency Account due to Foreign Currency value fluctuations. The amount of FDIC deposit insurance available for a WorldCurrency Account will be determined and paid by the FDIC in the U.S. Dollar equivalent of the Foreign Currency in which the account is denominated. If applicable, the FDIC will determine the U.S. Dollar equivalent value of such Foreign Currency in the manner set forth in the FDIC's regulations as of the date of default. I agree that my decision to open foreign currency denominated accounts is not based upon any advice, recommendation, or suggestion by EverBank. I accept responsibility for and understand that my decisions and bank account strategies are at my sole discretion and risk.

By signing section 11 or 12, opening or otherwise using a non-FDIC Insured EverBank Metals Select account, I agree/ understand that:

- I understand that EverBank Metals Select products **are not deposits, are not insured by the FDIC, are not bank or government guaranteed, and may lose value. In addition, I understand that EverBank Metals Select products** are subject to significant risk, including the possible loss of principal due to market price movement. Purchasing and owning metals involves degrees of risk that makes it unsuitable for certain individuals. I have carefully considered the suitability of this purchase, and any subsequent purchase or sale that I may make, before making any decision.
- I have read and agree to be bound by the terms and conditions of the requested account(s) as set forth in the EverBank Metals Select Terms and Conditions as may be amended from time to time. I agree that my decision to invest in precious metals is not based upon any advice, recommendation, or suggestion by EverBank. I accept responsibility for and understand that my investment decisions are at my sole discretion and risk.

Statement of Liability for Owners of Sole Proprietorships, Single-Members LLCs, and General Partnerships. By signing sections 11 or 12, opening or otherwise using an EverBank account, in consideration of advances, extensions of credit, and other instruments for payment of money made to or for the Account(s), I unconditionally guarantee to EverBank the prompt payment of claims of every nature and description of EverBank against the Company (including those arising out of or in any way connected with any instrument deposited with or purchased by EverBank).

The undersigned agrees that we, EverBank, in our sole discretion, may accept documents that you have signed and sent to us by electronic means, like fax, email, or other file transmittal processes we might offer. By sending us any such document by electronic means, the undersigned agrees that we may rely on it and on the signature, and that the document is binding on the signer even if the original signed document is not delivered to us.

Backup withholding certifications. For federal tax purposes, a U.S. person includes an individual who is a U.S. citizen or U.S. resident alien; a U.S. partnership, corporation, or company; and domestic trusts and estates. The following certifications relate to this tax status and reporting obligations applicable to EverBank. Non-U.S. persons do not make these certifications and should check the box below where indicated and provide the corresponding additional documentation.

Please note that these certifications are being made by the Business applicant and relate to the Business applicant's information and tax status.

Under penalties of perjury, I certify that:

1. The taxpayer identification number I have given on this application is correct; and
2. I am a U.S. citizen or other U.S. person; and
3. I am not subject to backup withholding because:
 - (a) I am exempt from backup withholding, or
 - (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or
 - (c) the IRS has notified me that I am no longer subject to backup withholding; and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Check this box if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return

Check this box if you are not a U.S. person. Non-U.S. persons (that is, persons who are not a U.S. citizen, U.S. resident alien, or other U.S. person) will need to provide EverBank with the applicable IRS Form W-8 (to certify foreign status; electronic copies will not be accepted), a copy of your valid passport and proof of residence.

11. Certification of authority and resolution–application and effect

Part 1. Application: The Certificate of Authority and Resolution set forth in the Business and Non-Personal Account Terms, Disclosures and Agreements Booklet (the “Certificate”) and the Signature Card in section 12 apply to all EverBank World Markets accounts that the Business maintains at EverBank now or in the future (the “Account(s”).

Part 2. Effect: The Certificate supersedes any prior corporate or other resolutions executed by the Business and related to the Account(s). The Certificate and the Signature Card apply to all transactions and agreements related to the Account(s) between the Business and EverBank, even if entered into by the Business prior to the adoption of the Certificate (which prior transactions and agreements are hereby ratified in all respects), and shall remain in full force and effect in all respects until the close of business on the third Business Day after EverBank receives written notice of the modification or revocation thereof at EverBank’s offices located at: PO Box 44060, Jacksonville, FL 32231. Any new Certificate or Signature Card must be approved by EverBank, in its sole discretion, before it will be effective.

By signing below, you understand and agree that you are executing the Backup Withholding certification in section 10 of this account application, and the Certificate of Authority and Resolution set forth in the Business and Non-Personal Account Terms, Disclosures, and Agreements Booklet.

The signatories below certify that they are duly authorized by the business applicant to establish the Account(s) and to sign on the business applicant’s behalf. Each signatory must be a corporate officer, managing member, general partner, or other individual authorized by the business applicant to represent the business applicant in connection with the Account(s).

Note: The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

Part 3: Required Signatories for the Business

Corporation–Two corporate officers (president and one other) together and the corporate secretary

Limited Liability Company (manager managed)–All managers



Limited Liability Company (member managed)–All members

General Partnership–All partners

Limited Partnership–General partner

Sole Proprietorship–Owner’s signature

Non-Profit Organization and Homeowners’ Association–President and the corporate secretary

	_____	_____	_____	_____
	Signature	Print name	Title	Date
	_____	_____	_____	_____
	Signature	Print name	Title	Date
	_____	_____	_____	_____
	Signature	Print name	Title	Date
	_____	_____	_____	_____
	Signature of Secretary	Print name	Date	

12. Signature card—authorized signer(s) for the business

All individuals authorized to control the Account(s) must sign below if the business applicant would like these individuals to make account transactions or changes.

I, the undersigned Authorized Signer, hereby acknowledge that I have read this account application, the Business and Non-Personal Account Terms, Disclosures and Agreements Booklet, and all related documents, disclosures, and agreements, and I agree to be bound by the terms, conditions and restrictions therein.



Signature	Print name	Title	Date
Signature	Print name	Title	Date
Signature	Print name	Title	Date
Signature	Print name	Title	Date
Signature	Print name	Title	Date
Signature	Print name	Title	Date
Signature	Print name	Title	Date
Signature	Print name	Title	Date

For bank use only:

Date	FC number	Associate name (Print first & last name)	Associate number
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