

**BUSINESS WORLD MARKETS®** 

# **New account application**

To apply for any of our WorldCurrency<sup>®</sup> accounts, MarketSafe<sup>®</sup> Certificates of Deposit or **non-FDIC insured** Metals Select<sup>®</sup> 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 a	licking on the icor
or by visiting	

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Percentage owned

Percentage owned

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.?

- $\bigcirc$  Yes (If yes, provide the state or territory where the business is registered) \_
- $\bigcirc$  No (If no, we cannot open the account)

Is the business entity a self-directed IRA? O No O 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? O No O 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

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

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 ph	one		
Business web address		Business em	nail		
Year established		Number of e	employees		
Industry type or NAICS Code (If known)		Estimated g	ross annual rev	enue	

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

Select all that apply:	
This is a public company	This is a home-based business
This is a non-bank financial institution	This is a jewels, precious metals and stone dealer
This is a cash intensive business	This business operates in foreign locations
This business owns or operates an ATM	This business expects to conduct international transactions
This business has multiple locations	

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

# 4. Authorized signer(s)

#### 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.

	nformation le: () President () Vice	Dracidant O	artnor 🔿 Tro		bor Other	
dusiness titi	e. O President O vice				iber () Other	
Title	First name		M.I.	Last name		Suffix
Authorized	l signer Social Security num	iber/ITIN	Date of birt	th		
Home phor	ne**	Mobile phor	1e**	Email		
Are you a E	Beneficial Equity Owner wh	no directly or indir	ectly owns 25%	or more of the bu	isiness. 🔿 <b>Yes</b> 🔿	No
Percent	tage owned:		(For more inform	nation on Beneficial E	auity Owners, please	see Section 5)
Address in	formation					
<u></u>						
Residential	address (No PO boxes)	City		State	Country	ZIP
	dential address also your ma	·	Yes 🔿 No (If		,	ZIP
		·	Yes 🔿 No (If		,	ZIP
ls your resic		ailing address? ()	Yes 🔿 No (If		,	ZIP
ls your resic Mailing	dential address also your mo	ailing address? ()	Yes 🔿 No (If	no, provide your mai	ling address below)	
ls your resic Mailing Security in	dential address also your ma address (If different from abo	ailing address? () ve) City		no, provide your mai	ling address below)	ZIP
ls your resid Mailing <b>Security in</b> Your securi	dential address also your ma address (If different from abo iformation	ailing address? () ve) City combination of let	ters and numbe	no, provide your mai	ing address below) Country In added layer of s	ZIP ecurity we us

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.

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#### Authorized signer\*

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

Title	First name		M.I.	Last name		Suffix
Authorized si	gner Social Security numk	per/ITIN	Date of bi	rth		
Home phone	**	Mobile phone	**	Email		
Are vou a Be	neficial Equity Owner who	directly or indired	tly owns 25%	or more of the bu	usiness () Yes ()	No
	ge owned:	,			Equity Owners, please	
Percenta	ge owned:	,				
Percenta Address info	ge owned:	,				
Percenta Address info	ge owned:	City	(For more infor	mation on Beneficial	Equity Owners, please	e see Section
Percenta Address info Residential ad	ge owned: prmation ddress (No PO boxes)	City ailing address? ()	(For more infor	mation on Beneficial	Equity Owners, please	e see Section

Create your 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)

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

#### **Citizenship information**

l am a:	Ο	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.

<sup>\*\*</sup> 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.

#### 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 Autho	rized Signer, provide the following	g information for t	he Control Person:	
Control Person name	Title (e.g., CEO, CFO, COO)	Date of birt	th	
Control Person Social Security numb	er/ITIN Business p	ohone		
Physical address (No PO boxes)	City	State	Country	ZIP
ls the Control Person also a Beneficia 〇 <b>Yes 〇 No</b>	Equity Owner who directly or indi	rectly owns 25% or	more of the busin	ess.
Percentage owned:				
Citizenship information				
The Control Person is a: 🔿 U.S. citiz	en			
🔿 U.S. resid	lent alien (Please provide country and	passport #)		
○ Non-res	ident alien (Please provide country an	d 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). O Yes O 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.

D	Beneficial Equity Owner name			Date of birth	
Ē			<u>Pupippos abara</u>		
В	Beneficial Equity Owner Social Secu	irity number/111N	Business phone	Percentage o	wned
P	Physical address (No PO boxes)	City	State	Country	ZIP
	Citizenship information				
Т	The Beneficial Equity Owner is a: O				
	0		(Please provide country and passp <b>1</b> (Please provide country and pass		
	0		r (Fledse provide country and pass	port #)	
		Beneficial Equity C	Owner's country and passport	t #	
2 	Beneficial Equity Owner name			Date of birth	
_					
В	Beneficial Equity Owner Social Secu	rity number/ITIN	Business phone	Percentage o	wned
P	Physical address (No PO boxes)	City	State	Country	ZIP
C	Citizenship information				
Т	The Beneficial Equity Owner is a: ()	U.S. citizen			
	0	U.S. resident alien	(Please provide country and passp	ort #)	
	0	Non-resident alier	<b>1</b> (Please provide country and pass	port #)	
		Beneficial Equity C	)wner's country and passport		
3.		, ,	, , , ,		
	Beneficial Equity Owner name			Date of birth	
Ē			Rusiness phone		wood
D	Beneficial Equity Owner Social Secu	inty number/min	Business phone	Percentage o	whed
P	Physical address (No PO boxes)	City	State	Country	ZIP
	Citizenship information				
Т	The Beneficial Equity Owner is a: 🔿	U.S. citizen			
			(Please provide country and passp		
	0	Non-resident alier	I (Please provide country and pass	port #)	
			· (	port #)	
		Beneficial Equity C	Owner's country and passport	- 	
		Beneficial Equity C		t #	
	Beneficial Equity Owner name	Beneficial Equity C		- 	
B	Beneficial Equity Owner name Beneficial Equity Owner Social Secu			t #	wned
B			Owner's country and passport	Date of birth	wned ZIP
B B B P	Beneficial Equity Owner Social Secu	rity number/ITIN	Owner's country and passport	t # Date of birth Percentage o	
B B P C	Beneficial Equity Owner Social Secu Physical address (No PO boxes)	rity number/ITIN City	Owner's country and passport	t # Date of birth Percentage o	
B P C	Beneficial Equity Owner Social Secu Physical address (No PO boxes) Citizenship information The Beneficial Equity Owner is a: ()	rity number/ITIN City <b>U.S. citizen</b>	Owner's country and passport	t # Date of birth Percentage o Country	

Beneficial Equity Owner's country and passport #

### 6. Cash management account

7.

Opening a cash management account is required in order to open and maintain a foreign currency or **non-FDIC insured** precious metals account. Our Asset Manager Service links your cash management account with your other World Markets<sup>®</sup> account(s) in order to facilitate transactions.

Please confirm your consent to open a Business Interest Checking Account opened for you by checking the box below.

Cash management account			Deposit amount (Require
) Business Interest Checking Account (No	minimum required)		
Would you like either of the following:	Visa® Debit card	Complimentary checks	
		Total deposi	t
hoose EverBank World Marke	ts account(s)		
elect account(s) and provided deposit an	nount(s) for each.		
WorldCurrency Access® Deposit accoun	<b>t</b> <sup>1, 2</sup>		
WorldCurrency Access® Deposit accoun Specify your currency and deposit amount		account)	
		account)	Deposit (in U.S. \$) <sup>3</sup>
Specify your currency and deposit amou		account)	Deposit (in U.S. \$) <sup>3</sup>
Specify your currency and deposit amou		account)	Deposit (in U.S. \$) <sup>3</sup>

#### WorldCurrency® Certificate of Deposit<sup>1</sup>(3-month term)

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

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

**Total 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.
- 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.

#### WorldCurrency<sup>®</sup> CD Basket<sup>4</sup> (3-month term)

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

Basket	Deposit (in U.S. \$) <sup>5</sup>
1.	
2.	
	Total CD Basket deposit

#### MarketSafe® Certificate of Deposit<sup>6</sup> (\$1,500 minimum)

Series	Issue date	Deposit (in U.S. \$) <sup>5</sup>
1.		
2.		
	Total CD deposit	

#### Note: Metals Select products within World Markets portfolios are not FDIC-insured, are not deposits, and may lose value.

#### Non-FDIC Insured Metals Select® account<sup>7</sup>

EverBank reserves the right to round down to the nearest whole unit to account for the metals purchase.

count/metal type	Initial funding (in U.S. \$)
Unallocated (\$5,000 minimum for Unallocated Accounts)	
○ Gold ○ Silver ○ Platinum ○ Palladium	
Allocated coins (\$7,500 minimum for Allocated Accounts)	
⊖ Gold ⊖ Silver ⊖ Platinum ⊖ Palladium	
(Specify coin type)	
(Specify coin type) Would you like your metals to be: (Delivery and storage fees apply)	

- 4. 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.
- 5. Accounts opened with foreign currency must meet the U.S. dollar equivalent minimum opening balances.
- 6. 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.
- 7. Metals Select products:

Are Not FDIC Insured	Are Not Bank or Government Guaranteed	Are Not Deposits	May Lose Value	
rchasing or owning metals involves degr	ees of risk that make them unsuitable for certain individuals. You	should carefully consider the suitabil	lity of such metals before making	

Purchasing or owning metals involves degrees of risk that make them unsuitable for certain individuals. You should carefully consider the suitability of such metals before making any decision. Metals Select transactions will not occur until your account is approved and sufficient funds are available. Please refer to the Specific Terms–Metals Select Accounts section in your Account Terms, Disclosures and Agreements Booklet for additional information.

# 8. Fund account(s)

9.

#### Select one of the following funding options.

Write a check payable to the busi			
(Mail to: EverBank–New Account Deposit			
Wire funds: OU.S. dollars OF			
Preferred contact: O <b>Phone:</b>			
Transfer funds from my existing E	verBank Account: (Account numb	er)	
Total application deposit (Funds will be	distributed as instructed in section 6-	7)	
Tell us about the business	service needs		
Will this account send or receive dom	estic wires? () Yes () No		
Will this account send or receive foreig	an wires? () Yes () No		
If yes, please specify which countri			
What is the purpose for this account?			
		Accounts receivable only	Payroll only
	Savings-specific purpose		
To help us meet our client due diligenc	e obligations under federal law, p	please tell us:	
a) What is the source of future busin	ess deposits?		
Sale of property	Rent proceeds	Business revenue	
Other: (Describe)			
b) If the total initial deposit is \$500,00	00 or greater, what is the source	of the initial business deposit?	
Sale of property	Rent proceeds	Business revenue	

#### **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 <u>non-FDIC Insured</u> EverBank Metals Select account, l agree/understand and certify to EverBank 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

Sig	gnature	Print name	Title	Date
Sig	nature	Print name	Title	Date
-	nature	Print name	Title	Date
اللہ ا	gnature 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 number