

# Certificate of Corporate Authorization to Transfer (General)

charles SCHWAB

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1-800-968-5504

Select type of organization:

Corporation  Limited Liability Company  Non-Incorporated  Partnership

I, (print name) \_\_\_\_\_, being the Secretary (or person performing similar functions) of \_\_\_\_\_, an organization organized and existing under and by virtue of the laws of the state of \_\_\_\_\_,

certify that the following is a true and complete copy of resolutions duly adopted by the Board of Directors (or, if no Board of Directors, board of managers or similar governing body exists, the person(s) duly authorized by the charter document or governing agreement of this organization), duly called and held on \_\_\_\_\_, at which a quorum was present and voting that said resolutions are still in full force and effect and have not been rescinded; and that said resolutions are not in conflict with the charter, bylaws or governing agreement of this organization.

RESOLVED: That any of the authorized agents designated below be, and they hereby are, fully authorized and empowered to transfer, convert, endorse, sell, assign, set over and deliver any and all shares of stock, bonds, debentures, notes, subscription warrants, stock purchase warrants, evidences of indebtedness or other securities now or hereafter standing in the name of or owned by this organization and to make, execute and deliver, under the corporate seal of this organization (if applicable), any and all written instruments of assignment and transfer necessary or proper to effectuate the authority hereby conferred.

## Signature(s) Required

Authorized Agent (Print name)

X

Authorized Agent's Signature

Date

Authorized Agent (Print name)

X

Authorized Agent's Signature

Date

Authorized Agent (Print name)

X

Authorized Agent's Signature

Date

Authorized Agent (Print name)

X

Authorized Agent's Signature

Date

FURTHER RESOLVED: That whenever there shall be annexed to any instrument of assignment and transfer, executed pursuant to and in accordance with the foregoing resolution, a certificate of the Secretary or an Assistant Secretary of this organization in office at the date of such certificate, and such certificate shall set forth these resolutions and shall state that these resolutions are in full force and effect and shall also set forth the names of the persons who are then officers of this organization, then all persons to whom such instrument with the annexed certificate shall thereafter come, shall be entitled, without further inquiry or investigation and regardless of the date of such certificate, to assume and to act in reliance upon the assumption that the shares of stock or other securities named in such instrument were therefore duly and properly transferred, endorsed, sold, assigned, set over and delivered by this organization, and that with respect to such securities the authority of these resolutions and of such officers is still in full force and effect. I further certify that the following is a true and correct list of the present officers of this organization (print officers' names below):

President	Treasurer
Vice President	Secretary

## Signature X Required

Signature of Secretary (or person performing similar functions) of organization

Date

IF NO CORPORATE SEAL, PLEASE HAVE  
SECRETARY'S SIGNATURE NOTARIZED.



<p>State of _____, County of _____</p> <p>subscribed and sworn to (or affirmed) before me, _____ (here insert name and title of the notarizing officer), on _____, by _____ who personally appeared and is personally known to me (or 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 who 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.</p> <p>WITNESS my hand and official seal.</p> <p>*Notaries outside of California should attach the appropriate notarizing declaration in lieu of the above.</p> <p>Notary Public _____ Expiration Date _____</p>	<p>(SIGNATURE AND SEAL OF NOTARY)</p>
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FOR CHARLES SCHWAB USE ONLY:

Branch Office and Account Number																				
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