

Fidelity® Brokerage Business Account Certification

Use this form to update authorized officers, individuals, or partners on your existing Fidelity Business account. Do NOT use this form to open a new non-managed business account, for an Investment Club Cash Account, or for a Fidelity Mutual Fund Only Business Account. Go to Fidelity.com/forms to download the appropriate form. Type on screen or fill in using CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of the relevant page.

Helpful to Know

- Important: This designation supersedes any previous designation. ALL new and remaining Authorized Individuals, Managers, or Partners MUST provide his or her information in Sections 2 and 3, and sign in Section 5.
- Section 4 should be used to identify any entity aside from the business identified in Section 1 (the "Business") that is authorized to transact business in the account. Additional documentation will be required if you complete this section. Please call Fidelity for more information.
- If the Authorized Individuals/Managers/Partners on the account are changing and the account has checkwriting and/or options trading privileges, a new *Checkwriting* form and/or *Options Application* must be completed and returned with this form. Go to *Fidelity.com/forms* to download the appropriate form(s).

Signature and Additional Documentation Requirements

• For Corporations:

- This form must be signed by ALL Authorized Individuals AND a certifying officer, other than those listed in Sections 2 and 3, unless there are no other officers of the corporation aside from those listed.
- You must imprint a Corporate Seal in the space provided OR include a copy of the filed Articles of Incorporation with this form. A copy of the Articles of Incorporation is required if this is a foreign corporation.

• For LLCs:

- The form must be signed by ALL Managers authorized by agreement to transact business on the behalf of the LLC. If Member-Managed, then all Members must sign.
- You must provide legal documentation (such as an Operating Agreement) identifying the name of the LLC, by whom the LLC is managed, and signatures, along with proof of filing with a state or foreign country.

• For Partnerships:

- This form must be signed by ALL General Partners authorized by agreement to transact business on behalf of the Partnership. If there are no General Partners, all Partners must sign.
- You must provide a copy of the pages of the Partnership agreement that provide the official name of the Partnership, the name(s) of the General Partner(s), and all signatures.

• For Unincorporated Businesses/Sole Proprietorships:

- This form must be signed by ALL Authorized Individuals AND a certifying owner or officer, other than those listed in Sections 2 and 3, unless there are no other owners or officers aside from those listed, and the signature must be notarized.
- No additional documentation is required.

1. Business Information

	Account Number				
	Business Name Enter full entity name as evider	nced by the relevant formation do	ocument (e.g., partnership a	agreement, articles of incorporatio	n).
	Taxpayer ID Number U.SIssued ID ONLY	Primary Phone	State/Co	untry of Organization	
	Date of Adoption of Resolutions MM DD YYYY	Provide the date that the	Resolutions in Section	n 6 of this form were duly ad	onted by the
		governing body of the Bi		re or and form were daily da	opiou 2) 1.10
	For corporations only, indicate the	type of entity:			
	☐ Publicly Traded ☐ Privately F	Held			
Business Permanent	t Address This is the legal address	s used for tax reporting.			
	Street Address				
	City	State/Province	ZIP/Postal Code	Country	

Business Information continues on next page.



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City	State/Province	ZIP/Postal Code	Country
zed Individual/N lanager/Partner (new a	lanager/Partner Req	uired to be comp	oleted for each Authorized

individual, you can do so in Section 3. In this section, "you" refers to the person whose personal information is being provided.

Enter full first and last name as evidenced by a government-issued, unexpired document (e.g., driver's license, passport, permanent resident card).

Mobile phone number and email are required for account security, transactional alerts, and delivery of other communications.

•	First Name	Middle Nam	ne	Last Name		
	Date of Birth MM DD YYYY	Social Sec	urity/Individual Taxpayer II	O Number*	*U.SIssued	ID ONLY
•	Mobile Phone		Secondary Phone			
	Email					

By signing this form, you agree to conduct business with Fidelity electronically and to the electronic delivery of all account-related documents and communications. You consent to Fidelity's use of your email and/or mobile number to message, call, or text you for this purpose. Message and data rates apply; frequency may vary. For help with texts, reply HELP. To opt out of texts, reply STOP. You may also update your contact information at any time through your profile on *Fidelity.com*. Please look for an email to confirm your information and the terms of this consent.

Residential Address (where you live) This is your legal address used for tax reporting.

Street Address			
City	State/Province	ZIP/Postal Code	Country

Mailing Address This may be a PO box, drop box, or c/o location

is may be a r O box, drop box, or O o location.						
\square Same as residential address \triangleright Default if no other information indicated below.						
Mailing Address						
City State/Province ZIP/Postal Code Country						

Authorized Individual/Manager/Partner continues on next page.

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Citizenship									
Indicate your ▶		U.S. citizen Do not	t complete the	fields below. Sk	ip to Incom	ne Source.			
citizenship status.		Foreign citizen Info	rmation in this	box must be co	mpleted.				
		Country of Citizenship							
Choose one.		Permanent U.S. res	ident No	onpermanent U.	S. resident	☐ Nonres	ident c	of U.S.	
		vernment Identifica							
	ID N	Number			Country	of Issuance			
Unexpired ID must include reference number and photo. Attach copy of ID.	ID Issuance Date MM DD YYYY ID Expiration Date MM DD YYYY								
, -		Passport Number	Permaner	nt Resident Iden	tifier	Other Gover	nment-	Issued ID Number	
Income Source Inde	ustry r	regulations require ι	us to ask for this	s information.					
Check one and provide information.	_	Employed Self	f-employed		Emplo	yer Leave blank i	f self-emr	bloved	
•		Оссираноп			Zimpio	ye. Zeave ziaiik i	oon omp	noyea.	
		Employer Address							
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		Retired Not employed Source of Income Pension, investments, spouse, etc.							
Associations									
a person associated a member firm, you obligated to receive onsent from that firm. Fidelity has existing consent agreements	an in criter state association	stry Regulatory Auth nmediate family mer ria, provide the comp ements for this accou ciated person's emp	ority (FINRA), a mber residing in pany's name and unt, and any acc	municipal secur the same house d address below ounts you choos	ities dealer, ehold of sor . Informatic se to have c	or other finan meone who m on (including d	cial inst eets the uplicate	ember firm, the Finar titution, or are the sp e aforementioned er e copies of confirmat ement) will be sent t	oouse or nploymentions and
with many firms for their employees to aintain accounts with	Comp	oany Name							
idelity and to deliver transactional data. If your firm is not one	Comp	oany Address							
of them, Fidelity will empt to contact your	City				State/Provinc	e ZIP/Postal Co	de	Country	
's compliance office. Affiliations									
Aimatoris	the s	same address), is a m	nember of the b	oard of directors	, a 10% sha	reholder, or a	policy-r	s, etc.), living in your naking officer of a pu e than two Affiliates,	ublicly
	Affilia	ate's Company Name						Trading Symbol or CUSIP	
	Affilia	ate's Company Name						Trading Symbol or CUSIP	

Form continues on next page.

3. Additional Authorized Individual/Manager/Partner

Provide the following information for each additional Authorized Individual/Manager/Partner to be added to this account. Each individual named is fully authorized to place orders on the account and to execute any instrument incidental to such account (such as applying for margin or options), to act in a sole capacity in these regards, and to act on behalf of the Business as may be more fully described in the Fidelity Account Customer Agreement. In this Section 3, "you" refers to the person whose personal information is provided. To add up to seven individuals, make a copy of this section. For each individual beyond the seventh, complete an Account Authority form.

message, call, or text you for this purpose. Message and data reta splpy; frequency may vary. For help with texts, HELP. To op to ut of texts, reply STOP, You may also update your contact information at any time through your prof Fidelity.com. Please look for an email to confirm your information and the terms of this consent. Residential Address (where you live) This is your legal address used for tax reporting.	Enter full first and last	First Name Middle Name L		Last Name	Last Name					
Description of the property of the communications. Secondary Phone										
Mobile phone number and email are required for account security, transactional alerts, and delivery of other communications. By signing this form, you agree to conduct business with Fidelity electronically and to the electronic delivery of all account-related documents and communications. You consent to Fidelity's use of your email and/or mobile number message, call, or text you for this purpose. Message and data rates apply frequency may vary. For help with texts, HELP. To opt out of texts, reply \$TOP. You may also update your contact information at any time through your prof Fidelity.com. Please look for an email to confirm your information and the terms of this consent. Residential Address (where you live) This is your legal address used for tax reporting. Street Address Gity State/Province 27/Prostal Code Country Mailing Address This may be a PO box, drop box, or c/o location. Same as residential address Default if no other information indicated below.	xpired document (e.g., iver's license, passport,	Date of Birth MM DD YYYY	Social Security/Individual Taxpa	yer ID Number*	*U.SIssue	d ID ONLY				
and derivery of other communications. By signing this form, you agree to conduct business with Fidelity electronically and to the electronic delivery of all account-related documents and communications. You consent to Fidelity's use of your email and/or mobile number message, call, or text you for this purpose. Message and data rates apply, frequency may vary. For help with texts, HELP, To opt out of texts, reply \$TOP, You may also update your contact information at any time through your prof Fidelity.com. Please look for an email to confirm your information and the terms of this consent. Residential Address (where you live) This is your legal address used for tax reporting. Street Address City State/Province ZIP/Postal Code Country Mailing Address City State/Province ZIP/Postal Code Country Citizenship Indicate your Citizenship status. City State/Province ZIP/Postal Code Country Citizenship status. Choose one. Permanent U.S. resident Nonpermanent U.S. resident Nonresident of U.S. Government Identification Number [ID Number Country of Issuance		Mobile Phone	Secondary Phone							
transactional alerts, and delivery of other communications. By signing this form, you agree to conduct business with Fidelity electronically and to the electronic delivery of all account-related documents and communications. You consent to Fidelity's use of your email and/or mobile numbe message, call, or text you for this purpose. Message and data rates apply, frequency may vary. For help with texts, HELP. To op to ut of texts, reply STOP. You may also update your contact inframation at any time through your prof Fidelity.com. Please look for an email to confirm your information and the terms of this consent. Residential Address (where you live) This is your legal address used for tax reporting. Street Address City State/Province ZIP/Postal Code Country Mailing Address City State/Province ZIP/Postal Code Country Citizenship Indicate your Citizenship U.S. citizen Do not complete the fields below. Skip to Income Source. Citizenship status. Choose one. Permanent U.S. resident Number Choose one. Permanent U.S. resident Number Country of Citizenship	and email are required									
By signing this form, you agree to conduct business with Fidelity electronically and to the electronic delivery of all account-related documents and communications. You consent to Fidelity's use of your email and/or mobile number message, call, or text you for this purpose. Message and data rates apply, frequency may vary. For help with texts, HELP. To opt out of texts, reply STOP. You may also update your contact information at any time through your prof Fidelity.com. Please look for an email to confirm your information and the terms of this consent. Residential Address (where you live)		Email								
account-related documents and communications. You consent to Fidelity's use of your email and/or mobile number message, call, or text you for this purpose. Message and data rates apply; frequency may vary. For help with texts, HELP. To opt out of texts, reply STOP. You may also update your contact information at any time through your prof Fidelity.com. Please look for an email to confirm your information and the terms of this consent. Residential Address (where you live) This is your legal address used for tax reporting.	and delivery of other									
Mailing Address This may be a PO box, drop box, or c/o location. Same as residential address ▷ Default if no other information indicated below. Mailing Address City State/Province ZIP/Postal Code Country Citizenship Indicate your citizenship status. Country of Citizenship Choose one. Permanent U.S. resident Nonpermanent U.S. resident Nonresident of U.S. Government Identification Number Country of Issuance		account-related documents and communications. You consent to Fidelity's use of your email and/or mobile number to message, call, or text you for this purpose. Message and data rates apply; frequency may vary. For help with texts, reply HELP. To opt out of texts, reply STOP. You may also update your contact information at any time through your profile or								
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include reference number and photo.		ID Issuance Date MM DD YY	YY ID Expiration Date MM DL) YYYY						

Additional Authorized Individual/Manager/Partner continues on next page.

Permanent Resident Identifier Other Government-Issued ID Number

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Passport Number

Check one and		Employed	☐ Self-em	ployed						
provide information.		Occupation				Employer	Leave blank if	self-empl	loyed.	
		Employer Ad	dress							
		City			State/Province	ZIP/Postal	Code	Country		
		Retired [☐ Not emplo	yed						
		Source of Inco	ome <i>Pension, inve</i>	estments, spouse	e, etc.					
Associations										
s a person associated					a broker-deale					
h a member firm, you e obligated to receive onsent from that firm.	an crit	immediate f eria, provide	family membe e the company	r residing in 's name and	nunicipal securi the same house address below.	hold of some Information (one who me ncluding du	ets the plicate	aforemention copies of co	ned employm nfirmations an
Fidelity has existing consent agreements		statements for this account, and any accounts you choose to have on a consolidated statement) will be sent to the associated person's employer for purposes of compliance review.								
with many firms for their employees to	Cor	mpany Name								
naintain accounts with Fidelity and to deliver	Cor	mpany Address								
transactional data. If your firm is not one	00.	mpany / taaress								
of them, Fidelity will tempt to contact your	City	У				State/Province	ZIP/Postal Cod	е	Country	
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Affiliations										
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	cor	7) OI UIIS SEU								
		liate's Company							Trading Symbol	or CUSIP
	Affi	,	y Name						Trading Symbol Trading Symbol	
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Entity Mailing Address This may be a PO box, drop box, or c/o location.

☐ Same as permanent address ▷ Default if no other information indicated below.							
Mailing Address							
City	State/Province	ZIP/Postal Code	Country				

5. Required Signatures and Dates Provide everything that is required in the instructions below for your type of business structure.

Corporations:

- A certifying officer authorized to sign this agreement on behalf of the corporation, other than those listed in Sections 2 and 3, unless there are no other officers of the corporation aside from those listed, must sign below.
- Imprint a Corporate Seal in the space provided OR include a copy of the filed Articles of Incorporation with this form. A copy of the Articles of Incorporation is required if this is a foreign corporation.
- Any Authorized Individual listed on this form who is not already signing as a certifying officer must also sign in this Section 5.

LLCs:

- The form must be signed by ALL Managers authorized by agreement to transact business on the behalf of the LLC. If Member-Managed, then all members must sign.
- Attach a copy of the legal documentation (such as an Operating Agreement) identifying the name of the LLC, by whom the LLC is managed, and signatures, along with proof of filing with a state or foreign country.

Partnerships:

- All General Partners authorized by agreement to transact business on behalf of the Partnership must sign below. If there are no General Partners, all Partners must sign.
- Attach a copy of the pages of the partnership agreement that provide the official name of the Partnership, the name(s) of the General Partner(s), and all signatures.

Unincorporated Businesses/Sole Proprietorships:

- A certifying owner or officer, other than those listed in Sections 2 and 3, unless there are no other owners or officers aside from those listed, must sign below in the presence of a notary.
- Any Authorized Individual listed on this form who is not already signing as a certifying owner or officer must also sign in this Section 5.

Authorized Individual/Manager/Partner/Entity Certifications

In this subsection, "you" and "your" refer to the Authorized Individual(s), Manager(s), or Partner(s), as applicable, listed in Sections 2 and 3, and the individual signing on behalf of the Authorized Entity, if any, listed in Section 4:

- Affirm that you are at least 18 years old and of full legal age to enter into the agreements associated with this form in your state of residence.
- Agree to be bound by the current and future terms of all agreements, and by any applicable disclosures, between the account owner(s) and Fidelity.
- Represent and warrant that if you have not completed the section titled Associations, you are not employed by nor associated with a broker-dealer, stock exchange, exchange member firm, FINRA, a municipal securities dealer, or any other financial institution, nor are you the spouse or immediate family member residing in the same household of such a person.
- Represent and warrant that if you have not completed the section titled Affiliations, none of you, your spouse, nor any of your relatives living in your home are a control

- person or affiliate of a public company under
 SEC Rule 144.

 Indemnify and hold Fidelity harmless from and against any and all losses, claims,
- Certify that all information you provided is true, accurate, and complete to the best of your knowledge.
- Grant Fidelity permission to obtain credit information, verify information you have provided, and perform a background check on you.
- Acknowledge that Fidelity may refuse to approve you as an Authorized Individual/ Manager/Partner and/or Authorized Entity, as applicable, or may remove you as such from this or any other account, at any time and for any reason.
- Agree to act in compliance with all applicable laws and regulations.
- Certify and agree that the certifications and authorizations in this document will continue until Fidelity receives actual written notice of any change thereof.

- Indemnify and hold Fidelity harmless from and against any and all losses, claims, costs, actions, demands, suits, proceedings, damages and expenses, including, without limitation, regulatory fines, attorneys' fees and expenses, costs of collection, and any other costs suffered or incurred by Fidelity arising out of or relating to Fidelity effecting any transaction or acting upon any instruction given by you or from your action or inaction, whether intentional or not.
- Agree that Fidelity may verify all information provided in connection with this form and account, and may obtain credit or other financial responsibility reports with respect to the Business and any Authorized Individual/ Manager/Partner and/or Authorized Entity, as applicable. Upon written request, Fidelity will provide the name and address of the credit reporting agency used.

Required Signatures and Dates continues on next page.

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Account Certifications

The Certifying Officer, Manager(s), and Partner(s) hereby certify the following:

All Business Entities:

- The Business is duly organized and existing under the laws of the state or country indicated in Section 1, is operating under the operating document submitted with this form, and has the power to take the actions called for by the resolutions included in Section 6 at the end of this form. In addition, the Business's governing body adopted the resolutions in Section 6 at the end of this form on the date indicated in Section 1, at which a quorum of the governing body was present and acting throughout, and the resolutions are currently in full effect.
- Each Authorized Individual/Manager/ Partner named in Sections 2 and 3 has been duly appointed, and that any one of them is fully authorized, acting individually, to execute any and all instruments necessary, proper, and desirable for the purpose, including any and all documentation necessary to establish this account (which may be a margin account) in the name of said Business with Fidelity and to purchase, trade, sell (including short sales in margin accounts), assign, withdraw, transfer, and/or deliver any and all stocks, bonds, options, or any other assets or securities, listed or unlisted, and to establish checkwriting, EFT, and other account-related services in said account(s) as indicated further, that any past action in accordance herewith is hereby ratified and confirmed; and, further, that any officer of this Business is hereby authorized to certify this resolution to Fidelity. This authorization shall continue in force until revoked by the above-named Business by a written notice, addressed and delivered to
- Nothing in this form and the resolutions in Section 6 are contrary to any provision in the Business's organizing documents or bylaws, and you have been authorized to make this certification to Fidelity on behalf of this Business

- Fidelity may verify all information provided in connection with this certification and account, and may obtain credit or other financial responsibility reports with respect to the Business and any Authorized Individual/Manager/Partner. All individuals who may be the subject of these reports have been notified of this possibility. Upon written request, Fidelity will provide the name and address of the credit reporting agency used.
- If applicable, the attached supporting documents are true and valid copies of the legal document currently in effect.
- Fidelity may conduct account business with any one Authorized Individual/ Manager/Partner without notice to, or approval of, any other Authorized Individual/Manager/Partner.
- These certifications will continue until Fidelity receives written notice of any change thereof.

Corporations and Unincorporated **Businesses Only:**

- You are an officer/owner of the Business and you are authorized to make these certifications on behalf of the Business.
- In the event there are no other officers/ owners aside from those listed in Sections 2and 3, the individual signing in this Section 5 warrants and represents that in signing this Section 5, you are the sole officer of, or the sole individual authorized to act on behalf of, the Business.

LLCs and Partnerships Only:

• The certifications with respect to the authority of each Manager/Partner to place orders on this account are made jointly and severally by all the Managers/Partners signing below, who also acknowledge that Fidelity may conduct account business with any one Manager/Partner without notice to, or approval of, any other Manager/Partner.

- The undersigned authorize Fidelity, in the event of death or retirement of any of the members of the Business, to take such proceedings, require such papers, retain such portion of, or restrict transactions in said account as Fidelity may deem advisable to protect Fidelity against any liability, penalty, or loss under any present or future law or otherwise. It is further agreed that in the event of the death or retirement of any partner of the Business, the remaining partners will immediately cause Fidelity to be notified of such fact.
- This authorization is in addition to, and in no way limits or restricts, any rights that Fidelity may have under any other agreement or agreements between Fidelity and the undersigned, or any agreement now existing or hereafter entered into, and is binding on the undersigned and their legal representatives, successors, and assigns. This authorization is also a continuing one and shall remain in full force and effect until revoked by a written notice.

LLCs Only:

• The individual or individuals signing below constitute all Managers authorized by agreement to transact business on behalf of the Business. If Member-Managed, the individual or individuals signing below constitute all Members of the Business.

Partnerships Only:

• The individual or individuals signing below constitute all General Partners authorized by agreement to transact business on behalf of the Business. If there are no General Partners, the individual or individuals signing below constitute all Partners of the Business.

To help the government fight financial crimes, federal regulation requires Fidelity to obtain your name, date of birth, address, and a government-issued ID number before opening your account, and to verify the information. In certain circumstances, Fidelity may obtain and verify comparable information for any person authorized to make transactions in an account. Also, federal regulation requires Fidelity to obtain and verify the beneficial owners and control persons of legal entity customers. Requiring the disclosure of key individuals who own or control a legal entity helps law enforcement investigate and prosecute crimes. Your account may be restricted or closed if Fidelity cannot obtain and verify this information. Fidelity will not be responsible for any losses or damages (including, but not limited to, lost opportunities) that may result if your account is restricted or closed.

> Please be sure to read all the language included on the following pages, then sign and date on the next page, and return all pages of this application (1-9) to Fidelity.



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5. Required Signatures and Dates, continued

By signing below, you certify all items that apply to your type of entity and registration are true; that all information provided on this form is true, accurate, and complete; that you make all authorizations indicated; and you affirm that you are authorized to make those representations.

Notary is ONLY required for an Unincorporated Busi	ness or Sole Proprietorship.
PRINT CERTIFYING OFFICER/MANAGER/PARTNER/AUTHORIZED INDIVIDUAL NAME	CORPORATE SEAL
CERTIFYING OFFICER/MANAGER/PARTNER/AUTHORIZED INDIVIDUAL TITLE	
OFFICER/MANAGER/PARTNER/AUTHORIZED INDIVIDUAL SIGN	ATLIDE
	ATORE
X	
TODAY'S DATE MM/DD/YYYY	
X	
Notice to CA Residents: A Notary Public or other officer comp who signed the document to which this certificate is attached, a	
Certificate of Acknowledgement of Notary Public Must be a	u.S. Notary. Foreign notary or consular seals may NOT be substituted.
State of, in the County of	, subscribed and sworn to before me by the
above-named person who is personally known to me or who has prod	duced as identification, that the
foregoing statements were true and accurate and made of his/her own	free act and deed, on/
PRINT NOTARY NAME	→ NOTARY SEAL/STAMP →
NOTARY SIGNATURE	DATE MM/DD/YYYY
X	X
01	
My commission expires/	
Important Note: If your state law permits, notaries may attach th	e appropriate notarizing declaration in lieu of this notarization.
PRINT MANAGER/PARTNER/AUTHORIZED INDIVIDUAL NAME	PRINT MANAGER/PARTNER/AUTHORIZED INDIVIDUAL NAME
PARTNER/AUTHORIZED INDIVIDUAL SIGNATURE	PARTNER/AUTHORIZED INDIVIDUAL SIGNATURE
× X	<u>88</u>
TODAY'S DATE MM/DD/YYYY	TODAY'S DATE MM/DD/YYYY
X	X
<u>a</u>	<u> </u>
PRINT MANAGER/PARTNER/AUTHORIZED INDIVIDUAL NAME	PRINT MANAGER/PARTNER/AUTHORIZED INDIVIDUAL NAME
PARTNER/AUTHORIZED INDIVIDUAL SIGNATURE	PARTNER/AUTHORIZED INDIVIDUAL SIGNATURE
X	X
TODAY'S DATE MM/DD/YYYY	TODAY'S DATE MM/DD/YYYY
X	X

Form continues on next page.

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6. Resolutions

Certified Copy of Certain Resolutions Adopted by the Governing Body of the Business Whereby the Establishment and Maintenance of Trading Accounts Have Been Authorized

RESOLVED

FIRST: That the individual(s) listed on this form hereby are authorized and empowered, for and on behalf of this Business (herein called the "Business"), to establish, maintain, and act on this account (which may be a margin account), and each of them hereby is authorized and empowered for and on behalf of this Business, with Fidelity Brokerage Services LLC and its affiliates (collectively "Fidelity") for the purpose of purchasing, investing in, or otherwise acquiring, selling (including short sales), possessing, transferring, exchanging, or otherwise disposing of, or turning to account of, or realizing upon, and generally dealing in and with any and all forms of securities including, but not by way of limitation, shares, stocks, bonds, debentures, notes, scrip, participation certificates, rights to subscribe, options, warrants, certificates of deposit, mortgages, evidences of indebtedness, commercial paper, certificates of indebtedness and certificates of interest of any and every kind and nature whatsoever, secured or unsecured, whether represented by trust, participating and/or other certificates, or otherwise.

The fullest authority at all times with respect to any such commitment or with respect to any transaction deemed by any of the said officers and/or agents to be proper in connection therewith is hereby conferred, including authority (without limiting the generality of the foregoing) to give instructions (whether oral, written, electronic, or otherwise) to Fidelity with respect to said transactions; to borrow money and securities and to borrow such money and securities from or through Fidelity, and to secure repayment thereof with the property of the Business; to bind and obligate the Business to and for the carrying out of any contract, arrangement, or transaction that shall be entered into by any such officer and/or agent for and on behalf of the Business with or through Fidelity; to pay by checks and/or drafts drawn upon the funds of the Business such sums as may be necessary in

connection with any of the said accounts; to deliver securities and contracts to Fidelity; to deliver securities to and deposit funds with Fidelity; to order the transfer or delivery of securities to any other person whatsoever, and/or to order the transfer of record of any securities, to any name selected by any of the said officers or agents; to affix the corporate seal to any documents or securities to any name selected by any of the said officers or agents; to affix the corporate seal to any documents or agreements, or otherwise; to endorse any securities and/or contracts in order to pass title thereto; to direct the sale or exercise of any rights with respect to any securities; to sign for the Business all releases, powers of attorney, and/or other documents in connection with any such account, and to agree to any terms or conditions to control any such account; to direct Fidelity to surrender any securities to the proper agent or party for the purpose of effecting any exchange or conversion, or for the purpose of deposit with any protective or similar committee, or otherwise; to accept delivery of any securities; to appoint any other person or persons to do any and all things that any of the said officers and/or agents are hereby empowered to do, and generally to do and take all action necessary in connection with the account, or considered desirable by such officer and/or agent with respect thereto.

SECOND: That Fidelity may deal with any and all of the persons directly or indirectly empowered by the foregoing resolution, as though they were dealing with the Business directly.

THIRD: That the officers of the Business be and hereby are authorized, empowered, and if requested by Fidelity, directed to certify:

- (a) a true copy of these resolutions;
- (b) specimen signatures of each and every person by these resolutions empowered;
- (c) a certificate (which, if required by Fidelity, shall be supported by an opinion of

the general counsel of the Business, or other counsel satisfactory to Fidelity) that the Business is duly organized and existing, that its operating documents empower it to transact the business by these resolutions defined, and that no limitation has been imposed upon such powers.

FOURTH: That Fidelity may rely upon any certification given in accordance with these resolutions, as continuing fully effective unless and until Fidelity shall receive due written notice of a change in or the rescission of the authority so evidenced and the dispatch or receipt of any other form of notice shall not constitute a waiver of this provision, nor shall the fact that any person hereby empowered ceases to be an officer of the Business or becomes an officer under some other title in any way affect the powers hereby conferred. The failure to supply any specimen signature shall not invalidate any transaction if the transaction is in accordance with authority actually granted.

FIFTH: That in the event of any change in the office or powers of persons hereby empowered, the officers of the Business shall certify such changes to Fidelity in writing in the manner herein above provided, which notification, when received, shall be adequate both to terminate the powers of the persons theretofore authorized, and to empower the persons thereby substituted.

SIXTH: That the foregoing resolutions and the certificates actually furnished to Fidelity by the Business pursuant thereto be and hereby are made irrevocable until written notice of the revocation thereof shall have been received by Fidelity.

SEVENTH: That the Business and its officers indemnify and hold Fidelity harmless from any claim, loss, expense, or other liability for effecting any transactions and acting upon any instructions given by the officers of the Business.

Did you sign the form and include any necessary documents? Send the ENTIRE form and any attachments to Fidelity Investments.

Questions? Call 800-343-3548.

Regular mail

Fidelity Investments PO Box 770001 Cincinnati, OH 45277-0002 Overnight mail

Fidelity Investments 101 Crosby Parkway KC1K Covington, KY 41015

On this form, "Fidelity" means Fidelity Brokerage Services LLC and its affiliates. Brokerage services are provided by Fidelity Brokerage Services LLC, Member NYSE, SIPC. 799293.3.0 (03/24)

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