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From: Cynthia Rodriguez [REDACTED] ^  
Subject: AG Preferred Deposit Accounts  
Date: February 1, 2017 at 4:46 PM  
To: Richard Kahn [REDACTED]  
Cc: Stewart Oldfield [REDACTED]

Hi Rich;

Vahe reached out to us regarding your request to open AG Preferred Deposit Accounts for the following entities:

- The Haze Trust
- Southern Financial; LLC
- Southern Trust Company, inc

Attached are the account opening documents for each entity. Please feel free to reach out if you have any questions. Thanks.

Kind regards,

Cynthia Rodriguez

Cynthia Rodriguez

Assistant Vice President

Deutsche Bank Trust Company Americas

Deutsche Asset & Wealth Management

345 Park Avenue. 10154-0004 New York, NY, USA

Tel. [REDACTED]

Fax [REDACTED]

Email [REDACTED]

This communication may contain confidential and/or privileged information. If you are not the intended recipient (or have received this communication in error) please notify the sender immediately and destroy this communication.

^ «t

Deutsche Bank

Wealth Management

Business Deposit Account Opening Notification

Xhe.Haze.Trust.....

Account Title

02/09/1999

0/iic of Incorporation

The Haze Trust...

Entity/Company Name

13-7185414

Taxpayer ID Number (TIN)

.6.100.Red.hLo.ok Quarter..B3

Mailing Address

St, Thomas

0 .....

Slate

.008,02 \_\_\_\_\_

City  
Zip  
\_340J7.5.2525.  
Business Telephone Number  
[REDACTED] . . .  
Business Fax Number  
Other Number  
6100.Sed.Ho.ok Quarter.B3. . .  
Legal Address (if different from mailing address)  
St, Thomas  
M802\_\_\_\_\_  
. .0.. .  
State  
City  
Zip  
Client Relationship  
n Corporation  
 Foundation  
: Limited Liability Company (LLC)  
Attorney Escrow Account  
Landlord Master Escrow  
Partnership  
lJ Non-Profit Organization  
/ Trust  
Estates  
Limited Liability Partnership (LLP)  
Private Wealth Premium''^^^  
DBTCA Accounts  
Deutsche Bank AG NY Branch Accounts  
C Checking Account  
C; Checking with Interest  
 Money Market Deposit  
iT' DBTCA Certificate of Deposit  
/ Deutsche Bank AG NY Preferred Banking Account  
Deutsche Bank AG NY Preferred Certificate of Deposit  
Promo term  
APY  
Teim  
lOBTCA deposit account mquicd. along with a D6 AG Preforrod Terms  
and Corxiitions)  
APY  
Term  
I. j Cash Master Sweep Account  
Tngger Amount  
Target Amount  
Banking Services  
lJ Deluxe Checkbook  
Debit Cards-Business Debit Card  
' '' Name Only ' ' Name and Address  
Duplicate Statement  
Style

CoIot

Code

Name

Internet Banking Services

D DB Private Wealth Online Plus

Address

u-i Link to existing online relationship:

Zip Code

State

City

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Page I of 3

NAOSOD00022695-000180789

Notice of Customer Identification Policy

Important Information

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who establishes an account, investment or other business relationship with a financial institution. This means that we will ask for your name, address and other information that will allow us to identify you. We may also ask to see identifying documents such as a certificate of formation or good standing (legal entities) or a passport or other photo identification (individuals).

Information Sharing

You authorize Deutsche Bank to share information about you and your Account as set forth in our Privacy Policy, including any disclosures that (1) Deutsche Bank believes are required by applicable law and regulations that apply to Deutsche Bank or others, including disclosure of information about you and your Account to any government agency or self-regulatory body on request, (2) is necessary or appropriate in connection with Deutsche Bank's provision of services under this Agreement, or (3) is requested by a financial institution, financial intermediary, or other third party in order to assist such person with compliance with law applicable to such person in connection with services provided to you or on your behalf.

3rd EU Notice

Governmental rules have also broadened the scope of the Bank's obligations to aid in the fight against money laundering and terrorist financing; these rules call for an active involvement of both asset management firms and their clients. For new and existing clients we currently have a legal obligation to ask our customers questions regarding their identities, addresses, source of funds and, if necessary, legal representatives, authorized signatories, beneficial owners or control structures and to collect requisite documentation to substantiate the information. Also, enhanced anti-money laundering requirements require that should any of the above personal or institutional information change, our clients would be obliged

to immediately notify us of the change(s) and provide us with relevant documentation to verify these changes.

#### ATM/Debit Service

You agree that the retention or use of the ATM/Debit card constitutes acceptance of the terms and conditions of the Cardholder Agreement contained in the Terms and Conditions of Deposit Accounts.

#### Internet Banking Service

If you have selected to receive Internet Banking Services, you understand that you will be required to enter into a separate Internet Banking Services Agreement with DBTCA before you can access the Internet Banking Service.

#### Acknowledgement of Receipt of Privacy Notice

By signing below, you acknowledge receipt of DBTCA's Privacy Notice included in the Application Package.

#### Non-U.S. Organizations:

##### Confirmation of Tax and Compliance Responsibilities

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to it in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA. Furthermore, you confirm that the necessary information (to the best of your knowledge and capabilities) is made available no less than annually to the relevant beneficial owner(s), seilor(s), beneficiar\'(ies), partner(s), etc., to enable him/her/them to fulfill any respective tax obligations that may arise for him/her/them in connection with your business relationship with DBTCA.

Please complete and attach separate W-8 or W-9 documentation as applicable.

#### Terms and Conditions and Representations

By signing below, you acknowledge receipt of the Terms and Conditions for Deposit Accounts attached to this Application and agree to be bound by them. In addition, you agree to notify us immediately of any material change to the information provided by you on this Application.

You represent and warrant that all of the information provided by you on this Application is accurate.

The Terms and Conditions for Deposit Accounts are subject to change.

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P<tgo 2 of 3

#### Acceptance

You understand that this application is subject to acceptance by DBTCA.

Authorized Signei

Authorized Signer

^irenJndyke

Print Name

Print Name

Date

For Bank Use Only

Reviewed by:

Signature

Name

ntle

Dale

Accepted by DBTCA;

Signature

Name

Title

Date

Account numbers:

DDA

NOW

MMDA

CD/DBAG

WM167245 015624.090816

W-9

Request for Taxpayer

Identification Number and Certification

Give Form to the  
requester. Do not

send to the IRS.

Form

(Rev. December 2014)

Department of the Treasury

Internal Revenue Service

1 Name (as shown on your Income tax return). Name is required on this line;  
do not leave this line blank.

The Haze Trust

2 Business name/disregarded entity name, if different from above

CO

o

0]

Q.

3 Check appropriate box for federal tax classification; check only one of  
the following seven boxes:

D Individual/sole proprietor or Q C Corporation Q S Corporation Q

Partnership 0 Trust/estate

single-member U.C

r-l Limited liability company. Enter the tax classification (C=C  
corporation, S=S corporation, P=partnership) ^

4 Exemptions (codes apply only to  
certain entities, not Individuals; see

Instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting

code (if any) \_\_\_\_\_

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Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.  
r~l Other (see Instructions)

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a

o

5 Address (number, street, and apt. or suite no.)

6100 Red Hook Quarter B3

Requester's name and address (optional)

•5

o

m

6 City, state, and ZIP code

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C0

St, Thomas 0 ,00802

7 List account number(s) here (optional)

Taxpayer Identification Number (TIN)

Parti

Social security number

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid

backup withholding. For individuals, this is generally your social security number (SSN). However, for a

resident alien, sole proprietor, or disregarded entity, see the Part 1 instructions on page 3. For other

entities, it is your employer identification number (EIN). If you do not have a number, see How to get

TIN on page 3.

or

Employer Identification number

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

1 3

7 1 8 5 4 1 4

Part 11

Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

2. 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

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above 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. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment

generally, payments other than Interested dividend. you are not required to, sign the certification, but you must provide your correct TIN.

See the

instructions on page 3. / \

d property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and

Signature of /

U.S. person \

3

sign

Here

Date

/Term 1096 (home mortgage Interest), 1098-E (student loan interest], 1098-T (tuition)

- Form 1099-C (canceled debt)

- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only If you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not submit Form W-9 for the requester with a TIN. you might be subject

to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number

to be Issued).

2. Certify that you are not subject to backup withholding. or

3. Claim exemption from backup withholding If you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of

any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected Income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are

exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 which as legislation enacted after we release it) is at [www.irs.gov/W-9](http://www.irs.gov/W-9).

Purpose of Form

An individual or entity (Form W-9 requested who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN)

which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to

you, or other amount reportable on an Information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends. Including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-8 (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

Form W-9 (Rev. 12-2014)

Cat. No. 10231X

Deutsche Bank

Wealth Management

Signature Card

Deutsche Bank Trust Company Americas

The Haze Trust

Account Holder Title

Individual

Account Number

^ ' Limited Liability

Corporation

W- Other trust

ITF/POD/ATF'

Corporate

Number of Signatures

Required: 1

Joint, with Rights Joint. Tenants

of Survivorship

Partnership

Darren Indyke

Print Name

Signature

Signature

Print Name

Signature

Print Name

Signature

Print Name

Approved

Power of Attorney

Date



✓ Deutsche Bank AG NY Preferred Banking Account  
Deutsche Bank AG NY Preferred Certificate of Deposit  
APY  
Term  
Promo term  
(DBTCA deposit account required, along with a DB AG Preferred Terms  
and Conditions)

APY  
Term  
Cash Master Sweep Account

Target Amount

Trigger Amount

Banking Services

Deluxe Checkbook

Debit Cards—Business Debit Card

Name Only ' Name and Address

Duplicate Statement

Color

Style

Code

Name

Internet Banking Services

DB Private Wealth Online Plus

Address

Do Link to existing online relationship:

Zip Code

City

State

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Page 1 of 3

Notice of Customer Identification Policy

Important Information

To help the government fight the funding of terrorism and money laundering activities. Federal law requires all financial institutions to obtain, verify and record information that identifies each person who establishes an account, investment or other business relationship with a financial institution. This means that we will ask for your name, address and other information that will allow us to identify you. We may also ask to see identifying documents such as a certificate of formation or good standing (legal entities) or a passport or other photo identification (individuals).

Information Sharing

You authorize Deutsche Bank to share information about you and your Account as set forth in our Privacy Policy, including any disclosures that (1) Deutsche Bank believes are required by applicable law and regulations that apply to Deutsche Bank or others, including disclosure of information about you and your Account to any government agency or self-regulatory body on request, (2) is necessary or appropriate in connection with Deutsche Bank's provision of services under this

Agreement, or (3) is requested by a financial institution, financial intermediary, or other third party in order to assist such person with compliance with law applicable to such person in connection with services provided to you or on your behalf.

#### 3rd EU Notice

Governmental rules have also broadened the scope of the Bank's obligations to aid in the fight against money laundering and terrorist financing; these rules call for an active involvement of both asset management firms and their clients. For new and existing clients we currently have a legal obligation to ask our customers questions regarding their identities, addresses, source of funds and, if necessary, legal representatives, authorized signatories, beneficial owners or control structures and to collect requisite documentation to substantiate the information. Also, enhanced anti-money laundering requirements require that should any of the above personal or institutional information change, our clients would be obliged to immediately notify us of the change(s) and provide us with relevant documentation to verify these changes.

#### ATM/Debit Service

You agree that the retention or use of the ATM/Debit card constitutes acceptance of the terms and conditions of the Cardholder Agreement contained in the Terms and Conditions of Deposit Accounts.

#### Internet Banking Service

If you have selected to receive Internet Banking Services, you understand that you will be required to enter into a separate Internet Banking Services Agreement with DBTCA before you can access the Internet Banking Service.

#### Acknowledgement of Receipt of Privacy Notice

By signing below, you acknowledge receipt of DBTCA's Privacy Notice included in the Application Package.

#### Non-U.S. Organizations:

##### Confirmation of Tax and Compliance Responsibilities

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to it in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA. Furthermore, you confirm that the necessary information (to the best of your knowledge and capabilities) is made available no less than annually to the relevant beneficial owner(s), settlor(s), beneficiary(ies), partner(s), etc., to enable him/her/them to fulfill any respective tax obligations that may arise for him/her/them in connection with your business relationship with DBTCA.

Please complete and attach separate W-8 or W-9 documentation as applicable.

#### Terms and Conditions and Representations

By signing below, you acknowledge receipt of the Terms and Conditions for Deposit Accounts attached to this Application and agree to be bound by them. In addition, you agree to notify us immediately of any material change to the information

provided by you on this Application.

You represent and warrant that all of the information provided by you on this Application is accurate.

The Terms and Conditions for Deposit Accounts are subject to change.

WM167245 015624.090816

Page 2 of 3

Acceptance

You understand that this application is subject to acceptance by DBTCA.

Authorized Signor

Authorized Signer

Darren Indvke

Print Name j

Prim Name

Date

For Bank Use Only

Reviewed by:

Signature

Name

Title

Date

Accepted by DBTCA:

Signature

Name

Title

Date

Account numbers:

DDA

NOW

MMDA

CD/DBAG

WWI167245 015624.090816

W-9

Give Form to the requester. Do not send to the IRS.

Request for Taxpayer

Identification Number and Certification Form

(Rev. December 2014)

Department of the Treasury

Internal Revenue Service

1 Name (as shown on your Income tax return). Name is required on this line; do not leave this line blank.

Southern Financial LLC

2 Business name/disregarded entity name, if different from above

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4 Exemptions (codes apply only to

certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_  
Exemption from FATCA reporting code (if any) \_\_\_\_\_

(AppHis 10 leeeunli malnuiiriii ot/OMo tTw U.S-I

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:

r~l Individual/sole proprietor or D C Corporation ^ S Corporation Q  
Partnership Q Trust/estate  
single-member LLC

r~| Limited liability company. Enter the tax classification (CsC corporation, S=S COTporation. P^partnership) ^

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Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

r~l Other (see Instructions) ▶

Q.

Requester's name and address (optional)

5 Address (number, street, and apt. or suite no.)  
6100 Red Hook Quarter B3

(0

6 City, state, and ZIP code

St Thomas USVI ,00802

(U

<0

Vi

7 List account numbers here (optional)

Taxpayer Identification Number (TIN)

Parti

Social security number

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid

backup withholding. For individuals, this is generally your social security number (SSN). However, for a

resident alien, sole proprietor, or disregarded entity, see the Part 1 instructions on page 3. For other

entities, it is your employer identification number (EIN). If you do not have a number, see How to get a

TIN on page 3.

Note. If the account is in more than one name, see the Instructions for line 1 and the chart on page A for

guidelines on whose number to enter.

or

Employer Identification number

0 7 9 9 1 9 2

6 6

Certification

Part II

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above 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. For U.S. transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of contributions to an individual retirement arrangement (IRA), and

generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

See the

Instructions on page 3. (

7

Sign

Here

signature of

U.S. person ^

Date ^

\* Form 1096 (home mortgage interest), 1098-E (student loan interest), 1096-T (tuition)

- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject

to backup withholding. See What is backup withholding? on page 2.

By signing the (filled-out form, you;

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).

2. Certify that you are not subject to backup withholding. or

3. Claim exemption from backup withholding If you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable

share of

any partnership Income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected Income, and

4. Certify that FATCA code(s) entered on this form (If any) Indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 (or further information.

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted. Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) Is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN)

which may be your social security number (SSN), Individual taxpayer identification

number ([TIN), adoption taxpayer Identification number (ATIN). or employer Identification number (EIN), to report on an information return the amount paid to

you. or other amount reportable on an information return. Examples of information

returns include, but are not limited to. the following:

- Form 1099-iNT (interest earned or paid]
- Form 1099-DIV (dividends. Including those from stocks or mutual funds)
- Form 1069-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

Form W-9 (Rev. 12-2014)

Cat. No. 10231X

Deutsche Bank

Wealth Management

For Bank Use Only

Account Number(s):

Certificate of Limited Liability Company Resolutions in favor of Deutsche Bank Trust Company Americas

The undersigned (the "Undersigned") hereby certifies that:

1. (a) the Undersigned is the duly appointed manager, member or officer duly authorized to (i) certify as to the Limited Liability Company or consents ("LLC Resolutions") of the member(s) (the "Member(s)') and (ii) to keep the records

Of Southern Financial LLC

a Limited Liability Company duly formed, in good standing, and existing under the laws of Virgin Islands

, . (the "Company"),

; and

(b) the following Is a true copy of the LLC Resolutions of the Member(s).

duly adopted in accordance with applicable law and governing formation documents with respect to the account type(s) indicated below ("Account(s)"):

S!) Deposit Account(s)

C? Investment Advisory Account(s)

(please select all that apply):

i.] discretionary L, non-discretionary

RESOLVED, that it is desirable and in the best interests of the Company, and the Company is authorized, to designate Deutsche Bank Trust Company Americas (the "Bank") as depository, custodian or investment advisor, as applicable, for such properly as designated by the Company from time to time, and to open and maintain Account(s) with the Bank.

Custody Account(s)

RESOLVED, that the Company be bound by the terms and conditions set forth in any agreement or contract governing

Account(s) (the "Account Agreement(s)") and any other document relating to products or services provided in connection with Account(s), as revised and/or amended from time to time (collectively, the "Agreements").

RESOLVED, that the managers, members, officers, employees and/or agents of the Company (the "Authorized Signer(s)")

whose names, titles and signatures appear below, as amended from time to time by the Company, are hereby authorized and

directed, for and on behalf of the Company, to open, maintain, manage or close Account(s). to execute the Agreements, and to

exercise and direct the exercise of all duties, rights and powers, and to take all actions necessary or appropriate in connection

with the opening, maintenance, management or closing of Account(s) in the name of the Company, pursuant to the terms

and conditions specified in the Agreements, and any applicable laws, rules and regulations. The Bank is authorized to accept

instructions from the Authorized Signer(s) in connection with Account(s). including, but not limited to. endorsements and

deposits of negotiable instruments, checks or other orders for the payment of money, and instructions to deposit, withdraw,

transfer, deliver or assign assets in Account(s), sell any assets in

Account(s), including but not limited to assets listed as "held elsewhere," buy any assets for Account(s) and retain the services of an

advisor, including the Bank, consultant or broker/dealer

to manage all or part of assets in Account(s), all on such terms as the Authorized Signer(s) direct.

RESOLVED, that the Bank may conclusively assume that all actions taken and instructions given by each of the

Authorized Signer(s) have been properly taken or given pursuant to authority vested in such Authorized Signer(s) and

the Company shall indemnify and hold the Bank harmless from all claims, liabilities, losses, costs, expenses (including

attorneys' fees) related to or arising from any action or inaction by any such Authorized Signer(s).

RESOLVED, that the omission from these LLC Resolutions of any document,

arrangement or action to be taken in accordance with the Account(s) or the Agreements shall in no manner derogate from the authority of the Authorized Signer(s) to take all actions necessary, desirable, advisable or appropriate to consummate, effectuate or carry out the transactions contemplated by the foregoing Company Resolutions.

RESOLVED, that all actions taken and expenses incurred heretofore by the Authorized Signer(s) in connection with the Account(s) or the Agreements are hereby ratified, approved and confirmed in all respects.

RESOLVED, that if indicated below, the Authorized Signer(s) is/are authorized to delegate any and all of the powers enumerated in these LLC Resolutions in connection with the Account(s) to such person(s) as the Authorized Signer(s) may elect. Such delegation shall be made via the execution of the form of Appointment of Agent(s) annexed hereto as "Exhibit A."

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1

AUTHORIZED SIGNER(S):

^ \_\_\_\_\_ ^  
If any Authorized Signer named below is an entity and not a natural person. please attach an Authorization

Jeffrey Epstein Signatory) ^

Print Name Title

Authorized (select one);  Individually  Jointly with Signatory list.

Other

Check only If the above Authorized Signer is authorized to grant powers enumerated in these LLC Resolutions to agents.

Darren Indyke

Print Name

Authorized (select one):  Individually  Jointly with Signatory

Title

Other

Check only if the above Authorized Signer is authorized to grant powers enumerated in these LLC Resolutions to agents.

Harry Beller

Signatory

Signature

Title

Print Name

Authorized (select one):  Individually  Jointly with

Other

Check only if the above Authorized Signer is authorized to grant powers enumerated in these LLC Resolutions to agents.

Signature

Jeanne Brennan

Signatory

Title

Prim Name

Authorized (select one): Individually  Jointly with

Other

Check only if the above Authorized Signer is authorized to grant powers enumerated in these LLC Resolutions to agents.

2. The above LLC Resolutions are in full force and effect as of the date shown below.

3. The Bank may rely conclusively on the instructions of the Authorized Signer(s) in every respect unless or until the Bank receives written notification of the revocation and has had reasonable time to act on such notice.

4. No one other than the Company has any interest in Account(s) opened and maintained in the name of the Company.

5. The titles and names of the Authorized Signer(s) appearing above, whose signatures appear above or on any attached signatory list are correct and genuine.

The authorities previously granted to any Authorized Signer not named herein are hereby revoked.

I have subscribed my signature.

In witness whereof,

1

a

Signature

Prim Name and Title

\_\_\_\_\_

Date of this Certificate of LLC Resolutions

(Fill in date—this document is not valid if date is left blank)

I

1. If the manager, member or other authorized officer is one of the Authorized Signers named above, this Certificate of LLC ;

Resolutions must be confirmed below by another manager, member or officer of the Company who is not designated an Authorized Signer above unless the Authorized Signers are the only members of the Company.

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2

Deutsche Bank

Wealth Management

Signature Card

Deutsche Bank Trust Company Americas

Southern Financial LLC

Account Holder Title

Individual

Account Number

:/ Limited Liability

Corporation

Other:

ITF/POD/ATF\*

Number of Signatures  
Required: 1  
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in Comrnon

Jeffrey Epstein  
Print Name  
Darren Indyke  
Print Name  
Harry Beller  
Print Name  
Jeanne Brennan  
Print Name  
Signature

Signature  
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Signature

ignaturc  
Approved  
Power ol Attorney  
Date  
Specimen Signature  
• For ITF/POD/ATF See Supplemental Terms and Condiliuns  
Dale of Power of Attorney  
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Deutsche Bank  
Wealth Management  
Business Deposit Account Opening Application  
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Mailing Address  
City  
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Business Telephone Number  
Business Fax Number

Other Number  
Legal Address (if different from mailing address)  
City  
State  
2p  
Client Relationship  
L<i?i Corporation  
Limited Liability Company (LLC)  
Attorney Escrow Account  
Landlord Master Escrow  
Foundation  
..1 Partnership  
 Non-Profit Organization  
... Limited Liability Partnership (LLP)  
Trust  
Estates  
Private Wealth Premium™  
Deutsche Bank AG NY Branch Accounts  
DBTCA Accounts  
 Checking Account  
 Checking with Interest  
 Money Market Deposit  
D DBTCA Certificate of Deposit  
/ Deutsche Bank AG NY Preferred Banking Account  
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APY  
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Z Cash Master Sweep Account  
APY  
Trigger Amount  
Target Amount  
Banking Services  
 Deluxe Checkbook  
Debit Cards–Business Debit Card  
'D Name Only 1 Name and Address  
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Internet Banking Services  
Address  
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n Link to existing online relationship;  
Slate  
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City

Notice of Customer Identification Policy  
Important Information

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who establishes an account, investment or other business relationship with a financial institution. This means that we will ask for your name, address and other information that will allow us to identify you. We may also ask to see identifying documents such as a certificate of formation or good standing (legal entities) or a passport or other photo identification (individuals).

Information Sharing

You authorize Deutsche Bank to share information about you and your Account as set forth in our Privacy Policy, including any disclosures that (1) Deutsche Bank believes are required by applicable law and regulations that apply to Deutsche Bank or others, including disclosure of information about you and your Account to any government agency or self-regulatory body on request, (2) is necessary or appropriate in connection with Deutsche Bank's provision of services under this Agreement, or (3) is requested by a financial institution, financial intermediary, or other third party in order to assist such person with compliance with law applicable to such person in connection with services provided to you or on your behalf.

3rd EU Notice

Governmental rules have also broadened the scope of the Bank's obligations to aid in the fight against money laundering and terrorist financing; these rules call for an active involvement of both asset management firms and their clients. For new and existing clients we currently have a legal obligation to ask our customers questions regarding their identities, addresses, source of funds and, if necessary, legal representatives, authorized signatories, beneficial owners or control structures and to collect requisite documentation to substantiate the information. Also, enhanced anti-money laundering requirements require that should any of the above personal or institutional information change, our clients would be obliged to immediately notify us of the change(s) and provide us with relevant documentation to verify these changes.

ATM/Debit Service

You agree that the retention or use of the ATM/Debit card constitutes acceptance of the terms and conditions of the Cardholder Agreement contained in the Terms and Conditions of Deposit Accounts.

Internet Banking Service

If you have selected to receive Internet Banking Services, you understand that you will be required to enter into a separate Internet Banking Services Agreement with DBTCA before you can access the

Iniernei Banking Service.

Acknowledgement of Receipt of Privacy Notice

By signing below, you acknowledge receipt of DBTCA's Privacy Notice included in the Application Package.

Non-U.S. Organizations:

Confirmation of Tax and Compliance Responsibilities

You confirm that it is your responsibility to fulfill any tax obligations and any other regulatory reporting duties applicable to it in any relevant jurisdictions that may arise in connection with assets, income or transactions in your account(s) and your business relationship with DBTCA. Furthermore, you confirm that the necessary information (to the best of your knowledge and capabilities) is made available no less than annually to the relevant beneficial owner(s). settlor(s). beneficiary(ies), partner(s), etc., to enable him/her/them to fulfill any respective tax obligations that may arise for him/her/them in connection with your business relationship with DBTCA.

Please complete and attach separate W-8 or W-9 documentation as applicable.

Terms and Conditions and Representations

By signing below, you acknowledge receipt of the Terms and Conditions for Deposit Accounts attached to this Application and agree to be bound by them. In addition, you agree to notify us immediately of any material change to the information provided by you on this Application.

You represent and warrant that all of the information provided by you on this Application is accurate.

The Terms and Conditions for Deposit Accounts are subject to change.

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Page 2 of 3

Acceptance

You understand that this application is subject to acceptance by DBTCA.

Authorized Signer

Authorized Signer

Darren Indyke

Print Name

Print Name

Signature

Date

Date

For Bank Use Only

Reviewed by:

Signature

Name

Title

Date

Accepted by DBTCA:

Signature

Name

Title

Date

Account numbers:

NOW

DDA

CO/DBAG

MMDA

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W-9

Request for Taxpayer

Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Form

(Rev. December 2014)

Department of the Treasury

Internal Revenue Service

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Southern Trust Company, Inc.

2 Business name/disregarded entity name, if different from above

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o

0)

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:

D Individual/sole proprietor or He Corporation D S Corporation 0 Partnership single-member LLC

n Limited liability company. Enter the tax classification (C=C corporation. S=S corporation. Partnership) ▶

Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

PI Other (see Instructions)

▶

4 Exemptions (codes apply only to certain entities, not Individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any)

(Apply to entities that are not U.S.)

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n Trust/estate

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5 Address (number, street, and apt. or suite no.)

6100 Red Hook Quarter B3

Requester's name and address (optional)

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V)

6 City, state, and ZIP code

St Thomas USVI ,00802

V

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CQ

7 List account number(s) here (optional)

Part I

Taxpayer Identification Number (TIN)

Social security number

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid

backup withholding. For individuals, this is generally your social security number (SSN). However, for a

resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other

entities, it is your employer identification number (EIN). If you do not have a number, see How to get a

TIN on page 3.

or

Employer Identification number

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for

guidelines on whose number to enter.

6 6

0 7 7 9 8 6 1

Part II

Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

2. 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

3. I am a U.S. citizen or other U.S. person (defined below); and

4. The FATCA code(s) entered on this form (if any) indicating that I am

exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding

and dividends on your tax-relevant estate transactions, item 2 does not apply. For mortgage

contributions to an individual retirement arrangement (IRA), and

required to sign the certification, but you must provide your correct TIN.

See the

instructions because you have failed to report a

interest paid, acquisition or abandonment of seŕti(ed property, ca  
generally, payments othertharYinterest and dividers, you^»a^  
instructions on page 3.

Sign

Here

►<g> oJi^bon

signature of

U.S. person

Date

• Form 1098 (home mortgage interest), 1098-E (student loan Intarest), 1098-T  
(tuition)

• Form 1099-C (canceled debt)

• Form 1099-A (acquisition or abandonment of secured property]

Use Form W-9 only if you are a U.S. person (including a resident alien), to  
provide your correct TIN.

fryou do not return Form W-9 to the requester with a TIN, you might be  
subject

to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you;

1. Certify that the TIN you are giving is correct (or you are waiting for a  
number

to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If  
applicable, you are also certifying that as a U.S. person, your allocable  
share of

any partnership Income from a U.S. trade or business is not subject to the  
withholding tax on foreign partners' share of effectively connected income,  
and

4. Certify that FATCA code(s) entered on this form (If any) indicating that  
you are

exempt from the FATCA reporting. Is correct. See What is FATCA reporting? on  
page 2 for further information.

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Infomiation about developments affecting Form W-9 (such  
as legislation enacted after we release it) is at [www.irs.gov/ir/tw9](http://www.irs.gov/ir/tw9).

Purpose of Form

An Individual or entity (Form W-9 requested who Is required to file an  
information

return with the IRS must obtain your correct taxpayer identification number  
(TIN)

which may be your social security number (SSN). individual taxpayer  
identification

number (ITIN), adoption taxpayer identification number (ATIN). or employer  
identification number (EIN), to report on an Information return the amount  
paid to

you, or other amount reportable on an Information return. Examples of  
information

returns Include, but are not limited to, the following:

■ Form 1099-INT interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
- Form W-9 (Rev. 12-2014)

Cat. No. 10231X

Deutsche Bank

Wealth Management

For Bank Use Only

Account Number(s):

Certificate of Corporate Resolutions in favor of

Deutsche Bank Trust Company Americas

The undersigned (the "Undersigned") hereby certifies that;

1. (a) the Undersigned is the duly appointed Secretary or other officer or director duly authorized to (i) certify as to the corporate resolutions or consents ("Corporate Resolutions") of the board of directors or other governing body (the

"Board") and (ii) to keep the records of

Southern Trust Company, Inc.

a corporation duly organized, in good standing, and existing under the laws of Virgin Islands

, (the "Corporation")

; and

(b) the following is a true copy of the Corporate Resolutions of the Board, duly adopted in accordance with applicable law

and governing organizational documents with respect to the account type(s) indicated below ("Account(s)");

Deposit Account(s)

Li Investment Advisory Account(s)

(please select all that apply);

r.; discretionary / non-discretionary

"RESOLVED, that it is desirable and in the best interests of the

Corporation, and the Corporation is authorized, to designate

Deutsche Bank Trust Company Americas (the "Bank") as depository, custodian or investment advisor, as applicable, for such

property as designated by the Corporation from time to time, and to open and maintain Account(s) with the Bank.

Custody Account(s)

RESOLVED, that the Corporation be bound by the terms and conditions set forth in any agreement or contract governing

Account(s) (the "Account Agreement(s)") and any other document relating to products or services provided in connection

with Account(s). as revised and/or amended from time to time (collectively, the "Agreements").

RESOLVED, that the directors, officers, employees and/or agents of the Corporation (the "Authorized Signers") whose

names, titles and signatures appear below, as amended from time to time by the Corporation, are hereby authorized

and directed, for and on behalf of the Corporation, to open, maintain,

manage or close Account(s), to execute the Agreements, and to exercise and direct the exercise of all duties, rights and powers, and to take all actions necessary or appropriate in connection with the opening, maintenance, management or closing of Account(s) in the name of the Corporation, pursuant to the terms and conditions specified in the Agreements, and any applicable laws, rules and regulations. The Bank Is authorized to accept instructions from the Authorized Signer(s) in connection with Account(s), including, but not limited to, endorsements and deposits of negotiable instruments, checks or other orders for the payment of money, and instructions to deposit, withdraw, transfer, deliver or assign assets in Account(s), sell any assets in Account(s), including but not limited to assets listed as "held elsewhere," buy any assets for Account(s) and retain the services of an advisor, including the Bank, consultant or broker/dealer to manage all or part of assets in Account(s), all on such terms as the Authorized Signer(s) direct.

RESOLVED, that the Bank may conclusively assume that all actions taken and instructions given by each of the Authorized Signer(s) have been properly taken or given pursuant to authority vested in such Authorized Signer(s) and the Corporation shall indemnify and hold the Bank harmless from all claims, liabilities, losses, costs, expenses (including attorneys' fees) related to or arising from any action or inaction by any such Authorized Signer(s).

RESOLVED, that the omission from these Corporate Resolutions of any document, arrangement or action to be taken in accordance with the Account(s) or the Agreements shall in no manner derogate from the authority of the Authorized Signer(s) to take all actions necessary, desirable, advisable or appropriate to consummate, effectuate or carry out the transactions contemplated by the foregoing Corporate Resolutions.

RESOLVED, that all actions taken and expenses incurred heretofore by the Board or the Authorized Signer(s) in connection with the Account(s) or the Agreements are hereby ratified, approved and confirmed in all respects.

RESOLVED, that if indicated below, the Authorized Signer(s) is/are authorized to delegate any and all of the powers enumerated in these Corporate Resolutions in connection with the Account(s) to such person(s) as the Authorized Signer(s) may elect. Such delegation shall be made via the execution of the form of Appointment of Agent(s) annexed hereto as Exhibit A."

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AUTHORIZED SIGNER(S):

If any Authorized Signer named below is an  
Jeffrey Epstein\_

Prim Name

Authorized (select one); Individually ~ ; Jointly with \_ .

---

Other \_\_\_\_\_ . . . . .  
 Check only if the above Authorized Signer is authorized to grant powers enumerated in these Corporate Resolutions to agents.  
 Darren Indyte..... Signatory  
 Print Name Title Sicinaiuro ' ' '  
 Authorized (select one); Individually i. Jointly with  
 entity or individual person, please  
 Signatory  
 Title  
 X.  
 Title  
 Signatory  
 L\_i Other  
 Check only if the above Authorized Signer is authorized to grant powers enumerated in these Corporate Resolutions to agents.  
 Signatory  
 Title  
 Authorized (select one); Individually 0 Jointly with  
 Signatory  
 Harry Seller  
 Print Name  
 Other  
 Check only if the above Authorized Signer is authorized to grant powers enumerated in these Corporate Resolutions to agents.  
 Signatory  
 Title  
 Authorized (select one); Individually ' - Jointly with  
  
 Jeanne Brennan  
 Signature  
 Print Name  
 Other  
 Check only if the above Authorized Signer is authorized to grant powers enumerated in these Corporate Resolutions to agents.  
 2. The above Corporate Resolutions are in full force and effect as of the date shown below.  
 3. The Bank may rely conclusively on the instructions of the Authorized Signer(s) in every respect unless or until the Bank receives written notification of the revocation and has had reasonable time to act on such notice.  
 4. No one other than the Corporation has any interest in Accounts opened and maintained in the name of the Corporation.  
 5. The titles and names of the Authorized Signer(s) appearing above, whose signatures appear above or on any attached signatory list, are true, correct and genuine.  
 The authorities previously granted to any Authorized Signer not named herein are hereby revoked.  
 In witness whereof, on the date shown below, I have subscribed my signature and affixed the Corporate Seal (if required)

seal of the Corporation (if re^fu^^ed);,.-^-  
If no seal is provided, the  
Corporation is representing  
that no seal is required.  
Signature

I  
Prim Name a^d Tide  
& ? \ n U-7  
Date of this CCTlificalG of Corpomlo Rosolutions (Fill in date-this docnmcni  
is not valid il date is left blank)

:  
1  
IS one of the Authoiized Signers named  
ions must be confirmed below by another officei  
oTs not designated an Authorized Signer above unless the  
\*\*lphe Secretary o^her authorized officer or\_ili  
/^bove. this Certified of Corpora  
or director of the Cor  
Authorized SignerrSri the only officers or di/ectors of the Corporation.

I  
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10 -fg&s  
Prim Name and Title  
WMI6795'1\_DBTCA 019582.062016  
Z  
Deutsche Bank  
Wealth Management  
Signature Card  
Deutsche Bank Trust Company Americas  
Southern Trust Company, Inc.  
Account Holder Title  
Individual  
Account Number  
ITF/POD/ATF\* ✓  
' Limited Liability  
Corporation  
Other;  
Number of Signatures  
Required: 1.  
lorale  
JoipL with Rights  
ofpurvtvorship  
JgjdtrTenanls  
in Common  
Partnership

Jeffrey Epstein

Prim Name  
Darren Indyke  
Prim Name  
Harry Seller  
Prim Name  
Jeanne Brennan  
Prim Name  
ignatur

olAJLMa  
Sigrtalure

Signature

ignature  
Approved  
Power of Attorney  
Date  
Specimen Signature

\* For ITF/POD/ATF See Supplemental Terms and Conditions  
Date of Power of Attorney  
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