STATE OF NEVADA

ROSS MILLER
Secretary of State

SCOTT W. ANDERSON
Deputy Secretary
for Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE

Dear Business Customer:

Enclosed is a *Trust Account Application and Terms and Conditions*. Any business or individual may open a trust account to be used for processing work in the office or on the Secretaryof State's Web site. The State Treasurer then holds the money deposited with the Secretary of Statein trust. If you wish to use this service, please complete, sign, and return the **Trust Account Application** and **Terms and Conditions** along with a minimum **$200 initial deposit**. Please note that a $100 minimum balance must be maintained at all times.

All fees due to the Secretary of State may be charged against the trust account. When requesting that fees be charged against trust funds, please indicate the account number to be chargedand the name of the person submitting the request. Requests cannot be processed without this information. Your account will be charged and a copy of the invoice will be sent to your addressshowing the charges.

If the account balance is insufficient to cover a request, the account will automatically be placed in a "HOLD" status until receipt of sufficient fees. To avoid delays in processing yourdocuments, please monitor the balance of the account on a regular basis by calling the Accounting Division (775) 684-5780.

Statements will be mailed monthly and will show monthly activity of invoices, deposits, credits, and your available balance.

If you have any questions concerning the services explained above, please do not hesitate to contact the Accounting Division at (775) 684-5780.

Sincerely,
Trust Account Management
Accounting Division

TERMS & CONDITIONS

In connection with the application for trust account, (applicant - please print or type)

Agrees to the following terms and conditions:

1 Applicant will be assigned a six digit account number by the Secretary of State, which must be clearly displayed on every request for service.

2 The Secretary of State and/or the State of Nevada assumes no liability for the unauthorized use of applicant's account or account number.

3 All deposits to applicant's account are to be accompanied by a letter of transmittal to the Secretary of State specifically stating the remittance is for applicant's trust account and citing the account number. All trust accounts must maintain a positive balance with a minimum balance of $100.

4 The Secretary of State reserves the right to terminate applicant's account for failure to comply with any of these terms and conditions. Notice of termination of the account will be made in writing and will state the effective date of the termination. Any unencumbered balance will be refunded.

5 Applicant may cancel the trust account by written notice of cancellation to the Secretary of State setting forth the effective date of the cancellation and requesting a refund of any unencumbered account balance.

6 Applicant agrees to hold the Secretary of State and/or the State of Nevada harmless and indemnify the Secretary of State and/or the State of Nevada from any and all liability or damages resulting from applicant's failure to maintain funds in the trust account sufficient to cover requested services.

7 Trust Account funds or deposits will not accrue interest on behalf of the applicant.

ACCOUNT NAME

ADDRESS

ZIP/POSTAL CODE

PHONE NUMBER

CONTACT (to whom statements will be addressed)

I hereby authorize the Secretary of State to deposit funds to be held in trust by the State of Nevada. I further authorize the Secretary of State to charge against these funds fees for documents or services which I request. I understand that trust accounts are non-interest bearing, and filings/ services are provided on a pre-paid basis.

SIGNATURE

TITLE

DATE

FOR SECRETARY OF STATE USE ONLY

ACCOUNT NUMBER

EFFECTIVE DATE

REVIEWED BY