

**Customer Due Diligence For Additional Signers on Individual Accounts or Authorized Signatures on Business Entities Accounts**

Existing Account Number <u>7105021835</u>		Account Number which is attached to the Signer <u>7211099346</u>	
<b>1. Authorized Signer Information</b>			
Name: <u>Cecile</u> Initial: _____ Last Name: <u>dejongh</u>		Social Security: _____	
Date of Birth: _____ Place of Birth: <u>USA</u>		Home Phone: _____ Other: <u>N/A</u>	
Citizenship: <u>USA</u>		Physical Address: _____	
_____		Mailing Address: _____	
_____		_____	
Place of Employment: <u>Southern Trust Company Inc</u>		Employment Address: _____	
Occupation: <u>Manager</u>		<u>Red Hook Quarters Ste B3</u>	
Work Phone: _____		<u>St. Thomas, VI 00802</u>	
Email: _____		_____	
Relation Account Title: <u>Manager</u>		_____	
ID	Type	Number	Country
1st	DL	_____	USVI
2nd	Passport	_____	USA
			Expiration (MM/DD/YYYY)
			3/20/2017
			5/17/2016
<b>2. Income</b>			
Recurrent Source: <input type="checkbox"/> Own Business <input checked="" type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Other, specify: _____			
Annual Income: <input type="checkbox"/> \$0.01 - \$50,001 <input checked="" type="checkbox"/> \$50,001 - \$150,000 <input type="checkbox"/> \$150,001 - \$250,000 <input type="checkbox"/> Over \$250,000			
<b>3. Client Classification</b>			
<ul style="list-style-type: none"> <li>If the answer is yes for A and C of the following questions, the client will be considered high risk and further action is needed as establish in the Due Diligence Checklist-Guidance For Individuals or Entities Considered as High Risk.</li> <li>If the answer to C is yes, then authorization from the Compliance Department-BSA Division is required.</li> </ul>			
		Yes	No
A. Indicate whether the client is a nonresident alien: (NAICS #100000)	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B. Indicate whether the client is a resident alien: (NAICS #200000)	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
C. Indicate whether the client is related to an officer of a foreign government and document the type of relationship: (NAICS #400000)	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4. Verification System - For use only as Contingency Plan if CHEXSYSTEM was called</b>			
Name of the Representative who attended your call: _____			
Response to Social Security: Year: _____ State: _____ Other: _____			
Response on Industry Behavior: _____			
Response on ID: _____			
<b>5. Account Opening Authorization</b>			
<input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Denied	
<u>Madelin Colon</u> Name	<u>[Signature]</u> Signature	<u>1082</u> Officer No.	<u>2/22/13</u> Date
Comments, if applicable: _____			
_____			
Interviewed by: <u>Elizabeth Ferguson</u> Name			
<u>[Signature]</u> Signature		<u>02/22/13</u> Date	

MNNS-1306-1111

**CONFIDENTIAL**

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**Customer Due Diligence For Additional Signers on Individual Accounts or Authorized Signatures on Business Entities Accounts**

Existing Account Number <u>7191317861</u>	Account Number which is attached to the Signer <u>7211099346</u>			
<b>1. Authorized Signer Information</b>				
Name: <u>Jeanne</u> Initial: <u>K</u> Last Name: <u>brennan</u>				
Date of Birth: <span style="background-color: black; color: black;">[REDACTED]</span> Place of Birth: <u>NY</u> Social Security: <span style="background-color: black; color: black;">[REDACTED]</span>				
Citizenship: <u>USA</u> Home Phone: <u>N/A</u> Other: <u>N/A</u>				
Physical Address: <span style="background-color: black; color: black;">[REDACTED]</span> Mailing Address: <u>6100 Red Hook Quarter B3</u> <u>St. Thomas, VI 00802</u>				
Place of Employment: <u>Financial Trust Company Inc</u> Employment Address: <u>6100 Red Hook Quarter B3</u> <u>St. Thomas, VI 00802</u>				
Occupation: <u>Attorney</u> <u>Continues office mgr</u>				
Work Phone: <span style="background-color: black; color: black;">[REDACTED]</span>				
Email: <span style="background-color: black; color: black;">[REDACTED]</span>				
Relation Account Title: <u>Continues</u>				
ID	Type	Number	Country	Expiration (MM/DD/YYYY)
1st	DL	c000000054020	USVI	9/2/2017
2nd	Passport	445699801	USA	5/19/2018
<b>2. Income</b>				
Recurrent Source: <input type="checkbox"/> Own Business <input checked="" type="checkbox"/> Private <input type="checkbox"/> Government <input type="checkbox"/> Other, specify: _____				
Annual Income: <input type="checkbox"/> \$0.01 - \$50,001 <input checked="" type="checkbox"/> \$50,001 - \$150,000 <input type="checkbox"/> \$150,001 - \$250,000 <input type="checkbox"/> Over \$250,000				
<b>3. Client Classification</b>				
<ul style="list-style-type: none"> <li>• If the answer is yes for A and C of the following questions, the client will be considered high risk and further action is needed as establish in the Due Diligence Checklist-Guidance For Individuals or Entities Considered as High Risk.</li> <li>• If the answer to C is yes, then authorization from the Compliance Department-BSA Division is required.</li> </ul>				
A. Indicate whether the client is a nonresident alien: (NAICS #100000)	_____	Yes	No	
B. Indicate whether the client is a resident alien: (NAICS #200000)	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
C. Indicate whether the client is related to an officer of a foreign government and document the type of relationship: (NAICS #400000)	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>4. Verification System- For use only as Contingency Plan if CHEXSYSTEM was called</b>				
Name of the Representative who attended your call: _____				
Response to Social Security: Year: _____ State: _____ Other: _____				
Response on Industry Behavior: _____				
Response on ID: _____				
<b>5. Account Opening Authorization</b>				
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied				
Name <u>Maddie Colon</u>	Signature <u>[Signature]</u>	Officer No. <u>102</u>	Date <u>2/22/13</u>	
Comments, if applicable: _____				
Interviewed by: <u>Elizabeth Ferguson</u>				
Name <u>Elizabeth Ferguson</u>	Signature <u>[Signature]</u>	Date <u>02/22/13</u>		

NNNS-1306-1111

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Corp No. 581871

**GOVERNMENT OF  
THE VIRGIN ISLANDS OF THE UNITED STATES  
— 0 —  
CHARLOTTE AMALIE, ST. THOMAS, VI 00802**

*To All To Whom These Presents Shall Come:*

I, the undersigned, LIEUTENANT GOVERNOR, DO hereby certifies that

**FINANCIAL INFOMATICS, INC.**

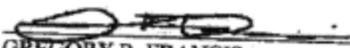
**Business Corporation**

of the Virgin Islands filed in my office on **November 18, 2011** as provided for by law, Articles of Incorporation, duly acknowledged.

WHEREFORE the persons named in said Articles, and who have signed the same, and their successors, are hereby declared to be from the late aforesaid, a Business Corporation by the name and for the purposes set forth in said Articles, with the right of succession as therein stated.



Witness my hand and the seal of the Government of the Virgin Islands of the United States, at Charlotte Amalie, St. Thomas, this 8th day of December, 2011.

  
GREGORY R. FRANCIS  
Lieutenant Governor of the Virgin Islands

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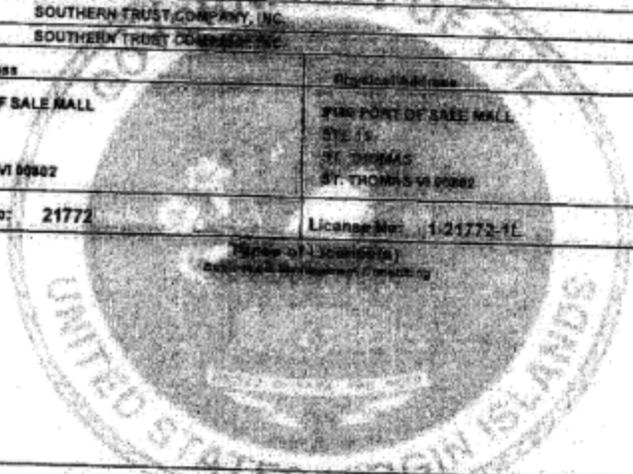
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THE GOVERNMENT OF THE VIRGIN ISLANDS  
DEPARTMENT OF LICENSING AND CONSUMER AFFAIRS  
**BUSINESS LICENSE**

KNOW ALL BY THIS PRESENT

That, in accordance with the applicable provisions of Title 3 Chapter 16 and Title 27 V.I.C. relating to the licensing of businesses and occupations, and compliance having been made with the provisions of 10 V.I.C. Sec. 41 relating to the Civil Rights Act of the Virgin Islands, the following license is hereby granted:

Licensee: SOUTHERN TRUST COMPANY, INC.	
Trade Name: SOUTHERN TRUST COMPANY, INC.	
Mailing Address	Physical Address
9100 PORT OF SALE MALL STE 15 ST. THOMAS ST. THOMAS VI 00802	9100 PORT OF SALE MALL STE 15 ST. THOMAS ST. THOMAS VI 00802
Business No: 21772	License No: 1-21772-1L
	

As provided by law, the authorized licensing authority shall have the power to revoke or suspend any License issued hereunder, upon finding, ~~with notice and adequate hearing,~~ that such revocation or suspension is in the public interest; provided, that any persons aggrieved by any such decision of this office shall be entitled to a review of the same by the Territorial Court upon appeal made within (30) days from the date of the decision; provided, further, that all decisions of this office hereunder shall be final except upon specific findings by the Court that the same was arrived at by fraud or illegal means.

**2012**

If a renewal is desired, the holder is responsible for making application for same without any notice from this office. It is the responsibility of the Licensee to notify the Department in writing within (30) days, when a license is to be cancelled or placed in inactive status. Failure to do so will result in the assessment of penalties as authorized by law.

Valid from 12/01/2012 until 12/31/2013  
Printed on 12/20/2012  
Issued at St. Thomas, V.I.  
Fee 390.00



Commissioner, Department of Licensing and Consumer Affairs

**THIS LICENSE MUST BE PROMINENTLY DISPLAYED AT PLACE OF BUSINESS**

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EFTA01269488

GOVERNMENT OF  
THE VIRGIN ISLANDS OF THE UNITED STATES  
-O-  
CHARLOTTE AMALIE, ST. THOMAS, VI 00802

To Whom These Presents Shall Come:

I, the undersigned, LIEUTENANT GOVERNOR, do hereby certify that

FINANCIAL INFOMATICS, INC.

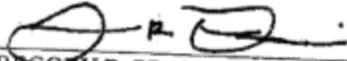
a Virgin Islands corporation, filed in the Office of the Lieutenant Governor on September 21, 2012 as provided for by law, Certificate of Amendment Articles of Incorporation, duly acknowledged; changing its name to

SOUTHERN TRUST COMPANY, INC.

WHEREFORE the said Amendment is hereby declared to have been duly recorded in this office on the aforesaid and to be in full force and effect from that date.



Witness my hand and the seal of the Government of the United States Virgin Islands, at Charlotte Amalie, this 31<sup>st</sup> day of October, A.D. 2012.

  
GREGORY R. FRANCIS  
Lieutenant Governor of the Virgin Islands

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DATE STAMPED  
COPY

CERTIFICATE OF AMENDMENT  
TO ARTICLES OF INCORPORATION  
OF  
FINANCIAL INFOMATICS, INC.

Financial Infomatics, Inc. a corporation duly organized and existing under and by virtue of the General Corporation Law of the Virgin Islands (the "Corporation") DOES HEREBY CERTIFY that the following Amendment to its Articles of Incorporation has been duly adopted in accordance with the provisions of Title 13 of the Virgin Islands Code, General Corporation Law, Section 222.

Article I of the Articles of Incorporation is hereby amended by deleting Article I in its entirety and inserting the following in lieu thereof:

ARTICLE I

The name of this Corporation (hereinafter referred to as the "Corporation") is *Southern Trust Company, Inc.*

IN WITNESS WHEREOF, the undersigned persons have hereunto set their hands as the President and the Secretary of the Corporation this 20 day of September, 2012.

Jeffrey Epstein, President  
Darren Indyka, Secretary

IN THE STATE OF New York  
DISTRICT OF \_\_\_\_\_

BEFORE ME, the undersigned authority, on this 20 day of September, 2012 personally appeared Jeffrey Epstein and Darren Indyka, who, being by me first duly sworn, declared that they are the persons who signed the foregoing document as the President and Secretary of the Corporation and that the statements contained in these Articles of Amendment are true.

HARRY I. BELLER  
Notary Public

HARRY I. BELLER  
Notary Public, State of New York  
No. 018E4853924  
Qualified in Rockland County  
Commission Expires Feb. 17, 2014

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ARTICLES OF INCORPORATION  
OF  
FINANCIAL INFOMATICS, INC.

We, the undersigned, for the purposes of associating to establish a corporation for the transaction of the business and the promotion and conduct of the objects and purposes hereinafter stated, under the provisions and subject to the requirements of the laws of the Virgin Islands of the United States (hereinafter called the "Virgin Islands"), and particularly the General Corporation Law of the Virgin Islands (Chapter 1, Title 13, Virgin Islands Code), as the same may be amended from time to time, do make and file these Articles of Incorporation in writing and do certify:

**ARTICLE I**

The name of the Corporation (hereinafter referred to as the "Corporation") is **Financial Infomatics, Inc.**

**ARTICLE II**

The principal office of the Corporation in the Virgin Islands is located at 9100 Havensight, Port of Sale, Suite 15-16, St. Thomas, U.S. Virgin Islands, 00802 and the name of the resident agent of the Corporation is Kellerhals Ferguson LLP, whose mailing address is 9100 Havensight, Port of Sale, Suite 15-16, St. Thomas, U.S. Virgin Islands 00802, and whose physical address 9100 Havensight, Port of Sale, Suite 15-16, St. Thomas, U.S. Virgin Islands.

**ARTICLE III**

Without limiting in any manner the scope and generality of the allowable functions of the Corporation, it is hereby provided that the Corporation shall have the following purposes, objects and powers:

- (1) To engage in any lawful business in the United States Virgin Islands.
- (2) To enter into and carry out any contracts for or in relation to the foregoing business with any person, firm, association, corporation, or government or governmental agency.
- (3) To conduct its business in the United States Virgin Islands and to have offices within the United States Virgin Islands.
- (4) To borrow or raise money to any amount permitted by law by the sale or issuance of obligations of any kind, to guarantee loans, other types of indebtedness and financing obligations, and to secure the foregoing by mortgages or other liens upon any and all of the property of every kind of the Corporation.
- (5) To do all and everything necessary, suitable and proper for the accomplishment of any of the purposes or the attainment of any of the objects or the exercise of any of the powers herein set forth, either alone or in connection with other firms, individuals, associations or corporations in the Virgin Islands and elsewhere in the United States and foreign countries, and to do any other acts or things incidental or appurtenant to or growing out of or connected with the said business, purposes, objects and powers of any part thereof not inconsistent with the laws of the Virgin Islands, and to exercise any and all powers now or hereafter conferred by law on business corporations whether expressly enumerated herein or not.

The purposes, objects and powers specified in this Article shall not be limited or restricted by reference to the terms of any other subdivision or of any other article of these Articles of Incorporation.

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ARTICLE IV

The total number of shares of all classes of stock that the Corporation is authorized to issue is Ten Thousand (10,000) shares of common stock at \$.01 par value; no preferred stock authorized.

The minimum amount of capital with which the Corporation will commence business is One Thousand Dollars (\$1,000).

ARTICLE V

The names and places of residence of each of the persons forming the Corporation are as follows:

NAME

RESIDENCE

Erika A. Kellerhals  
Gregory J. Ferguson  
Brett Geary

2E-19 Estate Caret Bay, St. Thomas, V.I. 00802  
31-B Peterborg, St. Thomas, V.I. 00802  
2-11B St. Joseph & Rosendahl, St. Thomas, V.I. 00802

ARTICLE VI

The Corporation is to have perpetual existence.

ARTICLE VII

For the management of the business and for the conduct of the affairs of the Corporation, and in further creation, definition, limitation and regulation of the powers of the Corporation and of its directors and stockholders, it is further provided:

- (1) The number of directors of the Corporation shall be fixed by, or in the manner provided in, the by-laws, but in no case shall the number be fewer than three (3). The directors need not be stockholders.
- (2) In furtherance and not in limitation of the powers conferred by the laws of the Virgin Islands, and subject at all times to the provisions thereof, the Board of Directors is expressly authorized and empowered:
  - (a) To make, adopt and amend the by-laws of the Corporation, subject to the powers of the stockholders to alter, repeal or modify the by-laws adopted by the Board of Directors.
  - (b) To authorize and issue obligations of the Corporation, secured and unsecured, to include therein such provisions as to redeemability, convertibility or otherwise, as the Board of Directors in its sole discretion may determine, and to authorize the mortgaging or pledging of, and to authorize and cause to be executed mortgages and liens upon any property of the Corporation, real or personal, including after acquired property.
  - (c) To determine whether any and, if any, what part of the net profits of the Corporation or of its net assets in excess of its capital shall be declared in dividends and paid to the stockholders, and to direct and determine the use and disposition thereof.

- (d) To set apart a reserve or reserves, and to abolish such reserve or reserves, or to make such other provisions, if any, as the Board of Directors may deem necessary or advisable for working capital, for additions, improvements and betterments to plant and equipment, for expansion of the business of the Corporation (including the acquisition of real and personal property for this purpose) and for any other purpose of the Corporation.
- (e) To establish bonus, profit-sharing, pension, thrift and other types of incentive, compensation or retirement plans for the officers and employees (including officers and employees who are also directors) of the Corporation, and to fix the amount of profits to be distributed or shared or contributed and the amounts of the Corporation's funds or otherwise to be devoted thereto, and to determine the persons to participate in any such plans and the amounts of their respective participations.
- (f) To issue or grant options for the purchase of shares of stock of the Corporation to officers and employees (including officers and employees who are also directors) of the Corporation and on such terms and conditions as the Board of Directors may from time to time determine.
- (g) To enter into contracts for the management of the business of the Corporation for terms not exceeding five (5) years.
- (h) To exercise all the powers of the Corporation, except such as are conferred by law, or by these Articles of Incorporation or by the by-laws of the Corporation upon the stockholders.
- (i) To issue such classes of stock and series within any class of stock with such value and voting powers and with such designations, preferences and relative, participating, optional or other special rights, and qualifications, limitations or restrictions thereof, as is stated in the resolution or resolutions providing for the issue of such stock adopted by the Board of Directors and duly filed with the office of the Lt. Governor of the Virgin Islands in accordance with Sections 91 and 97, Chapter 13, Virgin Islands Code, as the same may be amended from time to time.

#### ARTICLE VIII

No stockholder shall sell, convey, assign or otherwise transfer any of his or her shares of stock without first offering the same to the Corporation at the lowest price at which the stockholder is willing to dispose of the same; and the Corporation shall have thirty (30) days within which to accept same; the Corporation shall notify the stockholder of its election in writing. If accepted by the Corporation, the stockholder shall promptly assign the shares of stock to the Corporation, and the Corporation shall promptly pay therefor. If the Corporation rejects the offer, then the stockholder shall offer the stock to the remaining stockholders under the same terms as offered to the Corporation; and the remaining stockholders shall have thirty (30) days within which to collectively or individually accept the same in writing. If the remaining stockholders reject the offer, then the stockholder shall have the right to sell the stock at the same or a greater price than that at which it was offered to the Corporation. If the stockholder shall desire to sell the stock at a lesser price than that originally quoted to the Corporation, the stockholder must then repeat the process of offering the stock for sale to the Corporation and the stockholders in turn. Shares of stock in this Corporation shall not be transferred or sold until the sale or transfer has been reported to the Board of Directors and approved by them.

No stockholder shall pledge as collateral for indebtedness any shares of stock without first obtaining the written consent of a majority of the disinterested members of the Board of Directors of the Corporation.

#### ARTICLE IX

At all elections of directors, each stockholder shall be entitled to as many votes as shall equal the number of votes that (except for such provision as to cumulative voting) the stockholder would be entitled to cast for the election of directors with respect to his or her shares of stock multiplied by the number of directors to be elected. The stockholder may cast all votes for a single director or distribute them among any two or more of them as he or she may see fit. At least ten (10) days notice shall be given, however the shareholders are entitled to waive notice of the meeting as provided by law. Furthermore, the meeting and vote of stockholders may be dispensed with, if all of the stockholders who would have been entitled to vote upon the action if such meeting were held, shall consent in writing to such corporate action being taken.

#### ARTICLE X

Subject to the provisions of Section 71, Title 13, Virgin Islands Code, the Corporation may enter into contracts or otherwise transact business with one or more of its directors or officers, or with any firm or association of which one or more of its directors or officers are members or employees, or with any other corporation or association of which one or more of its directors or officers are stockholders, directors, officers, or employees, and no such contract or transaction shall be invalidated or in any way affected by the fact that such director or directors or officer or officers have or may have interests therein that are or might be adverse to the interests of the Corporation even though the vote of the director or directors having such adverse interest is necessary to obligate the Corporation on such contract or transaction, provided that in any such case the fact of such interest shall be disclosed or known to the directors or stockholders acting on or in reference to such contract or transaction. No director or directors or officer or officers having such disclosed or known adverse interest shall be liable to the Corporation or to any stockholder or creditor thereof or to any other person for any loss incurred by it under or by reason of any such contract or transaction, nor shall any such director or directors or officer or officers be accountable for any gains or profits realized thereon. The provisions of this Article shall not be construed to invalidate or in any way affect any contract or transaction that would otherwise be valid under law.

#### ARTICLE XI

(a) The Corporation shall indemnify any person who was or is a party or is threatened to be made a party to any threatened, pending, or completed action, suit, or proceeding, whether civil, criminal, administrative, or investigative (other than an action by or in the right of the Corporation) by reason of the fact that he or she is or was a director, officer, employee, or agent of the Corporation, or is or was serving at the request of the Corporation as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust, or other enterprise, against expenses (including attorney's fees), judgments, fines, and amounts paid in settlement actually and reasonably incurred by him or her in connection with such action, suit, or proceeding if:

- (1) he or she acted
  - (A) in good faith and
  - (B) in a manner reasonably believed to be in or not opposed to the best interests of the Corporation; and
- (2) with respect to any criminal action or proceeding, he or she had no reasonable cause to believe his or her conduct was unlawful.

The termination of any action, suit, or proceeding by judgment order, settlement, conviction, or upon a plea of nolo contendere or its equivalent, shall not, of itself, create a presumption that the person did not act in good faith and in a manner which he or she reasonably believed to be in or not opposed to the best interests of the Corporation and, with respect to any criminal action or proceeding, had reasonable cause to believe that his conduct was unlawful.

(b) The Corporation shall indemnify any person who was or is a party or is threatened to be made a party to any threatened, pending, or completed action or suit by or in the right of the officer, employee, or agent of the Corporation, or is or was serving at the request of the venture, trust, or other enterprise against expenses (including attorney's fees) actually and reasonably incurred by him or her in connection with the defense or settlement of such action or suit if he or she acted:

- (1) in good faith; and
- (2) in a manner he or she reasonably believed to be in or not opposed to the best interests of the Corporation.

However, no indemnification shall be made in respect of any claim, issue, or matter as to which such person shall have been adjudged to be liable for negligence or misconduct in the performance of his or her duty to the Corporation unless and only to the extent that the court in which such action or suit is brought shall determine upon application that, despite the adjudication of liability but in view of all the circumstances of the case, such person is fairly and reasonably entitled to indemnity for such expenses which the court shall deem proper.

(c) To the extent that a director, officer, employee, or agent of the Corporation has been successful on the merits or otherwise in defense of any action, suit, or proceeding referred to in subparagraphs (a) and (b), or in defense of any claim, issue, or matter therein, he or she shall be indemnified against expenses (including attorneys' fees) actually and reasonably incurred by him or her in connection therewith.

(d) Any indemnification under subparagraphs (a) and (b) (unless ordered by a court) shall be made by the Corporation only as authorized in the specific case upon a determination that he or she had met the applicable standard of conduct set forth in subparagraphs (a) and (b). Such determination shall be made:

- (1) by the board of directors by a majority vote of a quorum consisting of directors who were not parties to such action, suit, or proceeding; or
- (2) if such a quorum is not obtainable, or even if obtainable a quorum of disinterested directors so directs, by independent legal counsel in a written opinion; or
- (3) by the stockholders.

(e) Expenses incurred in defeating a civil or criminal action, suit, or proceeding may be paid by the Corporation in advance of the final disposition of such action, suit, or proceeding as authorized by the board of directors in the specific case upon receipt of an undertaking by or on behalf of the director, officer, employee, or agent to repay such amounts unless it shall ultimately be determined that he or she is entitled to be indemnified by the Corporation as authorized in this article.

(f) The indemnification provided by this Article shall not be deemed exclusive of any other rights to which those seeking indemnification may be entitled under any bylaw, agreement, vote of stockholders or disinterested directors, or otherwise, both as to action in his or her official capacity and as to action in another capacity while holding such office, and shall continue as to a person who has ceased to be a

director, officer, employee, or agent and shall inure to the benefit of the heirs, executors, and administrators of such person.

- (g) The Corporation shall have power to purchase and maintain insurance on behalf of any person who is or was a director, officer, employee, or agent of the Corporation, or is or was serving at the request of the Corporation as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust, or other enterprise against any liability asserted against him or her and incurred by him or her in any such capacity, or arising out of his or her status as such, whether or not the Corporation would have the power to indemnify him or her against such liability under the provisions of this Article.

#### **ARTICLE XII**

The Corporation reserves the right to amend, alter or repeal any of the provisions of these Articles of Incorporation and to add or insert other provisions authorized by the laws of the Virgin Islands in the manner and at the time prescribed by said laws, and all rights at any time conferred upon the Board of Directors and the stockholders by these Articles of Incorporation are granted subject to the provisions of this Article.

2011/08/10 09:28:46  
CORPORATE

[signature page follows]

**CONFIDENTIAL**

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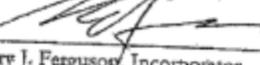
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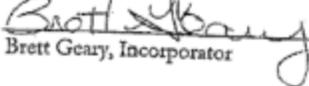
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IN WITNESS WHEREOF, we have hereunto subscribed our names this 17th day of November, 2011.

  
\_\_\_\_\_  
Erika A. Kellerhals, Incorporator

  
\_\_\_\_\_  
Gregory J. Ferguson, Incorporator

  
\_\_\_\_\_  
Brett Geary, Incorporator

TERRITORY OF THE UNITED STATES VIRGIN ISLANDS )  
DISTRICT OF ST. THOMAS AND ST. JOHN )

The foregoing instrument was acknowledged before me this 17th day of November, 2011, by Erika A. Kellerhals, Gregory J. Ferguson, and Brett Geary.

  
\_\_\_\_\_  
Notary Public

GINA MARIE BRYAN  
NOTARY PUBLIC NP 069-09  
COMMISSION EXPIRES 09/28/2013  
ST. THOMAS/ST. JOHN, USVI

2011 NOV 18 PM 2:46  
CCTV

**CONFIDENTIAL**

SDNY\_GM\_00013687

CONFIDENTIAL

FirstBankPR000850

EFTA\_00124330

EFTA01269497

I, the undersigned Secretary, hereby certify to FirstBank, that at a meeting of the Board of Directors of Southern Trust Company, Inc. ("Corporation")

a corporation organized and existing under the laws of U.S. Virgin Islands duly called and duly held on the 4 day of December, 2012 the following Resolutions were duly adopted, and that the said Resolutions have been entered upon the regular minute books of the Corporation, are in accordance with the By-Laws and are now in full force and effect.

**RESOLVED:**

1. The Officers of Corporation, or any one or more of them, are hereby authorized to open a bank account or accounts from time to time with FirstBank and its subsidiaries and affiliates (each being hereinafter referred to as "Bank") for and in the name of Corporation with such title or titles as he or they may designate.

2. The President and Secretary  
(Indicate by Title person(s) authorized, e.g., President, Treasurer, Bookkeeper, etc.)

of Corporation, signing singly  
(For purpose of signing items, indicate e.g., singly, any two, etc.)

and their successors and any other person hereinafter authorized by any means to sign on behalf of Corporation ("Authorized Person(s)") are hereby authorized to sign, by hand or by facsimile (including, but not limited to, computer generated) signature(s), checks, drafts, acceptances and other instruments (hereinafter each collectively referred to as "Item(s)"). Notwithstanding the above, any Authorized Person is authorized singly to: (1) initiate Automated Clearing House ("ACH") debits without a signature; (2) initiate payments by use of Depository Transfer Checks ("DTC") without a signature other than the name of Corporation printed on the DTC; or (3) give instructions, by means other than the signing of an item, with respect to any account transaction, including, but not limited to, the payment, transfer or withdrawal of funds by wire, computer or other electronic means, or otherwise, of money, credits, items or property at any time held by Bank for account of Corporation ("Instructions").

3. Bank is hereby authorized to honor and pay items, whether signed by hand or by facsimile (including, but not limited to, computer generated) signature(s) if the actual or purported facsimile signature(s), regardless of how or by whom affixed, resembles the specimens filed with Bank by Corporation and other orders, DTCs, ACHs, and Instructions, given singly by any Authorized Person. Bank is further authorized to honor and pay DTCs, ACHs, Instructions, and other orders given singly by any Authorized Person, including such as may bring about or increase an overdraft and such as may be payable to or for the benefit of any Authorized Person or other Officer or employee individually, without inquiry as to the circumstances of the issuance or the disposition of the proceeds thereof and without limit as to amount.

4. Bank is hereby authorized to accept for deposit, for credit, or for collection, or otherwise, items endorsed by any person or by stamp or other impression in the name of Corporation without inquiry as to the circumstances of the endorsement or any lack of endorsement or the disposition of the proceeds.

5. The President  
(Indicate by Title person(s) authorized to effect Loans, Advances, etc., e.g., President, Vice President, Treasurer, etc.)

of Corporation, signing singly  
(Indicate how Notes, etc. are to be signed, e.g., singly, any two, etc.)

are hereby authorized to effect loans and advances and obtain credit at any time for Corporation from Bank (and guarantee on behalf of Corporation the obligations of others to Bank), secured or unsecured, and for such loans and advances and credit and guarantees to make, execute and deliver promissory notes and other written obligations or evidence of indebtedness of Corporation, applications for letters of credit, instruments of guarantee and indemnity and any agreements or undertakings, general or specific, with respect to any of the foregoing, and as security for the payment of loans, advances, indebtedness, guarantees and liabilities of, or credit given to, Corporation or others to pledge, hypothecate, mortgage, assign, transfer, grant liens and security interests in, give rights with respect to, endorse and deliver property of any description, real or personal, and any interest therein and evidence of any thereof at any time held by Corporation, and to execute mortgages, deeds of trust, security agreements, instruments of transfer, assignment or pledge, powers of attorney and other agreements or instruments which may be necessary or desirable in connection therewith; and also to sell to, or discount with Bank, commercial paper, bills receivable, accounts receivable, stocks, bonds or any other securities or property at any time held by Corporation, and to that end to endorse, assign, transfer and deliver the same; to execute and deliver instruments or agreements of subordination and assignment satisfactory to Bank and also to give any orders or consents for the delivery, sale, exchange or other disposition of any property or interest therein or evidence thereof belonging to Corporation and at any time in the hands of Bank, whether as collateral or otherwise; and to execute and deliver such other agreements, instruments and documents and to do such other acts and things as may be necessary or desirable or required by Bank in connection with any of the foregoing and Bank is hereby authorized to honor, accept and execute any of the transactions described above.

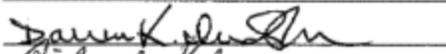
6. All loans, discounts and advances heretofore obtained on behalf of Corporation and all notes and other obligations or evidences thereof of Corporation held by Bank are hereby approved, ratified, and confirmed.

7. Corporation does hereby give to Bank a continuing lien for the amount of any and all liabilities and obligations of Corporation to Bank and claims of every nature and description of Bank against Corporation, whether now existing or hereafter incurred, originally contracted with Bank and/or with another or others and now or hereafter owing to or acquired in any matter by Bank, whether contracted by Corporation alone or jointly and/or severally with another or others, absolute or contingent, secured or unsecured, matured or unmatured upon any and all moneys, securities and any and all other property of Corporation and the proceeds thereof, now or hereafter actually or constructively held or received by or in transit in any matter to or from Bank, its correspondents or agents from or for Corporation, whether for safekeeping, custody, pledge, transmission, collection or otherwise coming into the possession of Bank in any way. Bank shall also have a right of set-off for the amount of the obligations, and Bank may at any time or times and without notice apply Corporation's deposits (general or special), Corporation's credits with Bank, or Corporation's claims against Bank, or any parts thereof, to such obligations and in such amounts as Bank may elect, although said obligations may be contingent or unmatured and whether any collateral therefore is deemed adequate or not.

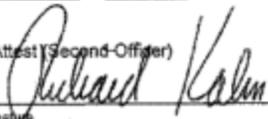
8. In case of conflicting claims or disputes, or doubt on Bank's part as to the validity, extent, modification, revocation or exercise of any of the authorities herein contained Bank may but need not recognize nor give any effect to any notice from any Officer, or from any other person, purporting to cancel, restrict or change any of said authorities, or the exercise thereof, unless Bank is required to do so by the judgment, decree or order of a court having jurisdiction of the subject matter and of the parties to such conflicting claims or disputes.

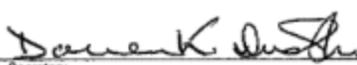
9. Corporation agrees to be bound by the Terms and Conditions for Business Accounts and Services, as well as any signature card, deposit ticket, checkbook, passbook, statement of account, receipt instrument, document or other agreements, such as, but not limited to, funds transfer agreements, delivered or made available to Corporation from Bank and by all notices posted at the office of Bank at which the account of Corporation is maintained, in each case with the same effect as if each and every term thereof were set forth in full herein and made a part hereof.
10. The Officers of Corporation or any one or more of them are hereby authorized to act for Corporation in all other matters and transactions relating to any of its business with Bank including, but not limited to, the execution and delivery of any agreements or contracts necessary to effect the foregoing Resolutions.
11. Bank is hereby released from any liability and shall be indemnified against any loss, liability or expense arising from honoring any of these Resolutions.
12. Subject to paragraph 8 above, each of the foregoing Resolutions and the authority thereby conferred shall remain in full force and effect until written notice of revocation or modification by presentation of new Corporate Resolutions and signature cards shall be received by Bank; provided that such notice shall not be effective with respect to any exercise of said authorities until Bank shall have had a reasonable opportunity to act thereon and in no event prior to the receipt thereof nor with respect to any checks or other instruments, for the payment of money or the withdrawal of funds dated on or prior to the date of such notice, but presented to Bank after the receipt of such notice. The Secretary or any Assistant Secretary or any other Officer of Corporation is hereby authorized and directed to certify, under the seal of Corporation or not, but with like effect in the latter case, to Bank the foregoing Resolutions, the names of the Officers and other representatives of Corporation and any changes from time to time in the said Officers and representatives and specimens of their respective signatures. Bank may conclusively assume that persons at any time certified to it to be Officers or other representatives of Corporation continue as such until receipt by Bank of written notice to the contrary.

I FURTHER CERTIFY that the persons herein designated as Officers of Corporation have been duly elected to and now hold the offices in Corporation set opposite their respective names and that the following are the authentic, official signatures of the said respective Officers and of the named signatories who are not Corporate Officers, to wit:

<u>Name (Typewritten or Printed)</u>	<u>Office</u>	<u>Signature</u>
Jeffrey Epstein	President	
_____	Vice President	_____
Darren Indyke	Secretary	
Richard Kahn	Treasurer	
_____	_____	_____
_____	_____	_____

IN WITNESS WHEREOF, I have hereunto set my hand as Secretary and affixed the seal of the said Corporation this 4 day of December, 2012.

• Attest (Second-Officer)  
  
 Signature  
 \_\_\_\_\_  
 Treasurer  
 Title

  
 Secretary



• Note: In case the Secretary is authorized to sign by the above Resolutions, this certificate should be attested by a second Officer of Corporation.

**CONFIDENTIAL**  
 FirstBankPR000852

SDNY\_GM\_00013689

CONFIDENTIAL

EFTA\_00124332

EFTA01269499

Date of this notice: 02-14-2012

Employer Identification Number:  
66-0779861

Form: 99-e

Number of this notice: CP 575 A

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

FINANCIAL INFORMATICS INC  
9100 HAVENSIGHT 15 16  
ST THOMAS, VI 00802

**WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER**

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 66-0779861. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941SS	01/31/2013
Form 1120	03/15/2012

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

**IMPORTANT INFORMATION FOR S CORPORATION ELECTION:**

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.

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SDNY\_GM\_00013690

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FirstBankPR000853

EFTA\_00124333

EFTA01269500

Account Type: Commercial Checking	Account Number: 7211099346	Sign. Re 1 COM	Date: 02/22/13
Address: 6100 Red Hook Quarters Ste B3 St. Thomas, VI 00802		Tel: 340-775-2525	
Name: Southern Trust Company, Inc Payroll Account		EIN: 66-0779861	
Name: Cecile deJongh <i>Cecile deJongh</i>		SSN: 580-06-1538 ID Type: DL No: <del>XXXXXXXXXX</del>	
Name:		SSN: ID Type: No:	
Name:		SSN: ID Type: No:	
I/We hereby acknowledge having received the Deposit Account Agreement, the First Bancorp Information Sharing and Privacy Policy, and the product rates and fees.		Prepared by: <i>Elizabeth Seymour</i> Authorized by: <i>[Signature]</i>	

Account Type: Commercial Checking	Account Number: 7211099346	Sign. Req. 1 COM	Date: 02/22/13
Address: 6100 Red Hook Quarters Ste B3 St. Thomas, VI 00802		Tel: 340-775-2525	
Name: Southern Trust Company, Inc. Payroll Account		EIN: 66-0779861	
Name: Jeanne Brennan <i>Jeanne Brennan</i>		SSN: 015-45-4746 ID Type: PP No: 445699801	
Name:		SSN: ID Type: No:	
Name:		SSN: ID Type: No:	
I/We hereby acknowledge having received the Deposit Account Agreement, the First Bancorp Information Sharing and Privacy Policy, and the product rates and fees.		Prepared by: <i>Elizabeth Seymour</i> Authorized by: <i>[Signature]</i>	

**CONFIDENTIAL**

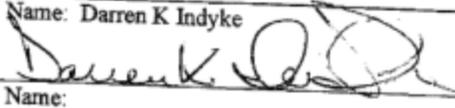
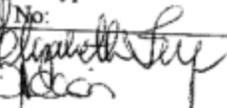
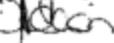
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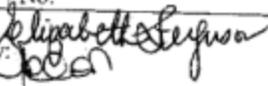
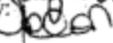
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FirstBankPR000854

EFTA\_00124334

EFTA01269501

Account Type: Commercial Checking	Account Number: 211099346	Sign. Req. 1 COM	Date: 2/22/13
Address: 6100 Red Hook Quarters Ste B3 St. Thomas, VI 00802		Tel: 340-775-2525	
Name: <del>Southern Financial, LLC</del> Southern Trust Company, Inc	EIN: <del>6607991631</del> 660779861		
Name: Darren K Indyke 	SSN: 098-54-8596 ID Type: PP No: 112637684		
Name:	SSN: ID Type: No:		
Name:	SSN: ID Type: No:		
I/We hereby acknowledge having received the Deposit Account Agreement, the First Bancorp Information Sharing and Privacy Policy, and the product rates and fees.		Prepared by:  Authorized by: 	

Account Type: Commercial Checking	Account Number: 7211099346	Sign. Req. 1 COM	Date: 02/22/13
Address: 6100 Red Hook Quarters Ste B3 St. Thomas, VI 00802		Tel: 340-775-2525	
Name: Southern Trust Company, Inc. Payroll Account	EIN: 66-0779861		
Name: Jeffrey E Epstein	SSN: 090-44-3348 ID Type: PP No: 469911707		
Name: 	SSN: ID Type: No:		
Name:	SSN: ID Type: No:		
I/We hereby acknowledge having received the Deposit Account Agreement, the First Bancorp Information Sharing and Privacy Policy, and the product rates and fees.		Prepared by:  Authorized by: 	

**CONFIDENTIAL**

SDNY\_GM\_00013692

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FirstBankPR000855

EFTA\_00124335

EFTA01269502

Existing Account Number  
7211098521

New Account Number  
7211099346

**1. Client Information**

Business or Entity name: Southern Trust Company Inc Payroll Account  
 Employer Identification or Social Security Number: 06-0779861  
 DBA Name (if applicable):  
 Social Security Number (if applicable):  
 Physical Address: Red Hook Quarters Ste B3 St. Thomas, VI 00802  
 Mailing Address: Same  
 Business Phone: 340-775-2525 Fax: Email:

**2. Business/Entity Description**

Type of Business: Household NAICS: 561499 Annual Sales: \$1MM  
 Date Established: 11/6/2011 Number of Employees: 3 Number of Offices: 1  
 DBA  Corporation  Nonprofit Corporation  Partnership  
 Government Agency  Unincorporated Association or Entity  Limited Liability Company  
 Other:

**3. Type Of Product**

Certificate of Deposit  Checking  Saving  Loan  Other, specify

**4. Account Purpose**

Payroll  Operational  Trust  Public Funds  ATM Machine  Escrow  Transfer Funds  
 Correspondal  Investment  Other:

**5. Expected Transactions**

		Monthly Transactions		
Credits	Transactions	<input type="checkbox"/> 1 - 10	<input checked="" type="checkbox"/> 11 - 20	<input type="checkbox"/> 21 or more.
	Total Amount	<input type="checkbox"/> \$1 - \$5,000	<input checked="" type="checkbox"/> \$5,001 - \$25,000	<input type="checkbox"/> \$25,001 or more.
	Transaction Type	<input type="checkbox"/> Cash <input type="checkbox"/> Payroll	<input checked="" type="checkbox"/> Account Transfers	<input checked="" type="checkbox"/> ACH <input checked="" type="checkbox"/> Checks <input type="checkbox"/> POS
		<input type="checkbox"/> Electronic Transfers	<input type="checkbox"/> Other:	
Debits	Transactions	<input type="checkbox"/> 1 - 10	<input checked="" type="checkbox"/> 11 - 20	<input type="checkbox"/> 21 or more.
	Total Amount	<input type="checkbox"/> \$1 - \$5,000	<input checked="" type="checkbox"/> \$5,001 - \$25,000	<input type="checkbox"/> \$25,001 or more.
	Transaction Type	<input checked="" type="checkbox"/> Cash <input checked="" type="checkbox"/> Payroll	<input checked="" type="checkbox"/> Account Transfers	<input checked="" type="checkbox"/> ACH <input checked="" type="checkbox"/> Checks <input type="checkbox"/> POS
		<input type="checkbox"/> Electronic Transfers	<input type="checkbox"/> Other:	

International Transactions - Wire Transfers

Incoming Transfers		Outgoing Transfers	
<input type="checkbox"/> Daily	<input checked="" type="checkbox"/> Weekly	<input type="checkbox"/> Daily	<input checked="" type="checkbox"/> Weekly
<input type="checkbox"/> Monthly		<input type="checkbox"/> Monthly	
Transactions	<input checked="" type="checkbox"/> 1 - 10 <input type="checkbox"/> 11 - 20 <input type="checkbox"/> 21 - 50 <input type="checkbox"/> 51 or more.	Transactions	<input checked="" type="checkbox"/> 1 - 10 <input type="checkbox"/> 11 - 20 <input type="checkbox"/> 21 - 50 <input type="checkbox"/> 51 or more.
Total Amount	<input type="checkbox"/> \$1 - \$25,000 <input checked="" type="checkbox"/> \$25,001 - \$500,000 <input type="checkbox"/> \$500,001 or more.	Total Amount	<input type="checkbox"/> \$1 - \$25,000 <input checked="" type="checkbox"/> \$25,001 - \$500,000 <input type="checkbox"/> \$500,001 or more.
Countries		Countries	

**6. Initial Deposit and Origin of Funds**

Initial Deposit: 500.00 Origin of Funds: transfer from acct # 7211098521  
 If the initial deposit is greater than \$500,000, indicate the source of wealth:

**7. Client Classification**

If the answer is yes to at least one of the following, the client will be considered high risk and further action is needed as establish in the Due Diligence Checklist - Guidance For Individuals or Entities Considered as High Risk.  
 If the answer to D, E, or F is yes, then authorization from the Compliance Department- BSA Division is required.

A. Is the NAICS selected high risk?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
B. Does the business have a private ATM machine on site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
C. Is the business a nonprofit organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D. Is the business a political committee or organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
E. Is the business related to an officer of a foreign government? Indicate the type of relationship:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
F. Is the business engaged in activities related to internet gambling?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**8. Verification System - For use only as Contingency Plan if CHEXSYSTEM was called**

Name of the Representative who attended your call:  
 Response to Employer Identification or Social Security: Year: State: Other:  
 Response on Industry Behavior:

**9. Account Opening Authorization**

Approved  Denied  
 Signature: [Signature] Officer Num: 102 Date: 2/22/13  
 Comments, if applicable:

Interviewed By: Elizabeth Ferguson [Signature] Elizabeth Ferguson [Signature] 02/22/13 [Date]

Virgin Islands

1. Business Information

Account Title ("Depositor"): SOUTHERN TRUST COMPANY INC  
 Account Number: 721-7211099346  
 S.S./TIN/EIN: 66-0779861  
 Physical Address: 6100 RED HOOK QTRS STE B-3  
 Mailing Address: 6100 RED HOOK QTRS STE B-3  
 ST THOMAS, VI 00802-1348  
 Business Telephone # (340)775-2525 Business Fax # (340)775-2528 Internet/Website Address: JABWCPA@GMAIL.COM  
 Line of Business: All Other Business Suppo NAICS Code: 561499 Date Established: 11/18/2011  
 Annual Sales: \$1,000,000.00 Nbr. of Offices/Branches: 1 Nbr. of Employees: 3  
 Property Secured:  Own  Lease  Rented By:  Advertisement  Current Client  Other  
 Contact Person Name & Title: JEFFREY EPSTEIN-PRESIDENT Contact Person Telephone # (340)775-2525

2. Account Type

Sole Proprietorship  Partnership  Corporation  Non-Profit  LLP  LLC  Other COR

Commercial Checking  Arranged OD  Commercial Statement SV  Commercial Passbook Savings  
 Commercial DBA Checking  Arranged OD Offshore (BVI)  Commercial DBA Statement SV  Government Passbook Savings  
 Government Checking  Arranged OD DBA  Commercial Maximizer SV  Certificate of Deposit  
 Commercial Checking IOLTA  Government Statement SV  Commercial DBA Maximizer SV  Other: COMMERCIAL CHECKING A

3. Authorized Signer (Complete the following information for each authorized signer.)

Authorized Signer Name: JEFFREY EPSTEIN Corporate Title: \_\_\_\_\_  
 Physical (Home) Address: LITTLE SAINT JAMES ISLAND Occupation: FINANCIAL CONSU  
 Personal Mailing Address: 6100 RED HOOK QTRS STE B3  
 ST THOMAS, VI 00802-0000 ST THOMAS, VI 00802-1348  
 Social Security Number: 090-44-3348 Date of Birth: 01/20/1953 Place of Birth: US Citizen of: \_\_\_\_\_  
 Home Telephone Number: (340)775-8100 Business Telephone Number: (340)775-2525 Business Fax Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_ Email Address: JEBRENN@ATTGLOBAL.NET  
 Photo Identification Type & Number: DRIVER'S LICENSE-C00000002991 Identification Expiration Date: 01/20/2015  
 YES OFAC/PLC  CHEXSYSTEMS, explain why: \_\_\_\_\_  
 SSN Response: Year: \_\_\_\_\_ State: \_\_\_\_\_ ID Response: \_\_\_\_\_  
 BANK REFERENCE requested:  Yes  No, explain why: \_\_\_\_\_  
 Response: \_\_\_\_\_

Check here if there are additional signers on reverse side of the Client Information Sheet (KYC) Business Accounts

4. Account Agreement Acceptance and Taxpayer Status Certification

The Depositor hereby certifies that FirstBank has been designated as a depository of the depositor and that it has reviewed the information contained in this Client Information Sheet (KYC) and finds it accurate on this date. The Depositor has received and agrees to the Terms and Agreements for Commercial Accounts and Rates and Fees Schedule currently in effect and as may be amended for the type of account and services it has selected. Under penalties of perjury, the Depositor certifies that (1) The number shown on this form is the correct tax identification number and (2) that the Depositor is not subject to backup withholding either because: (a) it has not been notified by the Internal Revenue Service (IRS) that it is subject to withholding as a result of failure to report all interest or dividends, or (b) that the IRS has notified the Depositor that it is no longer subject to backup withholding or it is exempt from backup withholding. (3) the Depositor is a U.S. entity. (Cross out subpart 2(a) if it is not true. If Statement 3 is not true, cross out and complete an appropriate Form W-8)

The Internal Revenue Service does not require your consent to any provision of this document other than the Certification required to avoid backup withholding.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_ Title: (Secretary/Treasurer/Cashier)  
 X

5. Initial Deposit

Type: TRANSFER Amount: \$500.00  
 If the initial deposit is over \$500,000 please document source of funds (Per FD-302 Guide for interviews)

6. Expected Transactions (Monthly)

Do you intend to deposit checks with second endorsements?  Yes  No  
 Do you provide check cashing or remitter services?  Yes  No

Credits: No. of Transactions:  0 - 10  11 - 20  21 - 50  Other: 21 or more  
 Total Amount (\$):  \$0 - \$5,000  \$5,001 - \$15,000  \$15,001 - \$50,000  Other: \$25,001 or more  
 Type:  Cash  Checks  Account Transfers  Wire Transfers  POS  
 Payroll  Direct Deposit  Manager's Checks/Money Orders  ACH  Other CASH

Debits: No. of Transactions:  0 - 10  11 - 20  21 - 50  Other: 21 or more  
 Total Amount (\$):  \$0 - \$5,000  \$5,001 - \$15,000  \$15,001 - \$50,000  Other: \$25,001 or more  
 Type:  Cash  Checks  Account Transfers  Wire Transfers  POS  
 Payroll  Direct Deposit  Manager's Checks/Money Orders  ACH  Other CHECKS

7. Related Accounts (List existing FirstBank and other financial institution accounts. If no existing financial institution relationships list "no accounts")

Current	Yes	No	Account #	Current	Yes	No	Account #
Account Title:				Account Title:			
Financial Institution:				Financial Institution:			

NA227E1 3/2008 1 85 FirstBank Virgin Islands is a Division of FirstBank Puerto Rico NMS-2370-0608R

CONFIDENTIAL

SDNY\_GM\_00013694

**8. Additional Authorized Signers (Complete the following information for each signer.)**

**Authorized Signer Name:** DARREN K INDYKE Corporate Title:  
**Physical (Home) Address:** 2 KEAN CT  
 LIVINGSTON, NJ 07039-0000  
**Occupation:** ATTORNEY  
**Personal Mailing Address:** 6100 RED HOOK QTRS STE B-3  
 ST THOMAS, VI 00802-1348

**Social Security Number:** 098-54-8596 **Date of Birth:** 02/19/1955 **Place of Birth:** US **Citizen of:**  
**Home Telephone Number:** **Business Telephone Number:** (212)971-1314 **Business Fax Number:** **Mobile Number:** **Email Address:**

**Years in Country:** **Photo Identification Type & Number:** DRIVER'S LICENSE -4589 **Identification Expiration Date:** 04/30/2015

YES  CHEXSYSTEMS, explain why: SSN Response: Year State ID Response:  
**OFAC/PLC**  **BANK REFERENCE requested:**  Yes  No, explain why: Response:

**Authorized Signer Name:** CECILE DEJONGH Corporate Title:  
**Physical (Home) Address:** 23 8 ESTATE MAFOLIE  
 ST THOMAS, VI 00802-0000  
**Occupation:** MANAGER  
**Personal Mailing Address:** PO BOX 8361  
 ST THOMAS, VI 00801-1361

**Social Security Number:** 580-06-1538 **Date of Birth:** 03/20/1962 **Place of Birth:** US **Citizen of:**  
**Home Telephone Number:** (340)777-6157 **Business Telephone Number:** (340)775-2525 **Business Fax Number:** **Mobile Number:** (340)244-7676 **Email Address:**

**Years in Country:** **Photo Identification Type & Number:** DRIVER'S LICENSE C000000055289 **Identification Expiration Date:** 03/20/2017

YES  CHEXSYSTEMS, explain why: SSN Response: Year State ID Response:  
**OFAC/PLC**  **BANK REFERENCE requested:**  Yes  No, explain why: Response:

**Authorized Signer Name:** JEANNE K BRENNAN Corporate Title:  
**Physical (Home) Address:** 6L 10 CABRITA  
 ST THOMAS, VI 00802-0000  
**Occupation:** ATTORNEY  
**Personal Mailing Address:** 6100 RED HOOK QUARTER B3  
 ST THOMAS, VI 00802-0000

**Social Security Number:** 015-46-4746 **Date of Birth:** 09/02/1980 **Place of Birth:** US **Citizen of:**  
**Home Telephone Number:** **Business Telephone Number:** (340)775-2525 **Business Fax Number:** **Mobile Number:** **Email Address:**

**Years in Country:** **Photo Identification Type & Number:** DRIVER'S LICENSE -C000 **Identification Expiration Date:** 09/02/2017

YES  CHEXSYSTEMS, explain why: SSN Response: Year State ID Response:  
**OFAC/PLC**  **BANK REFERENCE requested:**  Yes  No, explain why: Response:

**Authorized Signer Name:** Corporate Title:  
**Physical (Home) Address:** **Occupation:**  
**Personal Mailing Address:**

**Social Security Number:** **Date of Birth:** **Place of Birth:** **Citizen of:**  
**Home Telephone Number:** **Business Telephone Number:** **Business Fax Number:** **Mobile Number:** **Email Address:**

**Years in Country:** **Photo Identification Type & Number:** **Identification Expiration Date:**

CHEXSYSTEMS, explain why: SSN Response: Year State ID Response:  
**OFAC/PLC**  **BANK REFERENCE requested:**  Yes  No, explain why: Response:

**9. Sales Referrals**

<input type="checkbox"/> Merchant Card Services	<input type="checkbox"/> e-FirstBank (Internet)	<input type="checkbox"/> Cash Management
<input type="checkbox"/> Credit Card	<input type="checkbox"/> First Fax	<input type="checkbox"/> Night Depository
<input type="checkbox"/> Overdraft Line	<input type="checkbox"/> Payroll	<input type="checkbox"/> Other _____
<input type="checkbox"/> Line of Credit		

**Interviewer:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Management Review:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Request for Taxpayer Identification Number and Certification

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

Name (as shown on your income tax return)  
**Southern Trust Company, Inc.**

Business name, if different from above

Check appropriate box:  Individual/sole proprietor  Corporation  Partnership  
 Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ .....  Exempt payee  
 Other (see instructions) ▶

Address (number, street, and apt. or suite no.)  
**Red Hook Quarter**

City, state, and ZIP code  
**St. Thomas, VI 00802**

Requester's name and address (optional)

List account number(s) here (optional)  
**7211098521**

Print or type  
See Specific Instructions on page 2

## Part I Taxpayer Identification Number (TIN)

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

Social security number

or  
Employer identification number  
**66 0779661**

## Part II Certification

Under penalties of perjury, I certify that:

- 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 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
- I am a U.S. citizen or other U.S. person (defined below).

**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 of secured property, cancellation of debt, 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 4.

Sign Here

Signature of U.S. person ▶

*Josée Duena*

Date ▶

*12/7/12*

## General Instructions

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

### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- 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.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

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# Customer Due Diligence For Additional Signers on Individual Accounts or Authorized Signatures on Business Entities Accounts

Existing Account Number

7191317861

Account Number which is attached to the Signer

7211099346

### 1. Authorized Signer Information

Name: Jeffrey Initial: E Last Name: epstein  
 Date of Birth: 1/20/1953 Place of Birth: NY Social Security: 090-44-3348  
 Citizenship: USA Home Phone: 340-775-8100 Other: NA  
 Physical Address: Little Saint James Island Mailing Address: 6100 Red Hook Quarter B3  
St. Thomas, VI 00802 St. Thomas, VI 00802

Place of Employment: Financial Trust Company, Inc Employment Address: 6100 Red Hook Quarter B3  
 Occupation: Financial Consultant St. Thomas, VI 00802  
 Work Phone: 340-775-2525 Email: NA  
 Relation Account Title: President

ID	Type	Number	Country	Expiration (MM/DD/YYYY)
1st	DL	c000000029913	USVI	1/20/2015
2nd	Passport	469911707	USA	5/28/2020

### 2. Income

Recurrent Source:  Own Business  Private  Government  Other, specify: \_\_\_\_\_  
 Annual Income:  \$0.01 - \$50,001  \$50,001 - \$150,000  \$150,001 - \$250,000  Over \$250,000

### 3. Client Classification

*If the answer is yes for A and C of the following questions, the client will be considered high risk and further action is needed as establish in the Due Diligence Checklist-Guidance For Individuals or Entities Considered as High Risk.*  
*If the answer to C is yes, then authorization from the Compliance Department-BSA Division is required.*

A. Indicate whether the client is a nonresident alien: (NAICS #100000)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
B. Indicate whether the client is a resident alien: (NAICS #200000)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
C. Indicate whether the client is related to an officer of a foreign government and document the type of relationship: (NAICS #400000)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

### 4. Verification System - For use only as Contingency Plan if CHEXSYSTEM was called

Name of the Representative who attended your call: \_\_\_\_\_  
 Response to Social Security: Year: \_\_\_\_\_ State: \_\_\_\_\_ Other: \_\_\_\_\_  
 Response on Industry Behavior: \_\_\_\_\_  
 Response on ID: \_\_\_\_\_

### 5. Account Opening Authorization

<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied
<u>Madelin Colon</u> Name	<u>[Signature]</u> Signature
	<u>1082</u> Officer No.
	<u>2/22/13</u> Date

Comments, if applicable: \_\_\_\_\_

Interviewed by: Elizabeth Ferguson Elizabeth Ferguson 02/22/13  
 Name Signature Date

NNNS-1306-1111

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SDNY\_GM\_00013697

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FirstBankPR000860

EFTA\_00124340

EFTA01269507



# Customer Due Diligence For Additional Signers on Individual Accounts or Authorized Signatures on Business Entities Accounts

Existing Account Number 7321000005	Account Number which is attached to the Signer 7211099346
---------------------------------------	--

### 1. Authorized Signer Information

Name: Darren Initial: K Last Name: Indyke  
 Date of Birth: 2/19/1965 Place of Birth: NY Social Security: 098-54-8596  
 Citizenship: USA Home Phone: N/A Other: N/A  
 Physical Address: 2 Kean Ct Mailing Address: 6100 Red Hook Quarter B3  
Livingston NJ 07039 St. Thomas, VI 00802

Place of Employment: Darren K Indyke, PLLC Employment Address: 575 Lexington Law  
 Occupation: Attorney New York, NY 10022  
 Work Phone: 212-971-1314  
 Email: dkiesg@aol.com AA  
 Relation Account Title: Secretary

ID	Type	Number	Country	Expiration (MM/DD/YYYY)
1st	NJ DL	158941567202654	USA	4/30/2015
2nd	Passport	112637684	USA	3/10/2022

### 2. Income

Recurrent Source:  Own Business  Private  Government  Other, specify: \_\_\_\_\_  
 Annual Income:  \$0.01 - \$50,001  \$50,001 - \$150,000  \$150,001 - \$250,000  Over \$250,000

### 3. Client Classification

*If the answer is yes for A and C of the following questions, the client will be considered high risk and further action is needed as establish in the Due Diligence Checklist-Guidance For Individuals or Entities Considered as High Risk.*  
*If the answer to C is yes, then authorization from the Compliance Department-BSA Division is required.*

A. Indicate whether the client is a nonresident alien: (NAICS #100000)	Yes	No
B. Indicate whether the client is a resident alien: (NAICS #200000)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
C. Indicate whether the client is related to an officer of a foreign government and document the type of relationship: (NAICS #400000)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

### 4. Verification System- For use only as Contingency Plan if CHEXSYSTEM was called

Name of the Representative who attended your call: \_\_\_\_\_  
 Response to Social Security: Year: \_\_\_\_\_ State: \_\_\_\_\_ Other: \_\_\_\_\_  
 Response on Industry Behavior: \_\_\_\_\_  
 Response on ID: \_\_\_\_\_

### 5. Account Opening Authorization

Approved  Denied  
Madelin Colon [Signature] 002 2/22/13  
 Name Signature Officer No. Date

Comments, if applicable: \_\_\_\_\_

Interviewed by: Elizabeth Ferguson Elizabeth Ferguson 02/22/13  
 Name Signature Date

NNNS-1306-1111

SDNY\_GM\_00013698

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FirstBankPR000861

EFTA\_00124341

EFTA01269508