
Deutsche Bank
Wealth Management
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Business Deposit Account Opo* i
Zoro Management, LLC
Account Title
Dale of lnu.ii|,iofaiU)n
Zpro Management, LLC
Entity/Company Name
Taxpayer ID Number (TIN)
6100 RED HOOK QUARTER B3
Mailing Address
ST THOMAS; USVI
00802
City
State
Zip
(212)971-1314
Business Telephone Number
Business Fax Number
Other Number
Legal Address (if different from mailing address)
City
State
Zip
Client Relationship
Corporation
/ Limited Liability Company (LLC)
Attorney Escrow Account
Foundation
Partnership
Landlord Master Escrow
Non-Profit Organization
Limited Liability Partnership (LLP)
Trust
Estates
Private Wealth Premium™
Deutsche Bank AG NY Branch Accounts
DBTCA Accounts
■/ Checking Account
■ l Checking with Interest
/ Money Market Deposit
Deutsche Bank AG NY Preferred Banking Account
Deutsche Bank AG NY Preferred Certificate of Deposit
APV

Tprm

Promo term

DBTCA Certificate of Deposit

(DBTCA dcposil account required, along with a DB AG Preferred Terms and Conditions!

Term

APY

Cash Master Sweep Account

Target Amount

Trigger Amount

Banking Services

Deluxe Checkbook

Debit Cards - Business Debit Card

Name Only

Name and Address

Duplicate Statement

Style

Code

Color

Name

Internet Banking Services

Address

DB Private Wealth Online Plus

Link to existing online relationship:

City

State

Zip Code

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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/het/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 Signor

6?

Print Name

Print Name<j

ate

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

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Deutsche Bank

Wealth Management

For Bank Use Only

Account Number(s):

Certificate of Limited Liability C

ons

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 Zoro Management, LLC

, (the "Company"),

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

(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 C'Accountfs")):

'/I Deposit Account(s)

; and

Investment Advisory Account(s)

(please select all that apply);

discretionary non-discretionary

Custody Account(s)

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 or any of its affiliates or subsidiaries (the "Bank") as depository, custodian or

investment advisor, as applicable, for such property as designated by the Company from time to time, and to open and

maintain Account(s) with the Bank in accordance with all applicable laws, regulations and Bank and Company's policies.

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/ate 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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AUTHORIZED SIGNER(S):

If any Authorized Signer named below is an entity and not a natural person, please attach an Authorized Signatory list.

Darren Indyke

Print Name

Authorized {select one): L^! Individually Jointly with

Signatory

Title

Signature

Other

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

Print Name

Title

Signature

Authorized (select one); fi Individually

Jointly with

Other

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

Print Name

Title

Signature

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.

Print Name

Title

Signature

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 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.

&

Signature

<

Print Name and Title

Date of this Certificate of LLC Resolutions (Fill in date—this document is not valid if date is left blank)

**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.

Confirmation Signature

I Print Name and Title

2

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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.

Zoro Management, LLC

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

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W

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

r-1 Individual/sole proprietor or D C Corporation Q S Corporation Q Partnership Q] Trust/estate single-member LLC

I I 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.

I I Other (see instructions) *■ _____

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

6100 RED HOOK QUARTER B3

Requester's name and address (optional)

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<n

6 City, state, and ZIP code

ST. THOMAS 00802 U.S. VIRGIN ISLANDS

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<D

CO

7 List account number(s) here (optional)

Parti

Taxpayer Identification Number (TIN)

Social security number

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

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

resident alien, soie 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.

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 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 3.

Sign

Here

Signature of /"JN

U.S. person

&

Date*-

General Instructions

- Form 1098 (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 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.

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.

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 (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

c

Signature Card

Deutsche Bank Trust Company Americas

Zoro Management, LLC

Account Holder Title

0

Account Number

/ Limited Liability

Corporation

Other-

Individual

ITF/POD/ATF'

Corporate

Number of Signatures

Required:

Joint, with Rights

of Survivorship

Joint, Tenants

in Common

Partnership
Signature
Darren Indyke
Print Name
Signature
Print Name
Signature
Print Name
Signature
Print Name
Approved
Date
Power of Attorney
Specimen Signature
' For ITF/P00/ATF See Supplemental Terms and ConrJitions
Date of Power of Attorney
III
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