



LIMITED LIABILITY COMPANY RESOLUTION OF AUTHORITY

Name of Limited Liability Company				Employer ID Number	Account Number	Account Number	
Add	ress			City	State	ZIP Code	
The undersigned, being either all of the members of			members of	("the Com	("the Company"), a limited liability company organized and		
		under the laws of the state of _ f The Bancorp Bank, N.A. ("Ban	k") as follows:	; or the managing membe	er(s) of the Company, hereby o	certify to and for the	
1)	Attached hereto is a true and complete copy of the Company's Operating Agreement (with all amendments and modifications). The attached agreement is the exclusive statement of the Operating Agreement for the Company.						
2) Pursuant to and in accordance with the terms of the forgoing Operating Agreement, the following member(s) lis behalf of the Company and as the act and deed of the Company to do the following, all of which shall be subject							
		Name	Title	Signature	Facsimile	Signature (if used)	
	a) Open and maintain, on behalf of the Company, accounts of deposit with Bank and to deposit with Bank, from time to time, for credit or coll checks, drafts, notes, acceptances and other evidences of indebtedness;						
b) Sign, endorse, accept, make, execute, authorize and deliver checks, drafts, notes, acceptances, bills of exchange, transfers and o and orders for the payment or withdrawal or delivery of funds of the Company held by Bank;					and other instruments		
	 Appoint and/or delete, from time to time, any members, employees or agents to act on behalf of the Company by signing, endo authorizing and delivering checks, drafts, notes, acceptances, bills of exchange, transfers and other instruments and orders for p withdrawal, or delivery of funds of the Company held by Bank; 					endorsing, executing, for payment,	
d) Perform all other acts or deeds and execute and deliver all other doc Bank.				all other documents, including witho	documents, including without limitation wire transfer agreements, required by		
	The Company shall indemnify Bank from any losses and costs incurred by Bank arising out of claims made against Bank based on any act of any member, employee or agent of the Company in connection with the authority granted hereunder.					on any act or omission	
3)	Baı	Bank is entitled to rely on the certification until receipt by Bank of written notice of its revocation.					
IN V	/ITN	ESS WHEREOF, I have hereunt	to subscribed my name and	I affixed the seal of said Corporation	ı, on		
					Date		
Nar	ne of	Member/Managing Member					
Plea	se fa	x or mail this completed form t	0:				
		Bank Attn: Operations Departm Side Road, Suite 105, Wilmingto					

409 Silverside Road, Suite 105 Wilmington, DE 19809 | Phone: 800.650.5904 | Fax: 302.791.5680 | www.advisorbank.com REQ0004626 04/2023 037

Please retain a copy of this form for your records.

Fax: 302.791.5680