

Name of Entity

State of Incorporation/Organization/Issue

Tax ID or SS Number

Please provide a copy of the Entity's articles, charter, certificate, constitution, agreement, declaration, or similar organizing document.

Name the principals, owners, shareholders, members, or beneficiaries with greater than 25% interest in the Entity:

1

2

3

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The following individuals are fully authorized to act on behalf of the Entity to open a BlueVault Vault Custody Account; issue instructions concerning the Account; deposit, withdraw, purchase, and sell precious metals within the Account; and execute any documents related to administering the Account.

The Entity shall promptly defend, indemnify, and hold harmless BlueVault, its affiliates, officers, directors, employees, and agents against any claim, suit, damage, loss, cost, or attorney fees arising out of or relating to BlueVault's compliance with the instructions of these Authorized Signer(s). BlueVault is entitled to conclusively rely on this Resolution without inquiry or investigation unless the Entity sends a written notice to BlueVault clearly and unambiguously revoking this Resolution, and BlueVault acknowledges in writing its receipt of such notice.

The undersigned represent and warrant to BlueVault that the Entity is valid in the state of formation, and that the information provided is true and complete.

Name of Authorized Signer

Title/Relationship to Entity

Signature

Name of Authorized Signer

Title/Relationship to Entity

Signature

A notary public or other officer completing this certificate verifies only the identity of the individual(s) who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of the document.

STATE OF _____ } SS:

COUNTY OF _____ }

On _____ before me, _____, Notary,

personally appeared _____
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California and the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____ (Seal)