

**ALL PERSONS OPENING AN ACCOUNT ON BEHALF OF A LEGAL ENTITY MUST PROVIDE THE FOLLOWING INFORMATION:**  
TODAS LAS PERSONAS QUE SOLICITAN UNA CUENTA EN NOMBRE DE UNA PERSONA JURÍDICA DEBEN PROPORCIONAR LA SIGUIENTE INFORMACIÓN:

**LEGAL ENTITY'S NAME**   
NOMBRE DE LA ENTIDAD

**COMMERCIAL NAME**  **TAX ID**   
NOMBRE COMERCIAL R.U.C.

**DATE OF ORGANIZATION**      **MONTH**      **DAY**      **YEAR**      **COUNTRY OF ORGANIZATION**  
FECHA DE CONSTITUCIÓN      MES      DÍA      AÑO      PAIS DE CONSTITUCIÓN

**ADDRESS**   
DIRECCIÓN

**CITY**  **PROVINCE/STATE**  **COUNTRY**   
CIUDAD      PROVINCIA/ESTADO      PAIS

**MAILING ADDRESS (IF DIFFERENT FROM ABOVE) / DIRECCION DE CORREO (SI ES DISTINTA A LA ANTERIOR)**

**CITY**  **PROVINCE/STATE**  **COUNTRY**   
CIUDAD      PROVINCIA/ ESTADO      PAIS

**MAIN OWNERS (PLEASE LIST BELOW THE OWNER(S) WHO OWN 10% OR MORE OF THE LEGAL ENTITY)\***  
PRINCIPALES DUEÑOS (FAVOR LISTAR A CONTINUACIÓN LOS DUEÑO(S) CON 10% O MÁS DE PROPIEDAD EN LA ENTIDAD)\*

	<b>NAME</b> NOMBRE	<b>IDENTIFICATION #</b> # DE IDENTIFICACIÓN	<b>CITIZENSHIP OR COUNTRY OF INCORPORATION/NACIONALIDAD O PAIS DE INCORPORACION</b>	<b>PERCENTAGE</b> PORCENTAJE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

• **IF ANY OF THE OWNERS IS A COMPANY, PLEASE PROVIDE THE OWNERSHIP REGISTRY OF THAT LEGAL ENTITY/EN CASO DE EXISTIR UNA PERSONA JURIDICA COMO DUEÑO, FAVOR PROPORCIONAR REGISTRO DE DUEÑOS DE LA MISMA.**

# BANCO PICHINCHA C.A.

MIAMI AGENCY

## Certification of Beneficial Owner(s) — Legal Entity Certificación Beneficiario(s) Final(es) – Persona Jurídica

### CONTROLLING PERSON/PERSONA QUE CONTROLA LA ENTIDAD

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR AN INDIVIDUAL WITH SIGNIFICANT RESPONSIBILITY FOR MANAGING OR DIRECTING THE ENTITY, INCLUDING, AN EXECUTIVE OFFICER OR SENIOR MANAGER (E.G., CHIEF EXECUTIVE OFFICER, CHIEF FINANCIAL OFFICER, CHIEF OPERATING OFFICER, MANAGING MEMBER, GENERAL PARTNER, PRESIDENT, VICE PRESIDENT, TREASURER); OR ANY OTHER INDIVIDUAL WHO REGULARLY PERFORMS SIMILAR FUNCTIONS. / PROPORCIONE LA SIGUIENTE INFORMACIÓN DE UN ALTO EJECUTIVO O GERENTE CON RESPONSABILIDAD SIGNIFICATIVA PARA ADMINISTRAR O DIRIGIR LA ENTIDAD (POR EJEMPLO, PRESIDENTE O DIRECTOR EJECUTIVO, VICEPRESIDENTE, GERENTE GENERAL, TESORERO, REPRESENTANTE LEGAL); U OTRO INDIVIDUO QUE REGULARMENTE REALIZA FUNCIONES SIMILARES.

PLEASE ATTACH A COLOR COPY OF A VALID GOVERNMENT-ISSUED ID FOR THE CONTROLLING PERSON/FAVOR ADJUNTE UNA COPIA A COLOR DE UNA IDENTIFICACION GUBERNAMENTAL VIGENTE DE LA PERSONA QUE CONTROLA LA ENTIDAD

NAME NOMBRE						
	FIRST NAME/1ER NOMBRE	MIDDLE NAME/2NDO NOMBRE	LAST NAME / 1ER APELLIDO	2ND LAST NAME / 2NDO APELLIDO		
CITIZENSHIP NACIONALIDAD			DOB/FECHA DE NACIMIENTO	MONTH/MES	DAY/DIA	YEAR/AÑO
ID/IDENTIFICACIÓN:				MONTH/MES	DAY/DIA	YEAR/AÑO
	NUMBER/NUMERO	TYPE/TIPO				EXPIRATION DATE/FECHA DE CADUCIDAD
ADDRESS/DIRECCION:						
CITY/CIUDAD		PROVINCE/STATE PROVINCIA/ESTADO		COUNTRY/PAIS:		
TELEPHONE/ TELEFONO:			EMAIL/CORREO ELECTRONICO:			
POSITION TITLE/ CARGO EN LA ENTIDAD:						

### MAIN BENEFICIAL OWNER(S)/ DUEÑO(S) PRINCIPAL(ES) DE LA ENTIDAD

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR AN INDIVIDUAL(S), IF ANY, WHO, DIRECTLY OR INDIRECTLY, THROUGH ANY CONTRACT ARRANGEMENT, UNDERSTANDING, RELATIONSHIP, OR OTHERWISE OWNS 25% OR MORE OF THE EQUITY INTERESTS OF THE LEGAL ENTITY (BPMA'S CLIENT) / PROPORCIONE LA SIGUIENTE INFORMACIÓN DE LA(S) PERSONA(S) NATURAL(ES), DE SER EL CASO, QUE, DIRECTA O INDIRECTAMENTE, A TRAVÉS DE CUALQUIER ACUERDO CONTRACTUAL, ENTENDIMIENTO, RELACIÓN O DE OTRO MODO POSEA EL 25% O MÁS DE PROPIEDAD EN LA ENTIDAD (CLIENTE DE BPMA).

CHECK HERE IF NO INDIVIDUAL MEETS THIS DEFINITION / MARQUE AQUÍ SI NINGÚN INDIVIDUO CUMPLE CON ESTA DEFINICIÓN.

PLEASE ATTACH A COLOR COPY OF A VALID GOVERNMENT-ISSUED ID FOR EACH MAIN OWNER LISTED BELOW/FAVOR ADJUNTE UNA COPIA A COLOR DE UNA IDENTIFICACIÓN GUBERNAMENTAL VIGENTE PARA CADA DUEÑO PRINCIPAL LISTADO A CONTINUACIÓN:

NAME NOMBRE						
	FIRST NAME / 1ER NOMBRE	MIDDLE NAME/2NDO NOMBRE	LAST NAME / 1ER APELLIDO	2ND LAST NAME / 2NDO APELLIDO		
CITIZENSHIP NACIONALIDAD			DOB/FECHA DE NACIMIENTO	MONTH/MES	DAY/DIA	YEAR/AÑO
ID/IDENTIFICACIÓN:				MONTH/MES	DAY/DIA	YEAR/AÑO
	NUMBER/NUMERO	TYPE/TIPO				EXPIRATION DATE/FECHA DE CADUCIDAD
ADDRESS/DIRECCION:						
CITY/CIUDAD		PROVINCE/STATE PROVINCIA/ESTADO		COUNTRY/PAIS:		
TELEPHONE/ TELEFONO:			EMAIL/CORREO ELECTRONICO:			
POSITION TITLE (IF APPLICABLE) / CARGO EN LA ENTIDAD (SI APLICA)				OWNERSHIP PERCENTAGE / PORCENTAJE PROPIEDAD		

**SECOND MAIN BENEFICIAL OWNER (IF REQUIRED)/SEGUNDO DUEÑO PRINCIPAL (SI APLICA)**

<b>NAME</b> NOMBRE										
	<b>FIRST NAME / 1ER</b> NOMBRE	<b>MIDDLE NAME/2NDO</b> NOMBRE	<b>LAST NAME / 1ER APELLIDO</b>	<b>2ND LAST NAME / 2NDO</b> APELLIDO						
<b>CITIZENSHIP</b> NACIONALIDAD			<b>DOB/FECHA DE</b> NACIMIENTO	<table border="1"> <tr> <td>MONTH/MES</td> <td>DAY/DIA</td> <td>YEAR/AÑO</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	MONTH/MES	DAY/DIA	YEAR/AÑO			
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	<b>NUMBER/NUMERO</b>	<b>TYPE/TIPO</b>	<b>EXPIRATION DATE/FECHA DE CADUCIDAD</b>							
<b>ADDRESS/DIRECCION:</b>										
<b>CITY/CIUDAD</b>		<b>PROVINCE/STATE</b> PROVINCIA/ESTADO		<b>COUNTRY/PAIS:</b>						
<b>TELEPHONE/</b> TELEFONO:			<b>EMAIL/CORREO</b> ELECTRONICO:							
<b>POSITION TITLE (IF APPLICABLE) /</b> CARGO EN LA ENTIDAD (SI APLICA)			<b>OWNERSHIP PERCENTAGE /</b> PORCENTAJE PROPIEDAD							

**THIRD MAIN BENEFICIAL OWNER (IF REQUIRED)/TERCER DUEÑO PRINCIPAL (SI APLICA)**

<b>NAME</b> NOMBRE										
	<b>FIRST NAME / 1ER</b> NOMBRE	<b>MIDDLE NAME/2NDO</b> NOMBRE	<b>LAST NAME / 1ER APELLIDO</b>	<b>2ND LAST NAME / 2NDO</b> APELLIDO						
<b>CITIZENSHIP</b> NACIONALIDAD			<b>DOB/FECHA DE</b> NACIMIENTO	<table border="1"> <tr> <td>MONTH/MES</td> <td>DAY/DIA</td> <td>YEAR/AÑO</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	MONTH/MES	DAY/DIA	YEAR/AÑO			
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	<b>NUMBER/NUMERO</b>	<b>TYPE/TIPO</b>	<b>EXPIRATION DATE/FECHA DE CADUCIDAD</b>							
<b>ADDRESS/DIRECCION:</b>										
<b>CITY/CIUDAD</b>		<b>PROVINCE/STATE</b> PROVINCIA/ESTADO		<b>COUNTRY/PAIS:</b>						
<b>TELEPHONE/</b> TELEFONO:			<b>EMAIL/CORREO</b> ELECTRONICO:							
<b>POSITION TITLE (IF APPLICABLE) /</b> CARGO EN LA ENTIDAD (SI APLICA)			<b>OWNERSHIP PERCENTAGE /</b> PORCENTAJE PROPIEDAD							

# BANCO PICHINCHA C.A.

MIAMI AGENCY

## Certification of Beneficial Owner(s) — Legal Entity Certificación Beneficiario(s) Final(es) – Persona Jurídica

### FORTH MAIN BENEFICIAL OWNER (IF REQUIRED)/CUARTO DUEÑO PRINCIPAL (SI APLICA)

<b>NAME</b> NOMBRE				
	<b>FIRST NAME / 1ER NOMBRE</b>	<b>MIDDLE NAME / 2NDO NOMBRE</b>	<b>LAST NAME / 1ER APELLIDO</b>	<b>2ND LAST NAME / 2NDO APELLIDO</b>
<b>CITIZENSHIP</b> NACIONALIDAD		<b>DOB/FECHA DE NACIMIENTO</b>	MONTH/MES	DAY/DIA
			YEAR/AÑO	
<b>ID/IDENTIFICACIÓN:</b>			MONTH/MES	DAY/DIA
	<b>NUMBER/NUMERO</b>	<b>TYPE/TIPO</b>	<b>EXPIRATION DATE/FECHA DE CADUCIDAD</b>	
<b>ADDRESS/DIRECCION:</b>				
<b>CITY/CIUDAD</b>		<b>PROVINCE/STATE</b> PROVINCIA/ESTADO		<b>COUNTRY/PAIS:</b>
<b>TELEPHONE/</b> TELEFONO:		<b>EMAIL/CORREO</b> ELECTRONICO:		
<b>POSITION TITLE (IF APPLICABLE) /</b> CARGO EN LA ENTIDAD (SI APLICA)		<b>OWNERSHIP PERCENTAGE /</b> PORCENTAJE PROPIEDAD		

### SIGNATURES, WARRANTIES, AND REPRESENTATIONS / FIRMAS, GARANTIAS, Y REPRESENTACIONES

BY SIGNING BELOW, the undersigned hereby warrants to Banco Pichincha, C.A., Miami Agency (“BPMA”) that all information furnished to BPMA herein is complete and correct. Each beneficial owner(s) identified above owns the specified interest in the legal entity on his or her own behalf and no above-identified beneficial owner(s) holds interest in the legal entity either directly or indirectly on behalf of any other individual(s) or entity(ies). I understand and agree that the legal entity listed in page 1 shall notify BPMA in writing within 30 calendar days of any change in beneficial ownership information as reported in this certification.

CON MI FIRMA, el suscrito por este medio garantiza a Banco Pichincha, C.A., Miami Agency (“BPMA”) que toda la información que se le proporciona en esta certificación esta completa y correcta. Cada dueño beneficiario identificado en esta certificación es propietario directa o indirectamente del porcentaje de participación especificado arriba, y no mantiene dicha participación en el capital social de la entidad por cuenta de terceros. Entiendo y acepto que la entidad mencionada en la página 1, notificará a BPMA por escrito en el plazo de 30 días calendarios de cualquier cambio en la información de dueños beneficiarios indicada en esta certificación.

<b>Miami, Florida, USA</b>	<b>LEGAL REPRESENTATIVE OR PERSON OPENING ACCOUNT/ REPRESENTANTE LEGAL O PERSONA QUE SOLICITA LA CUENTA</b>			
<b>NAME/NOMBRE</b>				
	<b>FIRST NAME / 1ER NOMBRE</b>	<b>MIDDLE NAME / 2NDO NOMBRE</b>	<b>LAST NAME / 1ER APELLIDO</b>	<b>2ND LAST NAME / 2NDO APELLIDO</b>
<b>TITLE/CARGO</b>		<b>ID/ IDENTIFICACIÓN</b>		
<b>SIGNATURE/FIRMA:</b>		<b>TYPE/TIPO</b>	<b>NUMBER/NUMERO</b>	
		<b>CERTIFICATION DATE/ FECHA DE CERTIFICACION</b>		
		MONTH/MES	DAY/DIA	YEAR/AÑO

x \_\_\_\_\_

### FOR BANK USE ONLY / PARA USO DEL BANCO

REVIEWED BY: \_\_\_\_\_  
DATE: \_\_\_\_\_

### Account/Loan Reference Number

APPROVED BY: \_\_\_\_\_  
DATE: \_\_\_\_\_

The Spanish translation is for your information and convenience. The English version of this Account Opening Application constitutes the dispositive, legally binding version and, in the event of any inconsistency with the Spanish translation, shall control. / La traducción al español es únicamente para su información y facilidad de entendimiento. La versión en inglés de esta Solicitud de Apertura de Cuenta constituye la versión dispositiva y jurídicamente vinculante y, en caso de cualquier inconsistencia con la traducción al español, la versión en inglés será la versión determinante.

**31 CFR § 1010.230 CERTIFICATION REGARDING  
BENEFICIAL OWNERS OF LEGAL ENTITY CUSTOMERS**

**What is this form?**

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

**Who has to complete this form?**

This form must be completed by any person opening a new account on behalf of a **legal entity**. For the purposes of this form, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

**What information do I have to provide?**

When you open a new account on behalf of a legal entity, the financial institution will ask for information about the legal entity's **beneficial owner(s)**, including their name, address, date of birth and social security number (or passport number or other similar information, in the case of Non-U.S. persons). The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

Beneficial owners are:

1. Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation; **and**
2. An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified, you must provide the identifying information of one individual. It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual, and up to five individuals (i.e., one individual and four 25 percent equity holders).

*A legal entity may have multiple "beneficial owners," this form requires you to list only those that own 25% or more (up to five) under each of the two prongs of the definition above. If appropriate, the same individuals may be listed under both prongs.*