



Policy/Contract Number(s) \_\_\_\_\_

I \_\_\_\_\_, \_\_\_\_\_  
(Name) (Title)

of \_\_\_\_\_  
(Name of Entity)

a \_\_\_\_\_, (the "Entity")  
(Enter State of Domicile) (Type of Entity)

having Taxpayer Identification Number \_\_\_\_\_

do hereby certify that the following individual is a duly elected and presently acting officer of the Entity, holding the position indicated below and that the signature appearing after his/her name was duly affixed by him/her and that he/she is the sole officer/member authorized to act on behalf of the Entity:

\_\_\_\_\_  
(Name - Please print)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Signature)

IN WITNESS WHEREOF, I have hereto set my hand and affixed the seal of the Entity

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

**AFFIX CORPORATE SEAL HERE**

**Complete ONLY if form is being modified after the original sign date.**

I CERTIFY that this form was modified by me, the Owner on \_\_\_/\_\_\_/\_\_\_\_. Sign below (If Non-Individual, include the capacity in which you are signing). Signature: \_\_\_\_\_