

CBRS
Letter of Authorization (LOA)
Address Change Request

1. Schwab Account Information

Please check one only:

- ☒ Plan (Trustee signature only)
☐ Participant (FBO) (Trustee or participant signature accepted)
☐ Independent Recordkeeper (Authorized Agent signature)
☐ Third Party (Duplicate mailings) (Authorized Agent signature)

| Schwab Account Number | Account Name |
|-----------------------|----------------------------|
| 2468-1357 | XYZ Incorporated 401k Plan |

2. Address Information

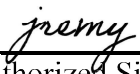
| Previous Address: | |
|---|-----------------------|
| Physical (NO PO Boxes allowed) | City, State, Zip Code |
| 1453 Everlasting Avenue, Suite 315 | Houston, TX 75334 |
| Mailing (If different than above, PO Boxes allowed) | City, State, Zip Code |
| | |

| Current Address: | |
|---|-----------------------|
| Physical (NO PO Boxes allowed) | City, State, Zip Code |
| 1453 Everlasting Avenue, Suite 348 | Houston, TX 75334 |
| Mailing (If different than above, PO Boxes allowed) | City, State, Zip Code |
| | |

| Phone Number (if changing): | |
|-----------------------------|---------|
| Previous | Current |
| | |

3. Please Read and Sign

I authorize Charles Schwab Co., Inc. to update my account (as listed) pursuant to the above instructions.

| | |
|---|--------------|
|  | Plan Trustee |
| Authorized Signature | Title |
| Jeremy Jackson | 04/05/2020 |
| Print Name | Date |