## **Addendum To Certificate Of Authority**

For Changes To Authorized Signers On Business Deposit Accounts



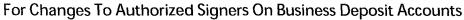
Host Status:						
Host Update Successfu	1					
Bank Name:		Store Name:				
WELLS FARGO BANK, N.A	k •	WELLS FARGO CENTER				
Banker Name:		Officer/Portfolio Number:	Date:			
ANGELA L MOORE		V2910	05/11,	/2016		
Banker Phone:	Store Number:	Banker AU:	ker AU: Banker MAC:			
757/622-2740	09946	0068950 R3586-010		-010	".	
Use this Addendum when Authorized Signe has not been obtained.  Business/Account Informati	·	ate of Additioney contently of the for a be	isiness customer a	ing a new, s	signed defuncate of Additions	
			_	Al		
-		COID: Product:	Account	i Number:		
Business Name: TIDEWATER CHAPTER VIR	GINIA SOCIETY	COID:   Product:   377   DDA		341500	4678	
Business Name: TIDEWATER CHAPTER VIR Authorized Signers	GINIA SOCIETY	377   DDA				
Business Name: TIDEWATER CHAPTER VIR  Authorized Signers  Authorized Signer Name(s):	GINIA SOCIETY	377 DDA  Relationship Status:	2018	341500		
Business Name: TIDEWATER CHAPTER VIR  Authorized Signers  Authorized Signer Name(s): BRIAN DEIBLER	GINIA SOCIETY	Relationship Status:  Existing/Remainship Status	2018 nining	341500 New	∑ Delete	
Business Name: TIDEWATER CHAPTER VIR  Authorized Signers Authorized Signer Name(s): BRIAN DEIBLER ANGIE L HETHERINGTON	GINIA SOCIETY	Relationship Status:  Existing/Rema	2018 nining	New New		
Business Name: TIDEWATER CHAPTER VIR  Authorized Signers Authorized Signer Name(s): BRIAN DEIBLER ANGIE L HETHERINGTON WILLIAM K STEWART	GINIA SOCIETY	Relationship Status: Existing/Rema	ining ining	New New New	X Delete Delete Delete	
Business Name: TIDEWATER CHAPTER VIR  Authorized Signers  Authorized Signer Name(s): BRIAN DEIBLER  ANGIE L HETHERINGTON	GINIA SOCIETY	Relationship Status:  Existing/Rema	ining ining ining ining ining	New New		
Business Name: TIDEWATER CHAPTER VIR  Authorized Signers  Authorized Signer Name(s): BRIAN DEIBLER  ANGIE L HETHERINGTON WILLIAM K STEWART NICOLE WOOD-SABO		Relationship Status: Existing/Rema Existing/Rema Existing/Rema Existing/Rema	ining	New New New New	Delete     Delete     Delete     Delete     Delete	

- directs the Bank that the additional Authorized Signers shall have all of the authority granted to the persons identified as Authorized Signers on the Certificate of Authority, including without limitation the authority to instruct the Bank in writing (whether the instructions include the manual signature or a signature that purports to be the facsimile or other mechanical signature including a stamp of an Authorized Signer as the Customer's authorized signature without regard to when or by whom or by what means or in what ink color the signature may have been made or affixed), orally, by telephone or by electronic means in regard to any Item and the transaction of any business relating to the Customer's account(s), agreements or services;
- · directs the Bank to discontinue acting on the instructions of any person who has been deleted as an Authorized Signer;
- acknowledges that these modifications become effective only after this Addendum has been received by the Bank and the Bank has had a reasonable opportunity to act on it; and
- certifies that the account owner has taken all action under its organizational documents, if any, including passage of resolutions by its board of directors, trustees, or other governing body, required to make these modifications and to authorize the undersigned to execute and deliver this Addendum.



Certified/Agreed 10				
Owner/Key Individual 1 Name NICOLE WOOD-SABO			Position/Title:  manager	,
Owner/Key Individual 1 Signature				
		Submit manually Signature not required	<b>Date:</b>  05/11/2016	
Certified/Agreed To		-2		
Owner/Key Individual 2 Name ANGIE L HETHERINGTON			Position/Title:   HOMEMAKER	
Owner/Key Individual 2 Signature				
		Submit manually Signature not required	<b>Date:</b> 05/11/2016	
Signature Capture - New Author	orized Signers			_
New Authorized Signer 1 Name DEBRA A ACORS			Position/Title:	
New Authorized Signer 1 Signature				
		Submit manually	Date:	
		Signature not required	05/11/2016	

## **Addendum To Certificate Of Authority**





Host Status:					
Host Update Successful					
Bank Name:	Store Name:	Store Name:			
WELLS FARGO BANK, N.A.	WELLS FARGO CENTER	WELLS FARGO CENTER			
Banker Name:	Officer/Portfolio Number:	Date:			
ANGELA L MOORE	V2910	V2910   05/11/2016 ·			
Banker Phone: Store Number	er: Banker AU:	Banker MAC:			
757/622-2740 09946	0068950	R3586-010			
Use this Addendum when Authorized Signers are being added or delete has not been obtained.  Business/Account Information	ed to a Certificate of Authority currently on file for a busines	s customer and a new, signed Certificate of Authority			
Business Name:	COID: Product:	Account Number:			
TIDEWATER CHAPTER VIRGINIA SOCIETY		2000024663858			
Authorized Signers					
Authorized Signer Name(s):	Relationship Status:	7			
BRIAN DEIBLER	Existing/Remaining	New X Delete			
ANGIE L HETHERINGTON	🗙 Existing/Remaining	New Delete			
WILLIAM K STEWART	Existing/Remaining	New Delete			
NICOLE WOOD-SABO	🔀 Existing/Remaining				
DEBRA A ACORS	Existing/Remaining	New Delete			
Addendum to Certificate of Authority		X			
Original Certificate of Authority Dated:	nal Certificate of Authority Dated:  Addendum to Certificate of Authority Dated:				
	05/11/2016	05/11/2016			
Each person signing in the "Certified/Agreed To" section below:					

- directs the Bank that the additional Authorized Signers shall have all of the authority granted to the persons identified as Authorized Signers on the Certificate of Authority, including without limitation the authority to instruct the Bank in writing (whether the instructions include the manual signature or a signature that purports to be the facsimile or other mechanical signature including a stamp of an Authorized Signer as the Customer's authorized signature without regard to when or by whom or by what means or in what ink color the signature may have been made or affixed), orally, by telephone or by electronic means in regard to any Item and the transaction of any business relating to the Customer's account(s), agreements or services;
- directs the Bank to discontinue acting on the instructions of any person who has been deleted as an Authorized Signer;
- acknowledges that these modifications become effective only after this Addendum has been received by the Bank and the Bank has had a reasonable opportunity to act on it; and
- certifies that the account owner has taken all action under its organizational documents, if any, including passage of resolutions by its board of directors, trustees, or other governing body, required to make these modifications and to authorize the undersigned to execute and deliver this Addendum.



Certified/Agreed 10		
Owner/Key Individual 1 Name   NICOLE WOOD-SABO		Position/Title:  manager
Owner/Key Individual 1 Signature		
Certified/Agreed To	Submit manually Signature not required	<b>Date</b> : 05/11/2016
Owner/Key Individual 2 Name ANGIE L HETHERINGTON		Position/Title:   HOMEMAKER
Owner/Key Individual 2 Signature		
	Submit manually Signature not required	Date: 05/11/2016
Signature Capture - New Authorized Signers		
New Authorized Signer 1 Name DEBRA A ACORS		Position/Title:
New Authorized Signer 1 Signature		
	Submit manually Signature not required	Date: