[INSERT - NAME OF COMPANY/ CLOSE CORPORATION/ PARTNERSHIP/ TRUST]

[INSERT - REGISTRATION NUMBER]

**RESOLUTION OF THE [SELECT- BOARD OF DIRECTORS/ MEMBERS/ PARTNERS/ TRUSTEES]   
OF THE   
[INSERT - COMPANY NAME/ CLOSE CORPORATION NAME/ PARTNERSHIP NAME/ TRUST NAME]   
APPOINTING AUTHORIZED PERSONS PASSED ON [INSERT - DATE]**

RESOLVED THAT:

The below mentioned persons have been appointed as Authorized Persons. These persons are hereby authorized to act on behalf of the [Insert Company Name/ Close Corporation Name/ Partnership Name/ Trust Name] or who bind the [Select – Company/ Close Corporation/ Partnership/ Trust] to Satrix Managers (RF) Pty Ltd (Satrix) and those who are authorized to establish a relationship with Satrix Managers (RF) Pty Ltd (Satrix) on behalf of the [Select – Company/ Close Corporation/ Partnership/ Trust], these authorized persons are able to provide instructions on the account.

|  |  |  |  |
| --- | --- | --- | --- |
| **FULL NAME** | **IDENTITY/PASSPORT NUMBER** | **RESIDENTIAL ADDRESS** | **DESIGNATION** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Designation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_