

**CERTIFIED COPY OF  
RESOLUTION OF DIRECTORS**



Mail completed forms to: Steadyhand Investment Funds Inc.  
1747 West 3rd Avenue  
Vancouver, BC, V6J 1K7

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Business Name: \_\_\_\_\_

Passed as of the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**BE IT RESOLVED:**

**1. That** \_\_\_\_\_ (name of the "Company")  
open an Investment account with Steadyhand Investment Funds Inc.

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**2. That** the company completes the Corporate Account Application with Steadyhand Investment Funds Inc.

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**3. That** (please check ONE of the paragraphs below)

any Designated Officer of the Company, whose name appears below, has and is hereby given full power and authority by the Company to deal with all decisions with respect to the Company's portfolio and to execute any documents in connection therewith and all such documents executed by said Designated Officer on behalf of the Company are hereby ratified and confirmed and Steadyhand Investment Funds Inc. shall be entitled to rely upon this authority without the need to make further inquiries of the Company.

any \_\_\_\_\_ (insert number) Designated Officers of the Company whose names appear below have and are hereby given full power and authority by the Company to deal jointly with all decisions with respect to the Company's portfolio and to execute jointly any documents in connection therewith and all such documents executed by said Designated Officers on behalf of the Company are hereby ratified and confirmed and Steadyhand Investment Funds Inc. shall be entitled to rely upon this authority without the need to make further inquiries of the Company.

all of the Designated Officers of the Company, whose names appear below, have, and are hereby given full power and authority by the Company to deal jointly with all decisions with respect to the Company's portfolio and to execute jointly any documents in connection therewith and all such documents executed by all of the said Designated Officers on behalf of the Company are hereby ratified and confirmed and Steadyhand Investment Funds Inc. shall be entitled to rely upon this authority without the need to make further inquiries of the Company.

**Designated Officers:**

As required by The Proceeds of Crime (Money Laundering) and Terrorist Financing Act each individual must include a \$1 personal cheque payable to "Steadyhand Investment Funds Inc. in Trust" and consent to an identification check.

Name (print): \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_

Home Address: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Name (print): \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_

Home Address: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Name (print): \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_

Home Address: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Name (print): \_\_\_\_\_ Title: \_\_\_\_\_ Signature: \_\_\_\_\_

Home Address: \_\_\_\_\_

Birthdate: \_\_\_\_\_

**4. That** the following individuals are beneficial owners of the company who own or control (directly and indirectly) over 25% of the company.

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**Beneficial Owners:**

Name (print): \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address: \_\_\_\_\_

Name (print): \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address: \_\_\_\_\_

Name (print): \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address: \_\_\_\_\_

Name (print): \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Address: \_\_\_\_\_

**5. That** the names and addresses of the Directors of the Company are:

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Name (print): \_\_\_\_\_

Home Address: \_\_\_\_\_

Name (print): \_\_\_\_\_

Home Address: \_\_\_\_\_

Name (print): \_\_\_\_\_

Home Address: \_\_\_\_\_

Name (print): \_\_\_\_\_

Home Address: \_\_\_\_\_

**6. That** the Secretary of the Company shall inform Steadyhand Investment Funds Inc. of all changes of persons holding the Office(s) listed in Section 3.

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**Certified** to be a true copy of a Resolution duly passed by the Board of Directors of \_\_\_\_\_

(the "Company") at a properly constituted meeting duly held on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, which Resolution is now in

full force and effect, has not been amended and does not conflict with the by-laws of said Company.

Name of Secretary (print): \_\_\_\_\_ Signature: \_\_\_\_\_

**Please affix company seal.** (If no company seal exists, indicate name.)