

# MODIFICATION REQUEST

## Important information

Please fill out and send this form in two originals to amend your Participation Agreement or your latest Amendment to Participation Agreement document with JAO S.A.

This form has to be signed by Authorized Person(s).<sup>1</sup>

This request replaces and supersedes the respective originals which were countersigned by JAO on \_\_\_\_\_<sup>2</sup>

This form may be signed electronically with a qualified electronic signature.

### 1. Company details

Company Name:	
EIC Code:	
Company Address:	

### 2. Requested Change<sup>3</sup>

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Signatures:

The Registered Participant	The Allocation Platform
Name:	Name:
Date:	Date:
Place:	Place: Luxembourg
Signature: _____	Signature: _____
Name:	Name:
Date:	Date:
Place:	Place: Luxembourg
Signature: _____	Signature: _____

<sup>1</sup> Authorized Person(s) based on the Commercial Extract / other legal document providing evidence of signatory rights within the company that JAO S.A. has in files.

<sup>2</sup> The date when the last person signed the Participation Agreement / latest Amendment to Participation Agreement.

<sup>3</sup> Please summarize the requested change(s) and attach the amended page(s) also signed by the Authorized Person(s) in 2 originals.