Certification of Beneficial Owners of Legal Entities

The information contained in this Certification is sought pursuant to Section 1010.230 of Title 31 of the United States Code of Federal Regulations (31 CFR 1010.230).

| Financial Institution Name: | | | Financial Institution Location: | | |
|--|---------------------|--|---------------------------------|--|--|
| United Community Bank D/B/A American National Bank | | 4301 N Federal Highway Oakland Park, FL 33308 | | | |
| Financial Institution Contact Person: | Contact Phone Numbe | r: | Customer Portfolio/Identifier: | | |

I. General Instructions

What is this form?

To help the government fight financial crime, Federal regulation requires certain financial institutions to obtain, verify, and record information about the beneficial owners of legal entity customers. Legal entities can be abused to disguise involvement in terrorist financing, money laundering, tax evasion, corruption, fraud, and other financial crimes. Requiring the disclosure of key individuals who own or control a legal entity (i.e., the beneficial owners) helps law enforcement investigate and prosecute these crimes.

Who has to complete this form?

This form must be completed by the person opening a new account on behalf of a legal entity with any of the following U.S. financial institutions: (i) a bank or credit union; (ii) a broker or dealer in securities; (iii) a mutual fund; (iv) a futures commission merchant; or (v) an introducing broker in commodities.

For the purposes of this form, a **legal entity** includes a corporation, limited liability company, or other entity that is created by a filing of a public document with a Secretary of State or similar office, a general partnership, and any similar business entity formed in the United States or a foreign country. **Legal entity** does not include sole proprietorships, unincorporated associations, or natural persons opening accounts on their own behalf.

What information do I have to provide?

This form requires you to provide the name, address, date of birth and Social Security number (or passport number or other similar information, in the case of Non-U.S. persons) for the following individuals (i.e., the **beneficial owners**):

- (i) Each individual, if any, who owns, directly or indirectly, 25 percent or more of the equity interests of the legal entity customer (e.g., each natural person that owns 25 percent or more of the shares of a corporation); and
- (ii)An individual with significant responsibility for managing the legal entity customer (e.g., a Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).

The number of individuals that satisfy this definition of "beneficial owner" may vary. Under section (i), depending on the factual circumstances, up to four individuals (but as few as zero) may need to be identified. Regardless of the number of individuals identified under section (i), you must provide the identifying information of one individual under section (ii). It is possible that in some circumstances the same individual might be identified under both sections (e.g., the President of Acme, Inc. who also holds a 30% equity interest). Thus, a completed form will contain the identifying information of at least one individual (under section (ii)), and up to five individuals (i.e., one individual under section (ii) and four 25 percent equity holders under section (i)). The financial institution may also ask to see a copy of a driver's license or other identifying document for each beneficial owner listed on this form.

II. Certification of Beneficial Owner(s)

Persons opening an account on behalf of a legal entity must provide the following information:

| Full Name of Natural Person Opening Account: | Title of Natural Person Opening Account: | | | |
|---|--|--|--|--|
| Type of Legal Entity for Which the Account is Being Opened: | Legal Entity Identifier (Optional): | | | |
| Name of Legal Entity for Which the Account is Being Opened: | | | | |
| Physical Address of Legal Entity for Which the Account is Being Opened: | | | | |
| Account Type (Optional): | Account Number (Optional): | | | |

Provide the following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25 percent or more of the equity interests of the legal entity listed above:

| | Birth Percent of Ownership (Optional) | Street Address) | Persons: Social Security Number | Social Security Number, Passport Number and country of issuance, or other similar identification number ¹ |
|-------------|---------------------------------------|------------------|--|--|
| First M.I. | | Street | | Number |
| Last Suffix | % | City State & Zip | | Country of Issuance |
| First M.I. | | Street | | Number |
| Last Suffix | % | City State & Zip | | Country of Issuance |
| First M.I. | | Street | | Number |
| Last Suffix | % | City State & Zip | | Country of Issuance |
| First M.I. | | Street | | Number |
| Last Suffix | % | City State & Zip | | Country of Issuance |

☐ If checked, Beneficial Owner listing requirement is Not Applicable

II. Certification of Beneficial Owner(s), Continued

Provide the following information for one individual with significant responsibility for managing the legal entity listed above, such as:

- ♦ An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or
- ♦ Any other individual who regularly performs similar functions.

(If appropriate, an individual listed under the ownership section above may also be listed in the section below).

| (of | lame/Title Person Control) | Date of Birth | Address (Residential or Business Street Address) | For U.S. Persons: Social Security Number | For Non-U.S. Persons: Social Security Number, Passport Number and country of issuance, or other similar identification number ¹ |
|-------|----------------------------------|------------------|---|--|--|
| First | M.I. | | Street | | Number |
| Last | Suffix | | City | | Country of Issuance |
| Title | | | State & Zip | | |

¹ In lieu of a passport number, Non-U.S. Persons may also provide a Social Security Number, an alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard.

- I, , hereby certify, to the best of my knowledge, the following:
 - **♦** The information provided above is complete and accurate;
 - ◆ The Legal Entity has filed its initial Beneficial Ownership Information (BOI) Report with the Financial Crimes Enforcement Network (FinCEN) and, if appropriate, has timely updated, and will continue to timely update, any previously filed BOI Report with FinCEN;
 - ♦ The Legal Entity agrees to notify the Financial Institution of any change in the beneficial ownership information provided in this Certification, as well as of the date any updated information is reported to FinCEN, and, if any new identifying documents were provided to FinCEN, to provide copies of such documents to the Financial Institution; and
 - ◆ The Legal Entity consents that the Financial Institution may access the Legal Entity's BOI data held by FinCEN, now and on an ongoing basis as long as the formal banking relationship establishing the account continues, and that FinCEN may disclose such information to the Financial Institution, to facilitate compliance with the Financial Institution's Customer Due Diligence Rule requirements.

| Signature: | Date: |
|------------|-------|
| | |

II. Certification of Beneficial Owner(s), Continued

For Institution Use Only:

| Name of Beneficial Owner | Type of Document | Document ID Number | Place of Issuance | Date of Issuance | Expiration Date |
|--------------------------|------------------|-----------------------|-------------------|---------------------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Additional Information: