manage or dispose of assets;

| | | | | id card to be attached | |
|-------------------|--|--------|-----|------------------------|--|
| Name (First and | d Last) | | | | |
| born in | | | | | |
| resident in | City | | | | |
| in the role of th | ne business located in | | | | |
| telephone | Fax | e-mail | web | | |
| Declares under | his/her responsibility: | | | | |
| credito | That they are not in a status of bankruptcy, liquidation, closure of activities, or composition with creditors or in any other analogous condition and that no proceedings leading to same are currently underway; | | | | |
| b. That the | That they have not been declared insolvent by a Court in a determination other than a decision of bankruptcy that entails, in compliance with U.S. legislation, the partial or total incapacitation to | | | | |

- That there are no pending proceedings to verify a state of insolvency that may lead, in compliance
 with federal, state or local legislation, to a declaration of bankruptcy or to any other condition
 entailing the partial or total incapacitation to manage or dispose of assets;
- d. That they have not been convicted by a court of any crimes against professional conduct or of financial crimes; this affidavit must be provided also for all company management and experts and for all employees that will be used;
- e. That they have not been in the past and are not presently in default with social security contributions and other benefits due employees under U.S. law;
- f. That they have not been in the past and are not presently in default with tax and fee obligations of any nature;
- g. That they have not been convicted of financial crimes or professional misconduct;
- h. That they do not use child labor and/or other forms of trafficking in human beings.

| Date, | |
|---|--|
| Signature of Holder or Legal Representative | |