



INSTITUTION NAME CHANGE REQUEST

Complete this form to update all your investment(s) and/or account(s) if your legal name has changed.

Owner Information

Please use full legal name.

Former Name

Tax ID Number

New Legal Name

Important Information:

- You must attach a copy of Amendment filed with Secretary of State. If not applicable, a Form W-9 is required.
- If you will be adding or removing authorized signors, you will need to complete a new Signature Card.

Signature(s)

By signing below, we hereby authorize AG Financial Solutions and its affiliated entities, including, but not limited to, AG Loan Fund, AG Foundation, and Ministers Benefit Association to make the changes indicated above.

Authorized Signature

Printed Name

Date

Authorized Signature (Institutions require two signatures)

Printed Name

Date