

CORPORATE RESOLUTION

Account: _____ Bank: _____

Holder: _____ Address: _____

Address: _____

Acct #: _____

As the Chairperson of the Board of Director of the Corporation named above, I certify that the Corporation has been organized within the bounds of the State of Arkansas as a Limited Liability Corporation with its principal office located at:

_____.

I further attest that at the meeting of the Corporation's Board of Directors held on _____, 20____, that a quorum was present and voting and adopted the following resolutions:

Resolved, that the financial institution named above is designated as a depository for the funds of this Corporation, which may be withdrawn on checks, drafts, advices of debit, notes, or other orders for payments bearing any officer or authorized employee of this Corporation.

Further Resolved, that the financial institution will accept and pay on, without further inquiry, any checks or debits drawn against any of the Corporation's accounts. The checks or debits will be honored by the financial institution whether the item has been drawn or endorsed to the order of any authorized officer or employee signing; tendered by the authorized officer or employee for the purpose of cashing or payment; or for deposit to the officer's or employee's personal account. The financial institution will not be required to inquire as to the use of any check or debit signed in accordance with the resolutions contained herein.

Further Resolved, that the officers or authorized employees may execute other agreements, including, but not limited to, special depository agreements, and arrangements concerning the manner, condition, and/or purposes for which funds, checks, debits, or items of the Corporation may be deposited, collected, or withdrawn, as long as these other agreements are not contrary to the provisions contained in this resolution.

Further Resolved, that the power granted to the Corporation's officers or authorized employees will remain in full force and effect until written notice has been delivered and received by the financial institution at each location where an account is maintained. The financial institution will be indemnified

and held harmless from any losses suffered or liabilities incurred by continuing to act in accordance with this resolution.

I Further Attest, that the persons named below occupy the stated positions, as indicated by their signatures, and that the resolutions contained in this document are recorded on the books of the Corporation, and these resolutions are in full force and effect and have not been altered in any way.

I agree to all of the above on this _____ day of _____, 20_____.

CERTIFIED TO AND ATTESTED BY:

X[sign here] _____

By: [print name], Secretary
Chairperson of the Board of Directors

Certificate of the Secretary

The Secretary of the above named Corporation hereby certifies that the Secretary is the duly elected and qualified Secretary of the Corporation and further certifies that the above is a true and correct record of the Resolution that was duly adopted by the Corporation on the following date: _____.

X[sign here] _____

By: [print name]
Secretary of the Board of Directors