



Information Change Request

Financial Professional

Looking for an easier, faster way to submit paperwork? Try the **SERVICENOW** option at www.StrataTrust.com/Forms
◆ E-sign and transmit directly to STRATA ◆ Safely upload supporting documentation ◆ Securely transfer data with SFTP file protocol

Authorized agents of financial professional firms may use this form to update contact and/or funding information for existing investments that have been onboarded to STRATA Trust Company's ("STRATA's") platform.

This change request form must be signed by an authorized agent of the firm, as defined by the articles of incorporation or a formal signing authority resolution. STRATA may request a letter of authorization from the company before processing change requests.

Section 1 Tell Us About Yourself

First Name		Last Name	
Email		Phone	
Mailing Address			
City	State	Zip	
Select Your Role: <input type="checkbox"/> Investment Sponsor <input type="checkbox"/> Other Financial Professional: _____			
Company Title:			
<input type="checkbox"/> Check here if you are a Registered Investment Advisor ("RIA") with Form ADV filed with the SEC.			
Name of Investment Offering			

Section 2 New Contact Information

Select the information you would like to update, please leave the fields blank if there are no changes. For any name changes, supporting legal documentation is required.

Did the investment sponsor's contact information or investment offering name change due to a merger or acquisition?

Investment Offering Name Investment Sponsor Contact Information Both No

→ Old Name of Investment Offering: _____

→ New Name of Investment Offering: _____

<input type="checkbox"/> First Name	<input type="checkbox"/> Last Name	
<input type="checkbox"/> Company Name		
<input type="checkbox"/> Email	<input type="checkbox"/> Phone	
<input type="checkbox"/> Mailing Address		
City	State	Zip

Client Services 866.928.9394 | NewInvestments@StrataTrust.com | Online: www.StrataTrust.com/Service-Request

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Section 3 New Additional Contact Information

<input type="checkbox"/> Investor Relations Contact Name	<input type="checkbox"/> Email	<input type="checkbox"/> Phone
<input type="checkbox"/> Purchase Confirmation Contact Name	<input type="checkbox"/> Email	<input type="checkbox"/> Phone
<input type="checkbox"/> Valuation Contact Name	<input type="checkbox"/> Email	<input type="checkbox"/> Phone
<input type="checkbox"/> Fund Administrator Contact Name	<input type="checkbox"/> Email	<input type="checkbox"/> Phone
<input type="checkbox"/> Distribution Contact Name	<input type="checkbox"/> Email	<input type="checkbox"/> Phone

If applicable, select the third-party services to update:

- Investor Relations (e.g. Carta, Nav, Opus): _____
- Transfer Agents (e.g. American Stock Transfer, Computershare, Pacific Stock Transfer): _____
- Data Feeds (e.g. Black Diamond, Orion, MorningStar): _____

Section 4 New Funding Instructions

Provide the updated wiring instructions below. These instructions will supersede any previously provided

Bank Information	Bank Name	Phone
Bank Location	City	State
ABA Routing # (must be 9 digits)		
For Credit To	Account Name	Account #
For Further Credit To	Account Name	Account #

Section 5 Terms and Conditions

I hereby certify that all the information provided is true and correct and may be relied on by STRATA. I understand that STRATA will send confirmation of the change to the previous and current addresses.



 Authorized Agent Signature

 Date

 Print Name

 Title

Form Submission Options

- Fax: 512.495.9554
- Email: NewInvestments@StrataTrust.com
- US Mail: PO Box 23149, Waco, TX 76702
- Overnight: 7901 Woodway Drive, Waco, TX 76712

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