## **ACCOUNT APPLICATION FORM**

PLEASE SELECT THE PRODUCT YOU WISH TO ACQUIRE (only one product per form)







END CONSUMER



### THE BASIC CARDMEMBER SHALL SIGN THE APPLICATION AT THE BOTTOM OF EACH PAGE

## **BUSINESS INFORMATION**

ALL FIELDS MARKED WITH AN \* MUST BE COMPLETED. IF ANY DATA IS MISSING, THE APPLICATION WILL NOT BE PROCESSED.

BUSINESS NAME (AS REGISTERED WITH THE PUBLIC REGISTER OF COMMERCE) \*

COMPANY NAME (AS YOU WOULD LIKE IT TO APPEAR ON THE CARD) \*. NUMBER OF EMPLOYEES \*

LIABLE TO VAT

LINE OF BUSINESS / INDUSTRY

DATE OF ORGANIZATION REGISTRATION DATE AND NUMBER
(MM/DD/YYYY) \* (As it appears on the Public Register of Commerce certification sticker attached to the By-laws)

LARGE TAXPAYER

Taxpayer ID (CUIT)/Employee ID (CUIL)/CDI\*

POSTAL CODE (ALPHANUMERIC) \*

CITY/TOWN \*

TELEPHONE NUMBER (no hyphens) \*

**EXEMPT** 

ARS\$

MONTHLY ESTIMATED SPENDING

THE COMPANY IS A REPORTING PARTY UNDER THE CURRENT FIU REGULATIONS. FOR THAT REASON, I HEREBY STATE UNDER OATH THAT THE COMPANY COMPLIES WITH ALL THE CURRENT ANTI-MONEY LAUNDERING AND ANTI-TERRORIST FINANCING REGULATIONS.

THE COMPANY IS NOT A REPORTING PARTY UNDER THE CURRENT FIU ANTI-MONEY LAUNDERING AND ANTI-TERRORIST FINANCING REGULATIONS. I HEREBY UNDERTAKE TO REPORT ANY CHANGE IN THIS CONNECTION WITHIN THIRTY (30) DAYS OF ITS OCCURRENCE BY PROVIDING A NEW SWORN STATEMENT.

## **COMPANY TYPE CODE \***

PLEASE SELECT ONLY ONE OPTION

01. CORPORATION (SOCIEDAD ANÓNIMA)

STREET/NUMBER/FLOOR (LEGAL ADDRESS) \*

02. LIMITED LIABILITY COMPANY (SOCIEDAD DE RESPONSABILIDAD LIMITADA)

03. CIVIL ASSOCIATION

04. CHAMBER

VAT TAX STATUS: \*

PROVINCE \*

05. CONFEDERATION

07. COOPERATIVE

06. ASSOCIATION CONTRACT

08. FOREIGN NON-PROFIT ENTITY

09. FEDERATION

10. TRUST

11. FOUNDATION

12. MUTUAL ASSOCIATION

13. ASSOCIATION

14. BINATIONAL ENTITY OUTSIDE NATIONAL JURISDICTION

15. CAPITALIZATION AND SAVINGS ASSOCIATION

16. GENERAL PARTNERSHIP

17. COMPANY ORGANIZED ABROAD

18. BROKERAGE FIRM

19. PARTNERSHIP (SOCIEDAD DE CAPITAL E INDUSTRIA)

20. GUARANTEE ASSOCIATION

21. DE FACTO BUSINESS ASSOCIATION

22. SOCIEDAD DEL ESTADO

23. PARTNERSHIP LIMITED BY SHARES

24. LIMITED PARTNERSHIP

25. JOINT VENTURE

26. OTHER

## BILLING DATA \*

BILLING TYPE INDIVIDUAL BILLING/INDIVIDUAL PAYMENT (IB-IP)

END OF CYCLE  $1^{ST}$  WEEK  $2^{ND}$  WEEK  $3^{RD}$  WEEK

## **REWARDS PROGRAM**

Accepts that your employees are authorized to enroll in the Membership Rewards Program\* YES NO

You agree that your employees are authorized to enroll in the MR Program. Once they enroll, they will begin to add points for the charges they make individually. The annual cost of the program is \$56,000 + VAT per registered card (with the exception of The Corporate Platinum Card whose participation is free of charge).

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

\*SIGNATURE OF ATTORNEY-IN-FACT/ JOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION

### BASIC CARDMEMBER (REPRESENTATIVE I

NAME AND LAST NAME (as in the ID (DNI)) \* PLACE OF BIRTH \* NATIONALITY \* CUIT/CUIL/CDI \* MARITAL STATUS \* PROFESSION, TRADE OR ACTIVITY \* STREET/NUMBER/FLOOR (ACTUAL ADDRESS) \* CITY/TOWN \* PROVINCE \* HOME TELEPHONE DATE OF BIRTH (MM/DD/YYYY) \* POSTAL CODE (ALPHANUMERIC) \* BUSINESS TELEPHONE NUMBER (no hyphens) \* NUMBER (no hyphens) 3 E-MAIL FOR RECEIVING THE ACCOUNT STATEMENT: \* (The application will not be processed without this data) ID NO. \* L.C. ID L.E. D.N.I. TITLE PLEASE SEND ME THE CARD TO MY ADDRESS I WILL PICK UP THE CARD AT A DHL OFFICE (25 DE MAYO 447, CABA) DO NOT ISSUE A PLASTIC CARD PLEASE SEND ME A BRAILLE ACCOUNT STATEMENT Do you wish to enroll this Card in the Membership Rewards Program? NO I HEREBY STATE UNDER OATH THAT: ): I AM / AM NOT INCLUDED IN THE "LIST OF POLITICALLY EXPOSED PERSONS" APPROVED BY THE FINANCIAL INFORMATION UNIT ("FIU"), AS INDICATED IN SECTION 27. IF YES, INDICATE AS APPLICABLE: TITLE / OFFICE / RANK: AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND OFFICE HELD: ALTERNATE BASIC CARDMEMBER (REPRESENTATIVE II) PLEASE COMPLETE ONLY IF, IN THE ATTACHED DOCUMENTATION, THEY HAVE JOINT SIGNATURE AUTHORIZATION WITH THE BASIC CARDMEMBER IF THEY ALSO WISH TO BE A COMPANY THIRD PARTY NOMINEE. PLEASE COMPLETE THE RELEVANT INFORMATION IN THE SECTION ON THE ADDITION OF THIRD PARTY NOMINEES. NAME AND LAST NAME (as in the ID (DNI)) \* PLACE OF BIRTH \* NATIONALITY \* MARITAL STATUS \* CUIT/CUIL/CDI \* PROFESSION, TRADE OR ACTIVITY \* STREET/NUMBER/FLOOR (ACTUAL ADDRESS) \* CITY/TOWN \* PROVINCE \* POSTAL CODE (ALPHANUMERIC) \* BUSINESS TELEPHONE NUMBER (no hyphens) HOME TELEPHONE NUMBER (no hyphens) DATE OF BIRTH (MM/DD/YYYY) \* E-MAIL FOR RECEIVING THE ACCOUNT STATEMENT: (The application will not be processed without this data) ID L.E. L.C. D.N.I. ID NO. \* TITLE PLEASE SEND ME THE CARD TO MY ADDRESS I WILL PICK UP THE CARD AT A DHL OFFICE (25 DE MAYO 447, CABA) PLEASE SEND ME A BRAILLE ACCOUNT STATEMENT DO NOT ISSUE A PLASTIC CARD NO Do you wish to enroll this Card in the Membership Rewards Program? YES I HEREBY STATE UNDER OATH THAT: / NO ): I AM / AM NOT INCLUDED IN THE "LIST OF POLITICALLY EXPOSED PERSONS" APPROVED BY THE FINANCIAL INFORMATION UNIT ("FIU"), AS INDICATED IN SECTION 27. AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND OFFICE HELD BY THE PEP ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES". SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER \*SIGNATURE OF ATTORNEY-IN-FACT/JOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION.



## ALTERNATE BASIC CARDMEMBER (REPRESENTATIVE III)

PLEASE COMPLETE ONLY IF, IN THE ATTACHED DOCUMENTATION, THEY HAVE JOINT SIGNATURE AUTHORIZATION WITH THE BASIC CARDMEMBER IF THEY ALSO WISH TO BE A COMPANY THIRD PARTY NOMINEE. PLEASE COMPLETE THE RELEVANT INFORMATION IN THE SECTION ON THE ADDITION OF THIRD PARTY NOMINEES.

NAME AND LAST NAME (as in the ID (DNI)) *			
PLACE OF BIRTH *		NATIONALITY *	
MARITAL STATUS *	CUIT/CUIL/CDI *	PROFESSION, TRADE OR ACTIVITY *	
STREET/NUMBER/FLOOR (ACTUAL ADDRESS) *		CITY/TOWN *	PROVINCE *
POSTAL CODE (ALPHANUMERIC) *	BUSINESS TELEPHONE NUMBER (no hyphens) *	HOME TELEPHONE NUMBER (no hyphens) *	DATE OF BIRTH (MM/DD/YYYY) *
E-MAIL FOR RECEIVING THE ACCOUNT STATEMEN	NT: *		
(The application will not be processed without this	data)		
ID L.E. L.C. D.N.I.	ID NO. *		
TITLE			
PLEASE SEND ME THE CARD TO MY ADDRESS	I WILL PICK UP THE CARD AT A DHL OFFICE	(25 DE MAYO 447, CABA) DO NOT ISSUE A PLASTIC CARD	PLEASE SEND ME A BRAILLE ACCOUNT STATEMENT
you wish to enroll this Card in the Membe	ership Rewards Program? YES	NO	
I HEREBY STATE UNDER OATH THAT: (YES / NO ): I AM / AM NOT INCLUDED I	N THE "LIST OF POLITICALLY EXPOSED PERSONS" APP	PROVED BY THE FINANCIAL INFORMATION UNIT	"FIU"), AS INDICATED IN SECTION 27.
IF YES, INDICATE AS APPLICABLE: TITLE / OFFICE / RANK:			

## ADDITION OF THIRD PARTY NOMINEES

AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND OFFICE HELD BY THE PEP

PLEASE FILL OUT THE ATTACHED FORM WITH THE DATA OF THE INDIVIDUALS AUTHORIZED BY THE COMPANY. PLEASE NOTE THAT YOU SHALL HAVE TO SELECT FOR EACH INDIVIDUAL ONE OF THE FOLLOWING FOUR AVAILABLE PROFILES. IF YOU DO NOT WISH TO

TO FACILITATE THE MANAGEMENT OF THE COMPANY'S ACCOUNT. WE DEFINED FIVE USER PROFILES WITH DIFFERENT PERMITS FOR INFORMATION ACCESS AND MAINTENANCE PURPOSES. IF YOU DO NOT FILL OUT THE THIRD PARTY NOMINEES SECTION, ALL

TO FACILITATE THE MANAGEMENT OF THE COMPANY'S ACCOUNT, WE DEFINED FIVE USER PROFILES WITH DIFFERENT PERMITS FOR INFORMATION ACCESS AND MAINTENANCE PURPOSES. IF YOU DO NOT FILL OUT THE THIRD PARTY NOMINEES SECTION, ALL CONSULTATIONS AND ACTIONS ON THE ACCOUNT SHALL BE CONDUCTED BY THE BASIC CARDMEMBER.

ALTERNATIVE BASIC CARDMEMBER: ANY INDIVIDUAL AUTHORIZED UNDER THIS PROFILE SHALL BE AN ATTORNEY-IN-FACT OF THE COMPANY AND SHALL HAVE THE SAME AUTHORITY AS THE BASIC CARDMEMBER, BETTITLED TO MAKE ANY CONSULTATION.

ANDIOR MAINTENANCE OPERATION, INCLUDING: ADDING ANDIOR CANCELLING ADDITIONAL CARDS ANDIOR VIRTUAL ACCOUNTS; ENROLLING ANDIOR UNENROLLING THE COMPANY IN ANDIOR FROM THE CMR PROGRAM; ENROLLING IN THE EXPRESS CASH

WITHDRAWAL SERVICE; ENROLLING IN THE "9TA PREMIUM" SERVICE; TAKING ACTION IN THE EVENTO FRAUD; ADDING ANDIOR MEMOVING THIRD PARTY NOMINEES WITH DIFFERENT PROFILES; THIS AUTHORITY IS NOT SUFFICIENT FOR ACTIVATING THIRD PARTY

CARDS; TERMINATING THE AGREEMENT FOR THE ISSUANCE OF CORPORATE CARDS; ANDIOR AUTHORITY BASIC CARDMEMBER PROFILES, WHICH MAY ONLY BE CARRIED OUT BY THE BASIC CARDMEMBER. CARDS, TERMINATING THE AGREEMENT FOR THE ISSUANCE OF CORPORATE CARDS, AND INDICE ALTHOUGH AND AGREEMENT FOR THE ISSUENCE OF CORPORATE CARDS. AND INDICE ATTHOUGH AT THE AGREEMENT FOR THE ISSUENCE OF CORPORATE CARDS. AND INDICE ATTHOUGH AT THE AGREEMENT FOR THE ISSUENCE OF CORPORATE CARDS. AND INDICE ATTHOUGH AT THE AGREEMENT FOR THE BASIC CARDMENGER ADMINISTRATION PROFILE. INDIVIDUALS AUTHORIZED UNDER THIS PROFILE WILL HAVE ACCESS TO THE @ WORK PROGRAM AND MAY ALSO MANAGE ANY CONSULTATION OPERATIONS ON THE ACCOUNT AND/OR THE COMPRON IN GENERAL. UNDERTAGE ALL MAINTENANCE OPERATIONS, INCLUDING: CANCELLING ADDITIONAL CAGES TO THE @ WORK PROGRAM AND MAY ALSO MANAGE ANY CONSULTATION OPERATIONS ON THE ACCOUNT AND/OR THE COMPRON IN GENERAL. WAS ALL MAINTENANCE OPERATIONS, INCLUDING: CANCELLING ADDITIONAL CAGES STOTHE @ WORK PROGRAM AND MAY ALSO MANAGE ANY CONSULTATION OPERATIONS ON THE ACCOUNT STATEMENTS. ON THE ACCOUNT AND/OR THE CARDS AND/OR THE CARDS AND/OR THE CARDS AND/OR THE CARDS AND/OR THE ACCOUNT. APPLYING FOR CARD REPLACEMENTS OR BLOCKING, ACTIVATING THE EXPRESS CASH WITHORAWAL SERVICE AND/OR RECURSTING ACCOUNT STATEMENTS; APPLYING FOR AN INCREASE IN THE SPENDING LIMITS OF THE ACCOUNT. APPLYING FOR CARD REPLACEMENTS OR BLOCKING, ACTIVATING THE EXPRESS CASH WITHORAWAL SERVICE AND/OR THE EXPRESS CASH PIN FOR CARDMENDERS REPOLICED IN THAT PROGRAM, REQUESTING THE ACCOUNT. APPLYING FOR CARD REPLACEMENTS OF THE ACCOUNT. APPLYING FOR CARD REPLACEMENT OF CARD AND ADDITIONAL CARDS. AND ADDITIONAL CARDS AND ADDITIONAL DOCUMENT OF CARD IN AND/OR FROM THE CARD AND ADDITIONAL CARDS.

CONSULTATIVE SHOULD AND ADDITIONAL CARDS.

CONSULTATION PROFILE: INDIVIDUALS AUTHORIZED UNDER THE FORTIVE AND ADDITIONAL DOCUMENTS SO THAT THE INDIVIDUALS AUTHORIZED UNDER THE FORTIVE AND ADDITIONAL DOCUMENTS SO THAT THE INDIVIDUALS AUTHORIZED UNDER THE FORTIVE AND ADDITION

LIABILITY OF THE COMPANY: THE COMPANY MAY REVOKE THE AUTHORIZATION OF ANY INDIVIDUAL DESIGNATED UNDER THE PROFILES INCLUDED IN THE PRECEDING PARAGRAPH (THE "THIRD PARTY NOMINEES") AT ANY TIME BY SENDING WRITTEN NOTICE OF ANY SUCH REVOCATION TO AMERICAN EXPRESS (AND BY FILLING OUT THE THIRD PARTY NOMINEES" ADDITION/REMOVAL FORM TO BE PROVIDED BY AMERICAN EXPRESS) OR BY MEANS OF A TELEPHONE CALL FROM THE BASIC CARDMEMBER OR THE ALTERNATIVE BASIC CARDMEMBER, AMERICAN EXPRESS THE RICHT TO REQUEST AND VERIFY ADDITIONAL DOCUMENTATION FROM TIME TO TIME, AND THE RIGHT TO REJECT THE DESIGNATION OF A THIRD PARTY NOMINEE AT ANY TIME, FOR ANY OR SPECIAL POWERS OF ATTORNEY REQUIRED TO ACT FOR AND ON BEHALE OF THE COMPANY PAPE SOFT AMERICAN EXPRESS AND THAT, IF NECESSARY, EACH HAS BEEN FROM THE GRANTING OF THE COMPANY HAS COMPLIED WITH ALL THE FORMALTIES REQUIRED BY APPLICABLE LAW FOR THE GRANTING OF THE COMPANY AND THAT THE COMPANY HAS COMPLIED WITH ALL THE FORMALTIES REQUIRED BY APPLICABLE LAW FOR THE GRANTING OF THE COMPANY AND THAT THE POWERS OF ATTORNEY AND AUTHORITY OF ANY THIRD PARTY NOMINEE HAVE BEEN REVOKED, SUSPENDED OR LIMITED BY ANY MEANS OR IN ANY MANNER. FURTHER, THE COMPANY UNDERTAKES TO SEND WRITTEN FOR THE POWERS OF ATTORNEY AND AUTHORITY OF ANY THIRD PARTY NOMINEE HAVE BEEN REVOKED, SUSPENDED OR LIMITED BY ANY ADDRESS. THEREFORE, AMERICAN EXPRESS SHALL HAVE NO LIBBILITY FOR ANY NOTICE SENT TO THE THIRD PARTY NOMINEE AND THE COMPANY BETWEEN THE INSTRUCTIONS THAT AMERICAN EXPRESS IN THE COMPANY BETWEEN THE INSTRUCTIONS THAT AMERICAN EXPRESS HAS KNOWLEDGE OF BOTH INSTRUCTIONS. THE COMPANY IS SOLELY AND EXCLUSIVELY LIABLE FOR ANY ACTION TAKEN BY THE DESIGNATED THIRD PARTY NOMINEES AND THEREFORE FROM THE BASIC CARDMEMBERS AND THEREFORE FROM THE BASIC CARDMEMBER SHE BASIC CARDMEMBERS OF ANY LOWER BY THE DESIGNATED THIRD PARTY NOMINEES AND THEREFORE FROM THE BASIC CARDMEMBERS.

Only the signature of the individuals authorized under the Alternative Basic Cardmember Profile is required. For this Profile, the signature of the PEP (POLITICALLY EXPOSED PERSONS) Addendum, a copy of the ID (DNI) and a copy of the relevant power of attorney are

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II)	AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".
SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER	*SIGNATURE OF ATTORNEY-IN-FACT/JOINT OWNER *ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION.



ofile
rofile

THIRD PARTY NOMINEE PROFILE	NAME AND LAST NAME	
TITLE	ID NO.	DATE OF BIRTH (MM/DD/YYYY) *
TELEPHONE NUMBER (no hyphens)	E-MAIL	SIGNATURE OF THIRD PARTY NOMINEE*

Only in the case of enrollment in the Alternative Basic Cardmember profile

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES". \*SIGNATURE OF ATTORNEY-IN-FACT/JOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

## CO-APPLICANT 1

PLEASE PROVIDE A PHOTOCOPY OF THE CO-APPLICANT'S ID (DNI) (FRONT AND BACK OR FIRST AND SECOND PAGE) TOGETHER WITH THE APPLICATION. IF A FC	OREIGNER, PLEASE PROVIDE A PHOTOCOPY OF THE FIRST
AND SECOND PAGES OF THE PASSPORT AND PHOTOCOPY OF THE CDI.	

NAME AND LAST NAME*			
NATIONALITY *			
- CUIT/CUIL/CDI *	PROFESSION, TRADE OR ACTIVITY *		
STREET/NUMBER/FLOOR (ACTUAL ADDRESS) *		CITY/TOWN	PROVINCE
POSTAL CODE (ALPHANUMERIC) *	BUSINESS TELEPHONE NUMBER (no hyphens) *	HOME TELEPHONE NUMBER (no hyphens) *	DATE OF BIRTH (MM/DD/YYYY) *
E-MAIL FOR RECEIVING THE ACCOUNT STAT	EMENT: *		
(The application will not be processed without	this data.) Please note that you will receive your accou	int statement by mail or e-mail, as resolved by yo	our company.
L.E. L.C. D.N.I.	ID NO. *		
TITLE			
PLEASE SEND ME THE CARD TO MY ADDR	EESS I WILLPICKUPTHECARDATA DHLOFFICE (25 D	DE MAYO 447, CABA) PLEASE SET	ND ME A BRAILLE ACCOUNT STATEMENT
Do you wish to enroll this Card	in the Membership Rewards Program? YES	NO	
I HEREBY STATE UNDER OATH THAT: (YES / NO ): I AM / AM NOT INCLUDED IN	THE "LIST OF POLITICALLY EXPOSED PERSONS" APPROVE	D BY THE FINANCIAL INFORMATION UNIT ("FIU"), A	IS INDICATED IN SECTION 27.
IF YES, INDICATE AS APPLICABLE: TITLE / OFFICE / RANK:			
AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PER	RSON AND OFFICE HELD BY THE PEP:		
I UNDERTAKE TO REPORT ANY CHANGE IN THIS CONNI I AGREE TO ALL THE TERMS AND CONDITIONS FOR TH	ECTION WITHIN THIRTY (30) DAYS OF ITS OCCURRENCE BY PRO E USE OF THE CORPORATE CARDS PRINTED BELOW.	OVIDING A NEW SWORN STATEMENT.	
SIGNATURE OF CO-APPLICANT 1			

## CO-APPLICANT 2

PLEASE PROVIDE A PHOTOCOPY OF THE CO-APPLICANT'S ID (DNI) (FRONT AND BACK OR FIRST AND SECOND PAGES) TOGETHER WITH THE APPLICATION.

NAME AND LAST NAME *			
NATIONALITY *			
CUIT/CUIL/CDI *	PROFESSION, TRADE OR ACTIVITY		
STREET/NUMBER/FLOOR (ACTUAL ADDRESS) *		CITY/TOWN *	PROVINCE
POSTAL CODE (ALPHANUMERIC) *	BUSINESS TELEPHONE NUMBER (no hyphens) *	HOME TELEPHONE NUMBER (no hyphens) *	DATE OF BIRTH (MM/DD/YYYY) *
E-MAIL FOR RECEIVING THE ACCOUNT STA		NUMBER (IIU II)PIIEIIS) "	
(The application will not be processed without	ut this data.) Please note that you will receive your acco	ount statement by mail or e-mail, as resolved by ye	our company.
L.E. L.C. D.N.I.	ID NO. *		
TITLE			
PLEASE SEND ME THE CARD TO MY ADDR	ESS I WILL PICK UP THE CARD AT A DHL OFFICE (25	DE MAYO 447, CABA) PLEASE SEN	ND ME A BRAILLE ACCOUNT STATEMENT
Do you wish to enroll this Card in the Mem	nbership Rewards Program? YES	NO	
I HEREBY STATE UNDER OATH THAT: (YES / NO ): I AM / AM NOT INCLUDED I	N THE "LIST OF POLITICALLY EXPOSED PERSONS" APPROVI	ED BY THE FINANCIAL INFORMATION UNIT ("FIU"), A	S INDICATED IN SECTION 27.
IF YES, INDICATE AS APPLICABLE: TITLE / OFFICE / RANK:			
AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON	ON AND OFFICE HELD BY THE PEP:		
I UNDERTAKE TO REPORT ANY CHANGE IN THIS CON	NECTION WITHIN THIRTY (30) DAYS OF ITS OCCURRENCE BY PR	OVIDING A NEW SWORN STATEMENT.	

I AGREE TO ALL THE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE CARDS PRINTED BELOW.

SIGNATURE OF CO-APPLICANT 2

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND ON MY BEHALF, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

\*SIGNATURE OF ATTORNEY-IN-FACT/JOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION.

	CO-APPLICANT 3	3	
PLEASE PROVIDE A PHOTOCOPY OF THE O	CO-APPLICANT'S ID (DNI) (FRONT AND BACK C	OR FIRST AND SECOND PAGES) TOGETHER WI	TH THE APPLICATION
NAME AND LAST NAME *			
NATIONALITY *			
	TRADE OR ACTIVITY		
CUIT/CUIL/CDI * PROFESSION	, TRADE OR ACTIVITY		
STREET/NUMBER/FLOOR (ACTUAL ADDRESS) *		CITY/TOWN	PROVINCE
, , , , , , , , , , , , , , , , , , , ,			PROVINCE
POSTAL CODE (ALPHANUMERIC) * BU	SINESS TELEPHONE	HOME TELEPHONE	DATE OF BIRTH (MM/DD/YYYY) *
NU	MBER (no hyphens) *	NUMBER (no hyphens) *	SALE OF SIRVING (IIII)
E-MAIL FOR RECEIVING THE ACCOUNT STATEMENT: *			
(The application will not be processed without this data.)	Please note that you will receive your accou	nt statement by mail or e-mail, as resolved	by your company.
L.E. L.C. D.N.I. ID	NO. *		
TITLE			
PLEASE SEND ME THE CARD TO MY ADDRESS	I WILL PICK UP THE CARD AT A DHL OFFICE (25	DE MAYO 447, CABA) PLEAS	E SEND ME A BRAILLE ACCOUNT STATEMENT
Do you wish to enroll this Card in the Membership Rev	vards Program? YES	NO	
A HEREBY STATE UNDER OATH THAT.			
I HEREBY STATE UNDER OATH THAT: (YES / NO ): I AM / AM NOT INCLUDED IN THE "LIST O	F POLITICALLY EXPOSED PERSONS" APPROVED	BY THE FINANCIAL INFORMATION UNIT ("FI	U"), AS INDICATED IN SECTION 27.
IF YES, INDICATE AS APPLICABLE: TITLE / OFFICE / RANK:			
AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND OFFICE HE	.D BY THE PEP:		
I UNDERTAKE TO REPORT ANY CHANGE IN THIS CONNECTION WITHIN	I THIRTY (30) DAYS OF ITS OCCURRENCE BY PROV	IDING A NEW SWORN STATEMENT	
I AGREE TO ALL THE TERMS AND CONDITIONS FOR THE USE OF THE C	CORPORATE CARDS PRINTED BELOW.	IDING A NEW SWORN STATEMENT.	
CYCNATURE OF CO. ARRIVANT 2	_		
SIGNATURE OF CO-APPLICANT 3			
	FOR INTERNAL USE OF AM	MERICAN EXPRESS	
PROMOTER NO.	NAME		

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

\*SIGNATURE OF ATTORNEY-IN-FACT/JOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION.



IMPORTANT: BEFORE SIGNING OR USING THE CORPORATE CARD, CAREFULLY READ THESE TERMS AND IMPORTANT: BEFORE SIGNING OR USING THE COMPORATE CARD, CAREFULLY READ THESE TERMS AND CONDITIONS FOR THE USE OF CORPORATE ACCOUNTS ("TERMS AND CONDITIONS") BECAUSE, BY SIGNING, USING, OR ACCEPTING THE CORPORATE CARD, YOU WILL BE ACCEPTING EVERYTHING WRITTEN HERRIN, AND THE USE OF YOUR CORPORATE CARD WILL BE GOVERNED BY THESE TERMS AND CONDITIONS. IF YOU DO NOT WISH TO BE BOUND BY THESE TERMS AND CONDITIONS, CUT THE CORPORATE CARD IN HALF AND RETURN IT TO AMERICAN EXPRESS. IF YOU DO NOT DO SO, WE WILL UNDERSTAND THAT YOU ACCEPT THE TERMS AND CONDITIONS

THE FOLLOWING CONDITIONS REGULATE THE RELATIONSHIPS BETWEEN THE COMPANY NAMED ON THE FRONT OF THIS APPLICATION (THE "COMPANY") AND AMERICAN EXPRESS ARGENTINA S.A., TAX ID NUMBER 30-57481687-0, WITH LEGAL ADDRESS AT ARENALES 707, ENTREPISO, CIUDAD AUTÓNOMA DE BUENOS AIRES, POSTAL CODE CIOGIAAA ("AMERICAN EXPRESS", "AMEX" OR "WE") IN RELATION TO THE USE OF (I) CORPORATE CARDS, THE "CARDS,") AND CORPORATE ACCOUNTS WITHOUT PLASTION TO WIRTUAL, AS DESCRIBED IN ANNEX I OF THESE CONDITIONS ("THE VIRTUAL ACCOUNTS"), AND TOGETHER WITH THE CARDS, THE "CORPORATE ACCOUNTS"), AND (II) CORPORATE ACCOUNTS REQUESTED BY THE COMPANY AND ISSUED BY AMEX PRIOR TO THE SUBSCRIPTION OF THESE CONDITIONS; THESE LAST ONES PREVAILING OVER ANY PRIOR AGREEMENT. THE COMPANY, THROUGH ITS LEGAL REPRESENTATIVE AND/OR AUTHORIZED FREPRESENTATIVE WITH SUFFICIENT AUTHORIZED FRATINEE"), MAY REQUEST THE ISSUANCE OF ONE OR SEVERAL CARDS IN THE NAME OF ITS EMPLOYEES AND/OR DIRECTORS OR THE PERSON INDICATED BY THE COMPANY (WHO.) OINTLY OR SEPARATELY WITH THE BASIC PARTINER"). AND/OR THE ISSUANCE OF A VIRTUAL ACCOUNT OR SEVERAL. THE COMPANY AND THE PARTNERS") AND/OR THE ISSUANCE OF A VIRTUAL ACCOUNT OR SEVERAL. THE COMPANY AND THE PARTNERS ARE OBLIGED TO USE THE CORPORATE ACCOUNTS IN THE TERMS AND CONDITIONS STIPULATED HEREIN. THE FOLLOWING CONDITIONS REGULATE THE RELATIONSHIPS BETWEEN THE COMPANY NAMED ON THE

PARTNERS ÁRE OBLIGED TO USE THE CORPORATE ACCOUNTS IN THE TERMS AND CONDITIONS STIPULATED HEREIN.

1. USE OF CORPORATE ACCOUNTS. WITH CORPORATE ACCOUNTS, THE COMPANY AND THE PARTNERS MAY ACQUIRE GOODS AND/OR SERVICES AT AUTHORIZED ESTABLISHMENTS (THE "ESTABLISHMENT/S"), AND MUST PAY TO AMEX ALL CHARGES (AS DEFINED IN THE FOLLOWING PARAGRAPH) THAT HAVE BEEN INCURRED, WHICH SHALL BE RECORDED AS DEBITS IN THE CORRESPONDING CORPORATE ACCOUNT. "CHARGES" REFER TO AMOUNTS RECORDED AS DEBITS IN THE CORRESPONDING CORPORATE ACCOUNT SHALL BE RECORDED AS DEBITS IN CORPORATE ACCOUNTS AND APPEARING IN THEIR MONTHLY STATEMENTS (THE "STATEMENTS"), INCLUDING, FOR ILLUSTRATIVE PURPOSES ONLY, AMOUNTS RELATED TO INSTALLMENT PAYMENT PLANS, CASH WITHDRAWALS, MEMBERSHIP FEES, SERVICE FEES, RENEWAL FEES, COMPENSATORY AND PUNITIVE INTEREST ON BALANCES IN NATIONAL CURRENCY AND IN U.S. DOLLARS, FEES, AMOUNTS RELATED TO INSURANCE PREMIUMS, GUARANTEED RESERVATIONS AT HOTELS IN ARGENTINA AFFILIATED WITH AMEX'S CORPORATE ACCOUNT SYSTEM. AND FEES FOR RETURNED CHECKS, AMONG OTHERS, THE CURRENT CHARGES AND FEES AS OF THE DATE ARE INCLUDED IN ANNEX! THE CHARGES INCURRED BY THE COMPANY AND/OR THE PARTNERS THROUGH THE USE OF THE CARD ARE DUE AND MUST BE PAID ON THE "CURRENT DUE DATE" AND UPON RECEIPT OF THE CORRESPONDING PERIODIC STATEMENT. UNLESS OTHERWISE STIPULATED, EACH TIME A PARTNER USES THE CARD. THEY MUST SIGNATURE CORRESPONDING RECEIPTS PRESENTED BY THE ESTABLISHMENT (THE "CHARGE SLIPS") WITH THE SAME SIGNATURE THAT APPEARS ON THE CARD AND IN THE DOCUMENTATION HELD BY US. THEY SHALL NOT APPLY TO THE "SIGNATURE ON FILE" PROGRAM, WHEREBY THE PARTNER IS SINATURE DIT MAKE PURPLY TO THE "SIGNATURE ON FILE" OR EQUIVALENT ON THE SIGNATURE LINE OF THE CORPASS BY MAIL, TELEPHONE, OR THE CORPORATE ACCOUNTS UNDER THIS PROGRAM, THE ESTABLISHMENT SHALL NOT APPLY TO THE "SIGNATURE ON FILE" OR EQUIVALENT ON THE SIGNATURE LINE OF THE CHARGE SLIPS. WITH THE SAME SIGNATURE END SIGNATURE ON FILE" OR EQUIVALENT ON THE SIGNATURE LINE OF THE CHARGES SIGNATURE

COLLECTIVELY, AT JOUR SOLE DISCRETION), IN ALL ACCOUNTS HELD WITH US, OUR AFFILIATED COMPANIES AND/OR ICENSEES, AND/OR OTHER FINANCIAL INSTITUTIONS.

2. RESPONSIBILITY FOR IMMEDIATE PAYMENT OF CHARGES. (1) THE COMPANY AND THE PARTNER ACKNOWLEDGE AND ACCEPT THAT ALL CORPORATE ACCOUNTS: (1) ARE ISSUED UPON REQUEST OF THE COMPANY FOR THE SOLE PURPOSE OF BEING USED FOR THE PERFORMANCE OF BUSINESS OR REPRESENTATIONAL CHARGES AUTHORIZED BY THE COMPANY, AND (2) MUST BE USED IN STRICT COMPLIANCE WITH THE COMPANY SITTERINAL EXPENSE POLICY IN THIS REGARD. THE COMPANY AGREES TO: (1) INFORM AND ENFORCE SAID INTERNAL EXPENSE POLICY AMONG ITS EMPLOYEES; (2) ENSURE THAT CORPORATE ACCOUNTS ARE NOT USED FOR PERSONAL CHARGES (THOSE NOT INTENDED FOR BUSINESS OR REPRESENTATIONAL EXPENSES AUTHORIZED BY THE COMPANY), (11) CHARGES RELATED TO THE FOLLOWING CORPORATE PURCHASING CARD. THE CORPORATE PURCHASING CARD. THE GOLD CORPORATE CARD, AND THE CORPORATE MEETING CARD. THE CORPORATE CARD, AND THE CORPORATE MEETING CARD. THE CORPORATE CARD, AND THE CORPORATE MEETING CARD. THE CORPORATE ORD. AND THE CORPORATE MEETING CARD. THE CORPORATE ORD. AND THE CORPORATE MEETING CARD. THE CORPORATE ORD. AND THE CORPORATE MEETING CARD. THE CORPORATE MEETING CARD. THE GOLD CORPORATE CARD. AND THE CORPORATE MEETING CARD. THE COMPANY MUST INFORM THE PARTNERS OF THE COMPENT MUST INFORM THE PARTNERS OF THE COMPENT AND SCOPE OF THESE TERMS AND CONDITIONS AND ENSURE THE PROPER USE OF CORPORATE ACCOUNTS AND CARDS, WITH THE COMPANY BEING RESPONSIBLE FOR ALL CONSEQUENCES OF THEIR USE BY THE PARTNERS. (1V) FOR CORPORATE ACCOUNTS ISSUED PRIOR TO FEBRUARY 2024, THE PROVISIONS OF ANNEX 2 SHALL APPLY.

3. ANNUAL OR RENEWAL FEES AND SERVICE COMMISSIONS. THE COMPANY UNDERTAKES TO PAY THE

PROPER USE OF CORPORATE ACCOUNTS AND CARDS, WITH THE COMPANY BEING RESPONSIBLE FOR ALL CONSEQUENCES OF THEIR USE BY THE PARTINERS, (IV) FOR COMPANY ENIGR RESPONSIBLE FOR ALL CONSEQUENCES OF THEIR USE BY THE PARTINERS, (IV) FOR COMPANY ENIGR RESPONSIBLE FOR ALL CONSEQUENCES OF THE PART SHALL APPLY.

3. ANNUAL OR RENEWAL FEES AND SERVICE COMMISSIONS. THE COMPANY UNDERTAKES TO PAY THE ANNUAL OR RENEWAL FEES AND SERVICE COMMISSIONS DETERMINED BY AMEX, AS ESTABLISHED IN SECTION 2.0 THESE TERMS AND CONDITIONS. THE APPLICABLE AND CURRENT ANNUAL OR RENEWAL FEES AND COMMISSIONS AS OF THE DATE ARE AS INDICATED IN THE ANNEX.

4. CARD RENEWAL AND ACCOUNT CANCELLATION. THE CARDS ISSUED SHALL BE VALID WITHIN THE VALIDITY PERIOD INDICATED IN THEROPY. PROVIDED THAT THE CORPORATE ACCOUNT IS ALSO VALID AND HAS NOT BEEN CANCELED BY EITHER PARTY, LIKEWISE, VIRTUAL ACCOUNTS SHALL BE VALID WITHIN THE VALIDITY PERIOD INDICATED IN THESE TERMS AND CONDITIONS, PROVIDED THAT THE YAVE NOT BEEN CANCELED BY EITHER PARTY. WE SHALL ISSUE A RENEWAL OR REPLACEMENT OF THE CARD OR RENEW THE VIRTUAL ACCOUNT BEFORE THE CURRENT ONE HAS EXPIRED, AND WE SHALL CONTINUE TO DO SO UNTIL THE CORPORATE ACCOUNT IS CANCELED, BY DECISION OF EITHER PARTY, UNTITIED TO THE OTHER. IF THE PARTINER OR THE COMPANY DECIDES NOT TO RENEW THE CARDS AND/OR THE WIRTUAL ACCOUNTS. THEY WIST NOTIFY US OF THEIR DECISION TO RENEW THE CARDS AND/OR THE WIRTUAL ACCOUNTS. THEY WIST NOTIFY US OF THEIR DECISION TO RENEW THE CARDS AND/OR THE WIRTUAL ACCOUNTS AT ANY TIME AND NOTIFY SUCH CANCELLATION TO THE ESTABLISHMENTS IN THE MANNER WE DEEM MOST CONVENIENT. IF THE PARTINER OR THE COMPANY OR THE PART AND THE PART AND THE COMPANY OR THE POST AND THE PART AND THE COMPANY OR THE PART AND THE PART AND THE CONDITIONS ESTABLISHED TO CANCEL HAT CONDITIONS ESTABLISHED TO THE PART AND THE PART AND THE CONDITIONS ESTABLISHED TO PAYMENT. IF THE COMPANY OR THE PART AND THE PART AND THE COMPANY OR THE PORT AND THE PART AND THE PART AND THE COMPONT THE NOTIFY AND OR THE PART AND THE PART AND THE PA

CANCELED, FOR ANY REASON, ALL CONTRACTUAL TERMS GRANTED HEREUNDER SHALL AUTOMATICALLY LAPSE WITHOUT THE NEED FOR JUDICIAL OR EXTRAJUDICIAL PRIOR NOTICE, INCLUDING BUT NOT LIMITED TO

LAPSE WITHOUT THE NEED FOR JUDICIAL OR EXTRAJUDICIAL PRIOR NOTICE, INCLUDING BUT NOT LIMITED TO INSTALLMENT PAYMENT PLANS FOR EXPENSES INCURRED WITH THE CORPORATE ACCOUNT, ESTABLISHING THAT AMEN MAY DEMAND IMMEDIATE PAYMENT OF THE TOTAL AMOUNTS OWED PLUS COMPENSATORY AND/OR PUNITIVE INTEREST AND ANY OTHER AMOUNT THAT MAY BE DUE.

5. FOREIGN CURRENCY CHARGES, IF THE COMPANY OR THE PARTNER MAKES A CHARGE IN A FOREIGN CURRENCY OTHER THAN THE US DOLLAR, THAT CHARGE SHALL BE CONVERTED INTO US DOLLARS. THE CONVERSION TO US DOLLARS SHALL BE MADE ON THE DATE THE CHARGE IS PROCESSED BY AMEX, WHICH DEPENDS ON THE DATE THE CHARGE IS SUBMITTED TO AMEX AND MAY NOT COINCIDE WITH THE DATE THE PARTNER MADE THE CHARGE IS SUBMITTED TO AMEX AND MAY NOT COINCIDE WITH THE DATE THE PARTNER MADE THE CHARGE UNLESS OTHERWISE MANDATED BY APPLICABLE LUM, IT IS UNDERSTOOD AND AGREED THAT THE TREASURY DEPARTMENT OF OUR FOREIGN AFFILIATES SHALL UTILIZE EXCHANGE RATES BASED ON INTERBANK EXCHANGE RATES, CHOSEN BY SAID DEPARTMENT ON THE BUSINESS DAY PRECEDING THE DATE THE CHARGE IS PROCESSED, FROM SOURCES COMMONLY USED IN THE INDUSTRY, INCREASED BY AN ADMINISTRATIVE CHARGE FOR TRANSACTIONS CONDUCTED OUTSIDE THE US DOLLAR, AS INDICATED IN ANNEX 1. IF CHARGES ARE CONVERTED BY THIRD PARTIES BEFORE BEING SUBMITTED TO US, ANY CONVERSION MADE BY SUCH THIRD PARTIES SHALL BE MADE AT THE EXCHANGE RATE CHOSEN BY THEM. WE MAY SUSPEND THE INTERNATIONAL VALIDITY OF CORPORATE ACCOUNTS AT ANY TIME, OR THE ABILITY TO MAKE PURCHASES IN FOREIGN CURRENCY, IF OUR ABILITY TO PURCHASE US DOLLARS AT A FREE EXCHANGE RATE, OR OUR ABILITY TO PURCHASE US DOLLARS AT A FREE EXCHANGE RATE. OR OUR ABILITY TO FREELY TRANSFER US DOLLARS AS A FESSULT OF CHANGES IN THE INTERNATIONAL CHANGES IN APPLICABLE REGULATIONS.

CONVERSION MADE BY SUCH THING PARTIES SHALL BE MADE AT THE EXCHANGE RATE CHOSEN BY THEM ME
MY SUSPEND THE INTERNATIONAL VALIDITY OF COPPORATE ACCOUNTS AT ANY THEO. OR THE ABILITY TO
MAKE PURCHASES IN FOREIGN CURRENCY; IF OUR ABILITY TO PURCHASE US DOLLARS AND COUNTY OF PARTIALLY
AFFECTS OF A PURCHASE SIN FOREIGN CURRENCY; IF OUR ABILITY TO FURCHASE US DOLLARS AND COUNTY OF PARTIALLY
AFFECTS OF A PURCHASE TO THE COMPANY AND THE PARTIERS AGREE THAT CASH WITHDRAWALS, (ALSO
KNOWN AS EXPRESS CASH IN ENGLISH) MADE WITH THE CARD AT AUTOMATED TELLER MACHINES SHALL BE
PROVEN BY THE CORRESPONDING MAGNETIC RECORDS OR DOLUMEN THAT YELVED EXPLOYED
KNOWN AS EXPRESS CASH IN ENGLISH) MADE WITH THE CARD AT AUTOMATED TELLER MACHINES SHALL BE
PROVEN BY THE CORRESPONDING MAGNETIC RECORDS OR DOLUMEN THAT YELVED EXPLOYED
KNOWN AS EXPRESS CASH IN ENGLISH) MADE WITH THE CARD AT AUTOMATED TELLER MACHINES SHALL BE
PROVEN BY THE CORRESPONDING MAGNETIC RECORDS OR DOLUMEN THAT YELVED EXPLOYED
KNOWN AS EXPRESS CASH IN ENGLISH MADE WITH THE CARD AT AUTOMATED TELLER MACHINES SHALL BE
PROVED BY THE CORPORATION AND THE PARTIMESS AGREE TO PAY THE ADMERBENCE COMMISSION FOR THE CASH
UNTIL THE OUT OF A THE CASH AND THE CASH AND THE CASH OF THE CASH AND THE C

WITHOUT IMPLYING ANY MODIFICATION TO THESE CONDITIONS IN ANY WAY.

9. PAYMENTS FOR INSURANCE AND OTHER GOODS AND/OR SERVICES. THE PARTNER AND/OR THE COMPANY AUTHORIZE US TO PAY, AT THE TIME OF THEIR MATURITY AND IN THEIR NAME, THE INSURANCE PREMIUMS AND AUTOMATIC DEBIT INSTALLMENTS THAT THE PARTNER AND/OR THE COMPANY HAVE CONTRACTED THROUGH THE CORPORATE ACCOUNTS, AND UNDETTAKE TO REIMBURSE US FOR ANY MOUNTS WE HAVE PAID FOR SUCH PURPOSES IN ACCORDANCE WITH THESE TERMS AND CONDITIONS. IN THE EVENT THAT THE PARTNER AND/OR THE COMPANY DECIDES TO CANCEL OR SUSPEND PAYMENT THROUGH THE CORPORATE ACCOUNTS, THEY MUST NOTIFY THE ESTABLISHMENT AND AMEX, WITH THE PARTNER AND THE COMPANY REMAINING RESPONSIBLE FOR ANY PAYMENTS MADE BY AMEX. TO THE ESTABLISHMENT UP TO THIRTY DAYS AFTER RECEIVING SUCH NOTIFICATION. IF THE CORPORATE ACCOUNTS ARE CANCELED OR SUSPENDED, OR IF THE COMPANY OR THE PARTNER ARE IN ARRESS, OR IF THE EXPENSE LIMIT DOES NOT COVER THE VALUE OF THE PREMIUM OR INSTALLMENT THAT WE MUST PAY, WE WILL IMMEDIATELY CEASE TO PAY SUCH PREMIUMS OR INSTALLMENTS WITHOUT ASSUMING ANY LIABILITY. IN SUCH CASE, THE COMPANY OR THE PARTNER TAKING WHATEVER ACTIONS THEY DEEM NECESSARY TO MAKE PAYMENTS FOR SUCH PREMIUMS OR INSTALLMENTS.

10.- ERRORS OR COMPLAINTS REGARDING THE STATEMENT. THE COMPANY AND THE PARTNER SHALL

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

\*SIGNATURE OF ATTORNEY-IN-FACT/ IOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION

HAVE A PERIOD OF THIRTY CALENDAR DAYS FROM THE DATE OF RECEIPT OF THE STATEMENT (IN PAPER OR ELECTRONIC FORM) TO CHALLENGE SAID STATEMENT. IF THE COMPANY AND/OR THE PARTNER DO NOT RECEIVE THE STATEMENT, THEY MUST CONTACT US AT OUR TELEPHONE SERVICE CENTER, WHERE WE WILL INFORM THEM OF THEIR ACCOUNT BALANCE. IF THE COMPANY OR THE PARTNER OBJECT TO THE VALIDITY OF A CHARGE. THEY MUST DO SO IN WRITING WITH ACKNOWLEDGMENT OF RECEIPT BY US, CLEARLY STATING THE CHARGE BEING OBJECTED TO, THE REASON FOR OBJECTION, AND ACCOMPANYING ALL DOCUMENTATION OR DATA THAT WILL HELP RESOLVE THEIR CLAIM. FURTHERMORE, THE COMPANY OR THE PARTNER MUST PROVIDE THE INFORMATION AND DOCUMENTATION THAT WE REQUEST FOR SUCH PURPOSES, DURING THE INVESTIGATION PROCESS, WE MAY ISSUE A PROVISIONAL REDIT TO THE CORPORATE ACCOUNT FOR AN AMOUNT EQUAL TO THE CHARGE OR CHARGES DISPUTED BY THE COMPANY OR THE PARTNER. IF OUR INVESTIGATION REVEALS THAT THE OBJECTION OR CLAIM SUBMITTED BY THE COMPANY OR THE PARTNER IS VALID, THEN WE WILL MAKE THE CORRESPONDING ADJUSTMENT TO THEIR STATEMENT. ON THE CONTRARY, IF IN OUR OPINION, AFTER THE CORRESPONDING INVESTIGATION, THE INFORMATION SUBMITTED BY THE COMPANY OR THE PARTNER BY ONLY JUSTIFY OR SUBSTANTIATE THEIR OBJECTIONS OR CLAIMS, THEN THE COMPANY OR THE PARTNER DO NOT JUSTIFY OR SUBSTANTIATE THEIR OBJECTIONS OR CLAIMS, THEN THE COMPANY OR THE PARTNER DO NOT JUSTIFY OR SUBSTANTIATE THEIR OBJECTIONS OR CLAIMS, THEN THE COMPANY OR THE PARTNER DO NOT JUSTIFY OR SUBSTANTIATE THEIR OBJECTIONS OR CLAIMS, THEN THE COMPANY OR THE PARTNER MUST, IMMEDIATELY UPON RECEIPT OF OUR NOTIFICATION, PAY THE DISPUTED CHARGES AND THE INTEREST CHARGES, AS APPLICABLE.

OR SUBSTANTIATE THEIR OBJECTIONS OR CLAIMS, THEN THE COMPANY OR THE PARTNER MUST, IMMEDIATELY UPON RECEIPT OF OUR NOTHICATION, PAY THE DISPUTED CHARGES AND THE INTERES. THANGE, AS APPLICABLE.

11. PROBLEMS WITH GOODS AND/OR SERVICES. AMEX SHALL HAVE NO LIABILITY OR OBLIGATION FOR ACTS OR OMISSIONS OF ESTABLISHMENTS, INCLUDING THEIR REFUSAL TO ACCEPT CORPORATE ACCOUNTS. NOR FOR DEFECTS IN QUALITY, WEIGHT, QUANTITY, OR ANY OTHER ASPECT RELATING TO THE DELIVERY OR PROVISION OF GOODS AND/OR SERVICES PURCHASED USING CORPORATE ACCOUNTS. CLAIMS FOR GOODS OR SERVICES PURCHASED BY THE COMPANY OR THE PARTNER USING CORPORATE ACCOUNTS. MUST BE MADE DIRECTLY TO THE ESTABLISHMENT, WITHOUT ALTERING THEIR OBLIGATION TO IMMEDIATELY PAY US FOR THE DISPUTED CHARGES, IN THE EVENT THAT THE COMPANY OR THE PARTNER RETURNS ANY PURCHASE OF A GOOD OR SERVICES WITH THE ESTABLISHMENT. WITHOUT ALTERING THEIR OBLIGATION TO IMMEDIATELY PAY US FOR THE DISPUTED CHARGES, IN THE EVENT THAT THE COMPANY OR THE PARTNER RETURNS ANY PURCHASE OF A GOOD OR SERVICE WITH THE ESTABLISHMENT'S AGREEMENT, SUCH RETURN MUST BE MADE EXCLUSIVELY THROUGH A CREDIT TO THE CORPORATE ACCOUNTS. FURTHERMORE, AMEX SHALL HAVE NO LIABILITY OR OBLIGATION FOR ACTS OR OMISSIONS OF THE COMPANY AND/OR THE PARTNER REGARDING COMPLIANCE WITH LEGAL OR ADMINISTRATIVE OBLIGATIONS, ESTABLISHED BY ANY COMPETENT AUTHORITY, INCLUDING, WITHOUT LIMITATION, TAX OR CUSTOMS OBLIGATIONS, IN RELATION TO GOODS AND/OR SERVICES ACQUIRED USING CORPORATE ACCOUNTS. SUBJECT TO APPLICABLE LEGAL PROVISIONS, THE COMPANY AND THE PARTNER SHALL BE LIMITED TO DIFFECT DAMAGES CAUSEDS DUCLEY AND EXCLUSIVELY BY OUR FAILURE TO COMPLEY WITH OUR OBLIGATIONS RELATED TO CORPORATE ACCOUNTS OR THEIR USE: AND WE UNDER THE PARTNER FOR ANY DELY ACTS, OR PROBLEMS CAUSED BY ANY THIRD PARTY, INCLUDING (SOLELY BY WAY OF EXAMPLE) MECHANICAL OR SYSTEM FAILURES THAT AFFECT SUCH THIRD PARTIES.

12. INFORMATION. • CREDIT INFORMATION THE COMPANY AND THE PARTNER FOR ANY DOUR FAILURE TO COMPLY ACTS, OR PROBLEMS CAUSED BY ANY THIRD REGULATIONS ON DATA PROLICITION AND INFORMATION PROTECTION STANDARDS").

AMEX RESERVES THE RIGHT TO REFUSE TO MAKE THE TRANSFER OF ACCOUNT INFORMATION PROTECTION

STANDARDS; AND (IV) SHALL DEFEND AND HOLD HARMLESS AMEX AGAINST ANY JUDICAL OR EXTRAJUDICAL

CLAIM FILED BY ANY THIRD PARTY AGAINST AMEX, DAMAGE, LOSS, RINE, COST AND EXPENSE (INCLUDING

WITHOUT LIMITATION REASONABLE ATTORNEYS' FEES), RELATING TO THE TRANSFER OF ACCOUNT

INFORMATION CONTEMPLATED IN THESE TERMS, "TELEPHONE INFORMATION TO ENSURE THE QUALITY OF

OUR CUSTOMER SERVICE. THE COMPANY AND THE PARTNER CONSENT TO US LISTENING TO ANDOY.

RECORDING THE TELEPHONE CALLS MADE BY THE PARTNERS TO OUR TELEPHONE SERVICE CENTERS, OR THE

CALLS MADE BY US TO THE PARTNERS. "RIGHTS OF ACCESS, RECTIFICATION, AND/OR ERASURE: PERSONAL

DATA WILL BE COLLECTED BY US FOR THE PURPOSE OF PROVIDING THE SERVICE CONTEMPLATED IN THIS

AGREEMENT, AND/OR OFFERING OUR PRODUCTS AND SERVICES OF THERE

COMPANIES. THE DATA WILL BE STORED IN A DATABASE WHOSE RESPONSIBLE PARTY IS AMERICAN EXPRESS

MEXENTED AND A SERVICE. THE COMPANY AND SERVICES OF THE PRODUCTS AND SERVICES OF OTHER

COMPANIES. THE DATA WILL BE STORED IN A DATABASE WHOSE RESPONSIBLE PARTY IS AMERICAN EXPRESS

MEXENTED AND A SERVICE. THE PARTNERS AND A SERVICES OF THERE

MAY EXERCISE THEIR RIGHTS OF ACCESS. RECTIFICATION, AND/OR ERASURE OF THEIR DATA IN ACCORDANCE

WITH THE PROVISIONS OF LAW 25.326. THE COMPANY AND/OR THE PARTNER MAY EXERCISE THEIR RIGHTS OF ACCESS. SECTIFICATION, AND/OR ERASURE OF THEIR DATA IN ACCORDANCE

WITH THE PROVISIONS OF LAW 25.326. THE COMPANY AND/OR THE PARTNER HAVE THE RIGHT TO EXERCISE

ACCESS TO THEIR PERSONAL DATA FREE OF CHARGE AT INTERVALS NOT LESS THAN SIX MONTHS, UNLESS A

ACCESS TO THEIR PROVISIONS OF MY POSTAL MAIL TO OUR CUSTOMER SERVICE AT TELEPHONE NUMBER

MAY EXERCISE THE RIGHTS OF ACCESS. SECTIFICATION, AND/OR THE PARTNER HAVE THE RIGHT TO EXERCISE

ACCESS TO THEIR DATA AND A SET OF THE PURPOSES OF PROCESSING SUCH DATA, THE COMPANY AND THE PARTNER MAY EXPRESSED THE PROVI ESTABLISHMENTS LOCATED OUTSIDE THE ARGENTINE REPUBLIC, IT IS REQUIRED THAT YOUR ACTUAL RESIDENCE BE IN THE ARGENTINE REPUBLIC. NON-COMPLIANCE IS SUBJECT TO THE FOREIGN EXCHANGE

CRIMINAL REGIME.

13. WAIVER. THE FACT THAT WE DO NOT EXERCISE ANY OF OUR RIGHTS DERIVED FROM THESE CONDITIONS
OR THE WAIVER OF OUR RIGHTS ON ISOLATED OCCASIONS DOES NOT IMPLY NOR CONSTITUTE A WAIVER OF
THE EXERCISE OF OUR RIGHTS FOR OTHER OCCASIONS.

THE EARCHSE OF OWN RIGHT FOR OTHER OCCASIONS.

14. MISUSE, LOSS, OR THEFT OF CORPORATE ACCOUNTS OR UNAUTHORIZED USE. UPON RECEIVING THE CARD, THE CARDHOLDER MUST IMMEDIATELY SIGN IT TO REDUCE THE RISK OF IT BEING USED AGAINST THEIR WILL. LIKEWISE, THE CARDHOLDER MAY NOT ALLOW THIRD PARTIES TO USE THE CARD ISSUED IN THEIR NAME.

OTHER MICHAS.

18. TAKES AND FEES. THE PAYMENT OF TAXES AND FEES THAT MAY BE IMPOSED BY LAW AND/OR RESOLUTION OF THE NATIONAL AND/OR PROVINCIAL COMPETENT AUTHORITY ON THE USE OF CORPORATE ACCOUNTS SHALL BE THE RESPONSIBILITY OF THE COMPANY AND/OR THE CARDHOLDER. WE MAY DEPOSIT THE CORRESPONDING AMOUNT ON YOUR BEHALF AND ORDER, IN WHICH CASE THE CHARGE WILL BE CLEARLY

ACCOUNTS SHALL BE THE RESPONSIBILITY OF THE COMPANY AND/OR THE CARDHOLDER. WE MAY DEPOSIT THE CORRESPONDING AMOUNT ON YOUR BEHALF AND ORDER, IN WHICH CASE THE CHARGE WILL BE CLEARLY ITEMIZED IN YOUR NEXT STATEMENT.

19. AMENDMENTS. WE MAY MODIFY THE FOLLOWING CLAUSES OF THESE TERMS AND CONDITIONS: A) FEES AND/OR CHARGES INDICATED IN ANNEX 1 OF THESE TERMS AND CONDITIONS; B) 1. USE OF CORPORATE ACCOUNTS; C) 2. RESPONSIBILITY FOR IMMEDIATE PAYMENT OF CHARGES; D) 4. CARD RENEWAL AND ACCOUNT CANCELLATION; E) 5. CHARGES MADE IN FOREIGN CURRENCY; F) 6. CASH WITHDRAWALS; G) 7. PAYMENTS OF CORPORATE CARDS; H) 8. OVERDUE OR DEFAULT PAYMENTS; I) 9. PAYMENT OF INSURANCE AND OTHER GOODS AND/OR SERVICES; J) 12. INFORMATION; K) 14. MISUSE, LOSS, OR THEFT OF CORPORATE ACCOUNTS; L) 15. INFORMATION ON SPECIAL OFFERS AND PROMOTIONS; N) 10. 6. ASSIGNMENT; O) 17. CHANGE OF ADDRESS-NOTIFICATIONS; R) 9. AMENDMENTS, S) 21. INSTALLMENT PLAN, T) 22. BENEFITS, AND U) 23. AMERICAN EXPRESS © WORK PROGRAM. THE MODIFICATIONS OF THE FEES AND CHARGES ESTABLISHED IN ANNEX I WILL BE MADE BASED ON THE FOLLOWING PARAMETERS: (I) THE GENERAL EVOLUTION OF THE COSTS INCURRED BY AMERICAN EXPRESS; AND/OR (III) THE GENERAL EVOLUTION OF THE COMMISSION VALUES ESTABLISHED BY AMERICAN EXPRESS; AND/OR (III) THE GENERAL EVOLUTION OF COMMISSIONS OF SIMILAR PRODUCTS OR SERVICES AVAILABLE IN THE MARKET; AND/OR (III) THE GENERAL EVOLUTION OF FORMISSIONS OF SIMILAR PRODUCTS OR SERVICES AVAILABLE IN THE MARKET; AND/OR (III) THE GENERAL EVOLUTION OF SIMILAR PRODUCTS ON SERVICES AVAILABLE IN THE MARKET; AND/OR (III) THE GENERAL EVOLUTION OF SIMILAR PRODUCTS AND SERVICES ON THE FOLLOWING PARAMETERS: (I) THE GENERAL EVOLUTION OF SIMILAR PRODUCTS AND SERVICES OFFERED BY AMERICAN EXPRESS SON THE COSTS INCURRED BY AMERICAN EXPRESS; AND/OR (III) THE GENERAL EVOLUTION OF SIMILAR PRODUCTS ON SERVICES OFFERED BY AMERICAN EXPRESS SON THE COSTS INCURRED BY AMERICAN EXPRESS. AND/OR (IV) THE GENERAL EVOLUTION OF SIMILAR PRODUCTS AND SERVICES OFFERED BY AMERICAN EXPRESS SON THE GE

20. TRADEMARKS. THESE TERMS AND CONDITIONS DO NOT GRANT THE COMPANY OR THE CARDHOLDER ANY RIGHTS OVER THE NAME, LOGO, SERVICE MARKS, TRADEMARKS, TRADE NAMES, SLOGANS, OR ANY OTHER DESIGNATION SUBJECT TO AMEX'S INTELLECTUAL PROPERTY RIGHTS (THE "MARKS"). NEITHER THE

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

\*SIGNATURE OF ATTORNEY-IN-FACT/ IOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION

COMPANY NOR THE CARDHOLDER MAY USE THE MARKS WITHOUT THE PRIOR WRITTEN CONSENT OF AMEX THE COMPANY EXPRESSLY ASSUMES THE OBLIGATION TO MAKE KNOWN TO ALL CARDHOLDERS AND/OR AUTHORIZED USERS THE TERMS AND CONDITIONS OF THIS AGREEMENT FOR THE USE OF CORPORATE ACCOUNTS, INCLUDING, WITHOUT LIMITATION, THE OBLIGATION TO PROVIDE DETAILED INFORMATION TO THE CARDHOLDERS ABOUT THE EXPENDITURE LIMITS NOTIFIED BY US TO THE COMPANY.

PRICE. CARDHOLDERS MUST INQUIRE THE INTEREST RATE TO BE APPLIED AT THE ESTABLISHMENT. THE VALUE OF EACH INSTALLMENT WILL BE EQUAL TO THE TOTAL VALUE OF THE SALE DIVIDED BY THE NUMBER OF INSTALLMENTS. PURCHASES WITH THE INSTALLMENT PLAN CANNOT BE MADE AT ESTABLISHMENTS OUTSIDE THE COUNTRY.

22. BENEFITS. A) FOR FURTHER INFORMATION ON THE SERVICES, INSURANCE, OR ADDITIONAL BENEFITS ACCESSIBLE TO DIFFERENT CORPORATE CARDS AND VIRTUAL ACCOUNTS FROM AMERICAN EXPRESS, PLEASE VISIT WWW.AMERICANEXPRESS. COM AR/EMPRESAS OR CALL OSIO-888-CORP (2677) MONDAY THROUGH FIDAY FROM 8 AM TO 8 PM. B) MEMBERSHIP REWARDS REWARD PROGRAMS: THIS REWARD PROGRAM IS ONLY AVAILABLE FOR THE CORPORATE CARD. THE GOLD CORPORATE CARD, AND THE CORPORATE PLATINUM CARD. VIRTUAL ACCOUNTS AND THE CORPORATE CARD. THE SID LAND THE CORPORATE PLATINUM CARD. THE SEWARD PROGRAM. AT THE CORT. YOU CAN CONSULT THE TERMS AND CONDITIONS OF THE "MEMBERSHIP REWARDS REWARD PROGRAM. AT TWO COST. YOU CAN CONSULT THE TERMS AND CONDITIONS OF THE "MEMBERSHIP REWARDS REWARD PROGRAM. AT TWO COST. YOU CAN CONSULT THE TERMS AND CONDITIONS OF THE "MEMBERSHIP REWARDS REWARD PROGRAM. AT TWO COST. YOU CAN CONSULT THE SETABLISHED IN THIS CALLS. THE CORPORATE PLATINUM CARD. THE SETABLISHED IN THIS CALLS. THE CORPORATE PLATINUM CARD. THE SETABLISHED IN THIS CALLS. THE CORPORATE PLATINUM CARD. THE SETABLISHED IN THIS CALLS. THE CORPORATE PLATINUM CARD. AND CONSULT THE LISE OF THE "AMERICAN EXPRESS © WORK! PROGRAM THE "STREMS AND CONDITIONS. THAD TREGULATE THE USE OF THE "AMERICAN EXPRESS OF THE PROGRAM THAT WILL ALLOW THE COMPANY TO REVIEW AND CONSULT THE INFORMATION. THE USE OF THE SITE WWW AMERICAN EXPRESS GRANTS THE COMPANY AND CONSULT THE INFORMATION. THE CORPORATE PLATINUM CARD. AND/OR THE CORPORATE PURCHASING CARD INDICATED BY THE COMPANY TO AMERICAN EXPRESS (THE COORPORATE ACCOUNTS). THE USE OF THE PROGRAM ADMINISTRATORS, WILL BE ALLOWED BY THE COMPANY THE C

AUTHORIZED PERSON WITH A "MANAGEMENT" PROFILE. THE COMPANY IS SOLELY AND EXCLUSIVELY RESPONSIBLE FOR THE ACTIONS TAKEN BY THE MANAGEMENT USER AND THEREFORE RELEASES AMERICAN EXPRESS FROM ANY LIBBILITY FOR ANY DEBIT LOSS OR FRAUD COMMITTED AS A RESULT OF THE ACTIVITIES CARRIED OUT BY IT. AMERICAN EXPRESS WILL NOT BE LIABLE FOR ANY OMISSION OR DELAY IN PAYMENTS CAUSED BY THE ACTIONS OR OMISSIONS OF THE AUTHORIZED USER OR BY THE COMPANY'S FAILURE TO TIMELY DESIGNATE OR REVOKE SUCH USER, WHICH RESULTS IN THE CHARGING OF FEES OR INTEREST FOR DELAY IN PAYMENTS CAUSED BY THE ACTIONS OR OMISSIONS OF THE AUTHORIZED USER OR BY THE COMPANY'S FAILURE TO TIMELY DESIGNATE OR REVOKE SUCH USER, WHICH RESULTS IN THE CHARGING OF FEES OR INTEREST FOR DELAY IN PAYING THE CORPORATE ACCOUNTS. THE COMPANY, REPRESENTED BY THE MANAGEMENT USER. IS RESPONSIBLE FOR SCHEDULING THE TIME AND AMOUNTS OF THE PAYMENT ASSIGNMENT FILE. D. AMERICAN EXPRESS MAY IMMEDIATELY SUSPEND THE PROGRAM, WITHOUT NEED FOR NOTICE TO THE COMPANY IN PARTICULAR. SIMILARLY, AMERICAN EXPRESS MAY TERMINATE THESE TERMS AND CONDITIONS WITH IMMEDIATE EFFECT UPON PRIOR WRITTEN NOTICE TO THE COMPANY IF THE COMPANY OR ITS PROGRAM ADMINISTRATORS FAIL TO COMPLY WITH THE OBLIGATIONS CONTEMPLATED HEREIN, FOR TRYTHER INFORMATION, THE COMPANY AND/OR THE PARTINERS MAY REFER TO THE PROBAMS AND CONDITIONS AT WWW.AMERICANEXPRESS.COM.ARYATWORK.

24. ACCEPTANCE, VALIDITY AMERICAN EXPRESS RESERVES THE RIGHT TO APPROVE THIS APPLICATION. IF APPROVED, WITHIN TEN (10) BUSINESS DAYS FROM THE DATE OF APPROVAL OR THE EFFECTIVE AVAILABILITY OF THE PRODUCT OR SERVICE, WHICHEVER OCCURS LATER, THE COMPANY AND/OR THE PARTINER, AS APPLICABLE, WILL RECEIVE COMMUNICATION FROM AMERICAN EXPRESS ATTACHING THE CARD(S) (UNLESS IT IS A VIRTUAL ACCOUNT IN WHICH CASE THE COMPANY WILL PRECEIVE A LETTER WITH THE ACCOUNT NUMBER AND SECURITY CODE, FROM THAT MOMENT ON THE CONTRACT WILL BE CONDITIONS IN RELATION TO THE USE OF CORPORATE ACCOUNTS SUFFICE ALETTER WITH THE ACCOUNT THE SET ADDITIONS WILL ENTER INTO FOR

26. JURISDICTION AND APPLICABLE LAW. THESE CONDITIONS FOR THE USE OF AMERICAN EXPRESS CORPORATE ACCOUNTS WILL BE GOVERNED BY ARGENTINE LAW, AND ANY DISPUTE ARISING FROM THEIR INTERPRETATION OR EXECUTION WILL BE RESOLVED BY THE COURTS OF THE JURISDICTION CORRESPONDING

27. POLITICALLY EXPOSED PERSONS (PEPS): FOREIGN POLITICALLY EXPOSED PERSONS ARE CONSIDERED TO BE PUBLIC OFFICIALS FROM FOREIGN COUNTRIES WHO HOLD OR HAVE HELD ANY OF THE FOLLOWING

POSITIONS: A) HEAD OF STATE, HEAD OF GOVERNMENT, GOVERNOR, MAYOR, MINISTER, SECRETARY, UNDERSECRETARY OF STATE, OR EQUIVALENT GOVERNMENTAL POSITION. B) MEMBER OF PARLIAMENT, LEGISLATIVE BODY, OR OTHER EQUIVALENT LEGISLATIVE ORGAN. C) JUDGE OR MAGISTRATE OF HIGHER COURTS OR OTHER HIGH JUDICIAL OR ADMINISTRATIVE AUTHORITIES IN THE JUDICIARY, D) AMBASSADOR OR CONSUL OF A COUNTRY OR INTERNATIONAL ORGANIZATION. E) OFFICIAL, REPRESENTATIVE, BOARD MEMBER. CONSUL OF A COUNTRY OR INTERNATIONAL ORGANIZATION. E) OFFICIAL, REPRESENTATIVE, BOARD MEMBER, ORGAN ADMINISTRATOR, OR CONTROLLER WITHIN A FOREIGN POLITICAL PARTY. F) SENIOR RANK OFFICER IN THE ARMED FORCES (FROM COLLONEL OR EQUIVALENT RANK IN THE FORCE AND/OR COUNTRY IN QUESTION). OR PUBLIC SECURITY FORCES (FROM COMMISSIONER OR EQUIVALENT RANK ACCORDING TO THE FORCE AND/OR COUNTRY IN QUESTION). G) MEMBER OF THE MANAGEMENT AND CONTROL BODIES OF STATE-OWNED ENTERPRISES WHERE THE STATE HOLDS TWENTY PERCENT (20%) OR MORE OF THE CAPITAL OR VOTING RIGHTS, OR EXERCISES DIRECTLY OR INDIRECTLY CONTROL OVER SUCH ENTITY. I) PRESIDENT, VICE PRESIDENT, DIRECTOR, GOVERNOR, COUNCILOR, TRUSTEE, OR EQUIVALENT AUTHORITY OF CENTRAL REPRESENTATIVES, SENIOR MANAGEMENT MEMBERS SUCH AS DIRECTORS AND BOARD MEMBERS, OR EXERCISES DIRECTLY AND LEGAL REPRESENTATIVES, SENIOR MANAGEMENT MEMBERS SUCH AS DIRECTORS AND BOARD MEMBERS, OR EQUIVALENT POSITIONS, ATTORNEYS-IN-FACT, AND LEGAL REPRESENTATIVES OR AN INTERNATIONAL ORGANIZATION, WITH DECISION-MAKING, ADMINISTRATIVE, OR DISPOSAL POWERS, NATIONAL, PROVINCIAL MUNICIPAL, OR AUTONOMOUS CITY OF BUBENOS AIRES POLITICALLY EXPOSED PERSONS ARE PUBLIC OFFICIALS FROM THESE JURISDICTIONS WHO HOLD OR HAVE HELD ANY OF THE FOLLOWING POSITIONS: A) PRESIDENT OF THE MATION. B) NATIONAL, PROVINCIAL, MUNICIPAL, OR AUTONOMOUS CITY OF BUBENOS AIRES GOVERNOR, MYOR, VICE MAYOR, HEAD OF PRESIDENT OR VICE PRESIDENT OF THE NATION. B) NATIONAL, PROVINCIAL, MONICIPAL, OR AUTONOMOUS CITY OF BUENOS AIRES LEGISLATOR. C) GOVERNOR, VICE GOVERNOR, MAYOR, VICE MAYOR, HEAD OF GOVERNMENT, OR DEPUTY HEAD OF GOVERNMENT, D) CHIEF OF CABINET OF MINISTERS. MINISTER. SECRETARY, OR UNDERSECRETARY OF THE EXECUTIVE POWER OF THE NATION, OR THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENOS AIRES. E) PERSONNEL OF THE JUDICIARY OF THE NATION OR THE PUBLIC MINISTRY OF THE NATION, WITH A CATEGORY NO LESS THAN SECRETARY, OR THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENOS AIRES, F) NATIONAL OMBUDSMAN, THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENOS AIRES, AND NATION OR THE PUBLIC MINISTRY OF THE NATION, WITH A CATEGORY NO LESS THAN SECRETARY, OR THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENDS AIRES, PI, NATIONAL OMBUDSMAN, THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENDS AIRES, AND THE DEPUTY OMBUDSMAN, G) FEDERAL INTERVENTOR, OR THEIR COLLABORATORS WITH A CATEGORY NO LESS THAN DIRECTOR OR EQUIVALENT. H) PERSONNEL OF THE LEGISLATIVE POWER OF THE NATION, WITH A CATEGORY NO LESS THAN THAT OF DIRECTOR, OR THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENDS AIRES. I) GENERAL COMPTROLLER OF THE NATION OR DEPUTY GENERAL COMPTROLLER OF THE NATION OR SEVERAL AUDITOR OF THE AUTONOMOUS CITY OF THE NATION SUPERIOR AUTHORITY OF A REGULATORY AGENCY OR OTHER BODIES THAT INTEGRATE THE CONTROL SYSTEMS OF THE NATIONAL PUBLIC SECTOR; MEMBERS OF JURISDICTIONAL ADMINISTRATIVE ORGANIZATIONS OR PERSONNEL OF SUCH ORGANIZATIONS, WITH A CATEGORY OR LESS THAN DIRECTOR OR EQUIVALENT. JN MEMBERS OF THE COUNCIL OF THE MAGISTRACY OF THE NATION OR THE JURY OF IMPEACHMENT, OR THEIR EQUIVALENT IN THE PROVINCES OR IN THE AUTONOMOUS CITY OF BUENDS AIRES. K) AMBASSADOR OR CONSULL L) PERSONNEL OF THE ARMED FORCES, THE ARGENTINE FEDERAL POLICE, THE NATIONAL GENDARMERIE, THE ARGENTINE COAST GUARD, THE FEDERAL POLICE, THE NATIONAL GENDARMERIE, THE ARGENTINE COAST GUARD, THE FEDERAL POLICE, THE NATIONAL GENDARMERIE, THE ARGENTINE COAST GUARD, THE FEDERAL POLICE, THE NATIONAL GENDARMERIE, THE ARGENTINE COAST GUARD, THE FEDERAL POLICE, THE NATIONAL OR PROVINCIAL UNIVERSITIES. N) OFFICIAL OR EMPLOYEE WITH A RANK NOT LOWER THAN AGENERAL OR NATIONAL GENERAL POLICE FOR THE NATIONAL OR PROVINCIAL UNIVERSITIES. N) OFFICIAL OR EMPLOYEE WITH DECREMAN ACCORDING SOME OF THE NATIONAL OR PROVINCIAL UNIVERSITIES. N) OFFICIAL SECURITY FOR THE NAT PROVISIONS OF LAWS NOS. 23.298 AND 26.215. B) AUTHORITY OF THE MANAGEMENT AND ADMINISTRATION NODIES OF TRADE UNIONS AND BUSINESS ORGANIZATIONS (CHAMBERS, ASSOCIATIONS, AND OTHER FORMS OF CORPORATE GROUPING). WITH RESPECT TO TRADE UNIONS, THE SCOPE INCLUDES HUMAN INDIVIDUALS WITH DECISION-MAKING, ADMINISTRATIVE, CONTROL, OR DISPOSAL CAPACITY OVER THE UNIONS ASSETS. WITH RESPECT TO BUSINESS ORGANIZATIONS, THE SCOPE INCLUDES HUMAN INDIVIDUALS OF SAID ORGANIZATIONS WHO, BY VIRTUE OF THEIR POSITION: 1) HAVE DECISION-MAKING, ADMINISTRATIVE, CONTROL, OR DISPOSAL CAPACITY OVER FUNDS FROM THE NATIONAL, PROVINCIAL, MUNICIPAL, OR AUTONOMOUS CITY OF BUENOS AIRES PUBLIC SECTOR, AND/OR, 2) ENGAGE IN FOR-PROFIT ACTIVITIES FOR THE ORGANIZATION OR ITS REPRESENTATIVES, INVOLVING MANAGEMENT, BROKERAGE, OR REGULAR CONTRACTING WITH THE NATIONAL, PROVINCIAL, MUNICIPAL, OR AUTONOMOUS CITY OF BUENOS AIRES STATE. C) AUTHORITY, LEGAL REPRESENTATIVE, MEMBER OF THE MANAGEMENT BODY, OR BOARD OF PRECTORS OF HEALTH INSURANCE COMPANIES UNDER LAW NO. 23.660. THE SCOPE INCLUDES HUMAN INDIVIDUALS OF SAID ORGANIZATIONS WITH DECISION-MAKING, ADMINISTRATIVE, CONTROL, OR DISPOSAL CAPACITY OVER THE ASSETS. D) HUMAN INDIVIDUALS OF SAID ORGANIZATIONS WITH DECISION-MAKING, ADMINISTRATIVE, CONTROL, OR DISPOSAL CAPACITY OVER THE ASSETS OF PRIVATE LEGAL ENTITIES AS PER ARTICLE 148 OF THE CIVIL AND COMMERCIAL CODE OF THE NATION, WHICH RECEIVE PUBLIC FUNDS INTENDED FOR THIRD PARTIES AND HAVE CONTROL, OR DISPOSAL CAPACITY OVER THE ASSETS OF PRIVATE LEGAL ENTITIES AS PER ARTICLE 148 OF THE CIVIL AND COMMERCIAL CODE OF THE NATION, WHICH RECEIVE PUBLIC FUNDS INTENDED FOR THIRD PARTIES AND HAVE CONTROL AND SPOSAL CAPACITY OVER THE ASSETS OF PRIVATE LEGAL ENTITIES AS PER ARTICLE 148 OF THE COVIL AND COMMERCIAL CODE OF THE NATION, WHICH RECEIVE PUBLIC FUNDS INTENDED FOR THIRD PARTIES AND HAVE CONTROL AND SPOSAL POWER REGARDING THE DESTINATION OF SUCH FUNDS. INDIVIDUALS ARE CONSIDERED POLITICALLY EXPOSED DUE TO KINSHIP OR CLOSENESS TO THOSE ENDIVIDUALS ARE CONSIDERE

ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I AGREE TO ALL THE ABOVE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS AND KEEP A COPY THEREOF. IN ADDITION, I REQUEST: (I) TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM; AND (II) TO ADD THE INDIVIDUALS NAMED IN THIS FORM AS "THIRD PARTY NOMINEES".

SIGNATURE OF BASIC CARDMEMBER / ALTERNATIVE BASIC CARDMEMBER

\*SIGNATURE OF ATTORNEY-IN-FACT/ IOINT OWNER \*ONLY IF THE COMPANY HAS JOINT SIGNATURE AUTHORIZATION

ANNEX 1
DEFINITIONS. THE CORPORATE ACCOUNTS OF AMERICAN EXPRESS INCLUDE THE FOLLOWING CARDS AND/OR VIRTUAL ACCOUNTS: •THE CORPORATE CARD / THE GOLD CORPORATE CARD / THE CORPORATE PLATINUM CARD: A CARD DESIGNED TO INTEGRALLY MANAGE THE COMPANY'S TRAVEL AND REPRESENTATION EXPENSES. THE BUSINESS TRAVEL ACCOUNT: THE VIRTUAL ACCOUNT KNOWN AS "BTA ACCOUNT" DESIGNED EXCLUSIVELY TO CENTRALIZE THE CHARGES FROM AIRLINES AND TRAVEL AGENCIES OF THE COMPANY. THE COMPORATE PURCHASING CARD: THE CARD OR VIRTUAL ACCOUNT DESIGNED TO ACQUIRE NON-STRATEGIC GOODS AND SERVICES OF THE COMPANY. THE COMPONY PAYS A ONE-TIME AFFILIATION FEE TO THE SYSTEM OF \$31.100. ANNUAL OR RENEWAL FEE: EACH MEMBER OF THE CORPORATE CARD / THE COMPONTE PURCHASING CARD / THE BUSINESS TRAVEL ACCOUNT PAYS AN ANNUAL OR RENEWAL FEE PER CARD OR VIRTUAL ACCOUNT THAT VARIES ACCORDING TO THE NUMBER OF CARDS OR VIRTUAL ACCOUNTS REQUESTED ACCORDING TO THE FOLLOWING SCALE:

SCALE	COST
1 CARD	\$56.000
2 TO 4 CARDS	\$49.200
5 TO 9 CARDS	\$42.300
10 TO 30 CARDS	\$34.200
31 TO 50 CARDS	\$29.200
51 TO 80 CARDS	\$25.000
81 TO 130 CARDS	\$22.300
131 TO 190 CARDS	\$13.700
191 TO 499 CARDS	\$12.800
MORE THAN 500	\$9.600

- THE CORPORATE PLATINUM CARD PAYS AN ANNUAL OR RENEWAL FEE OF \$478.300 PER CARD. THERE IS NO DISCOUNT FOR SCALE. THEY ARE ALSO AUTOMATICALLY ENROLLED AT NO ANNUAL COST IN THE MEMBERSHIP REWARDS PROGRAM.
- THE GOLD CORPORATE CARD PAYS AN ANNUAL OR RENEWAL FEE OF \$108.400 PER CARD. THERE IS NO DISCOUNT FOR SCALE.
- THE MEMBERSHIP REWARDS PROGRAM HAS AN ANNUAL COST OF \$56,000 PER REGISTERED CARD, APPLICABLE TO THE CORPORATE CARD AND THE GOLD CORPORATE CARD.

  THE ADMINISTRATIVE CHARGE FOR TRANSACTIONS MADE IN FOREIGN ESTABLISHMENTS IN CURRENCY OTHER THAN US DOLLARS IS 2%.

THE COMMISSION APPLIED FOR BOUNCED CHECKS IS 4.00%

- THE COMMISSION FOR THE ISSUANCE OF ADDITIONAL CARDS FOR NEW MEMBERS OR REPLACEMENTS WITH URGENT DELIVERY BY MOTORCYCLE WITHIN 24 HOURS IS \$300 PER CARD.
- THE COMMISSION FOR CHANGING THE BILLING CYCLE OR THE COMPANY NAME INCLUDING CARD REPLACEMENT IS \$150 PER CARD
- THE COMMISSION FOR MASS CARD REPLACEMENT AT THE COMPANY'S REQUEST IS \$150 PER CARD.
- THE COMMISSION FOR MASS ACCOUNT STATEMENT REISSUANCE IS \$60 PER STATEMENT
- THE COMMISSION FOR REACTIVATION OF THE ACCOUNT DEACTIVATED DUE TO NON-PAYMENT IS \$750 PER CARD. THE CASH WITHDRAWAL SERVICE "EXPRESS CASH" THROUGH ATMS ENABLED FOR SUCH PURPOSES, IS AVAILABLE ONLY FOR THE CORPORATE CARD, THE GOLD CORPORATE CARD, AND THE CORPORATE PLATINUM

VALID BENEFIT FROM 1/1/2025 TO 12/31/2025. THE CASH WITHDRAWAL SERVICE "EXPRESS CASH" THROUGH ATMS ENABLED FOR SUCH PURPOSES, IS AVAILABLE ONLY FOR THE CORPORATE CARD, THE GOLD CORPORATE CARD, AND THE CORPORATE PLATINUM CARD. THE WITHDRAWAL LIMIT FOR CASH WITHDRAWALS IN ARGENTINA IS \$4,000 (FOUR THOUSAND PESOS) PER CARD EVERY 7 DAYS. THE WITHDRAWAL LIMIT FOR CASH WITHDRAWALS ABROAD IS UP TO USD 800 (EIGHT HUNDRED US DOLLARS) PER CARD EVERY 30 DAYS. THIS AMOUNT MAY BE WITHDRAWN UP TO USD 50 PER TRANSACTION (OR THE EQUIVALENT IN THE CURRENCY OF ORIGIN OF THE WITHDRAWAL CONVERTED TO USD AT THE EXCHANGE RATE IN FORCE AT THE TIME OF PROCESSING THE TRANSACTION) IN BORDERING COUNTRIES AND UP TO USD 200 PER TRANSACTION (OR THE EQUIVALENT IN THE CURRENCY OF ORIGIN OF THE WITHDRAWAL CONVERTED TO USD AT THE EXCHANGE RATE IN FORCE AT THE TIME OF PROCESSING THE TRANSACTION) IN NON-BORDERING COUNTRIES, PER CARD AND EVERY 30 DAYS. THE CASH WITHDRAWAL UNTIL THE DUE DATE, AT THE VARIABLE FINANCIAL INTEREST RATE THAT WILL BE INFORMED MONTHLY ON THE ACCOUNT STATEMENT. THE COMMISSION FOR CASH WITHDRAWAL ABROAD IS 3% PLUS VAT OF THE AMOUNT WITHDRAWAL SERVICE IS USD I PLUS VAT ONE-TIME ONLY. TO ENROLL IN THE SERVICE, YOU MUST COMPLETE THE SERVICE REGISTRATION FORM. AMERICAN EXPRESS MAY APPROVE OR DENY SUCH REGISTRATION AT ITS SOLE DISCRETION. SOLE DISCRETION.

THE CHARGES STATED IN THIS ANNEX DO NOT INCLUDE VAT.

ANNEX 2.

APPLICABLE TO CORPORATE ACCOUNTS ISSUED PRIOR TO FEBRUARY 2024.

RESPONSIBILITY FOR IMMEDIATE PAYMENT OF CHARGES. (1) THE COMPANY AND THE MEMBER ACKNOWLEDGE AND ACCEPT THAT ALL CORPORATE ACCOUNTS: (1) ARE ISSUED AT THE REQUEST OF THE COMPANY FOR THE SOLE PURPOSE OF THEIR USE FOR AUTHORIZED BUSINESS OR REPRESENTATION CHARGES BYTHE COMPANY AND ALL CORPORATE ACCOUNTS AND (2) MUST BE USED IN STRICT COMPLIANCE WITH THE COMPANY SINTERNAL EXPENSE POLICY. IN THIS REGARD, THE COMPANY UNDERTAKES TO: (1) INFORM AND ENFORCE SAID INTERNAL EXPENSE POLICY TO ITS EMPLOYEES; (2) ENSURE THAT CORPORATE ACCOUNTS ARE NOT USED FOR PERSONAL CHARGES (THOSE THAT ARE NOT FOR THE PURPOSE OF AUTHORIZED BUSINESS OR REPRESENTATION EXPENSES BY THE COMPANY, (II) CHARGES RELATED TO THE FOLLOWING CORPORATE ACCOUNTS: THE BUSINESS TRAVEL ACCOUNT, THE CORPORATE PURCHASING CARD, AND THE CORPORATE MEETING CARD: THE COMPANY SHALL BE OBLIGED TO PAY US NO LATER THAN THE DUE DATE ESTABLISHED IN THE CORPORATE EACH THE COMPANY SHALL BE OBLIGED TO PAY US NO LATER THAN LIMITATION - LISTED THEREIN. (III) CHARGES RELATED TO THE FOLLOWING CORPORATE ACCOUNTS: THE CORPORATE CARD, THE GOLD CORPORATE CARD, THE GOND FOR THE PLATINUM CARD: A) EXCEPT AS PROVIDED IN POINT B), THE COMPANY AND THE MEMBER SHALL BE JOINT AND SEVERAL DEBTORS AND PRINCIPAL DELIGENCE TO US TO PAY NO LATER THAN THE DUE DATE ESTABLISHED IN THE CORPORATE PARTIMING ARD. AS THE CORPORATE AND LATE STABLISHED IN THE CORPORATE PARTIMING ARD. AS THE CORPORATE AND THE MEMBER SHALL BE JOINT AND SEVERAL DEBTORS AND PRINCIPAL DATE STABLISHED IN THE CORPORATE PARTIMING ARD. AS THE CORPORATE AND THE CORPORATE PARTIMING ARD. AS THE CORPORATE OF THE PARTIMING AND STATEMENT, ALL CHARGES AND FEES LISTED THEREIN. B) MEMBERS ARE FULLY AND SOLELY RESPONSIBLE TO US TO PAY NO LATER THAN THE DUE DATE ESTABLISHED IN THE CORPORATION STATEMENT, ALL CHARGES HOSE LISTED THEREIN. B) PERSONAL CHARGES (THOSE THAT ARE NOT FOR THE PURPOSE OF AUTHORIZED BUSINESS OR REPRESENTATION EXPENSES BY THE COMPANY); (2) BUSINES





Messrs. American Express Argentina S.A. Arenales707, Mezzanine City of Buenos Aires

Today, I received from American Express Argentina S.A. a letter accepting my application for Cards. I following are the rates of interest prevailing at the time of acceptance of my application, which are updated monthly:

Current Interest<sup>1</sup> rates for APRIL 2025<sup>2</sup>.

FIOT APRIL 2025".			
	U\$S	TEM	2.41%
	U\$S	TNA	28.97%
Financial interest rates	U\$S	TEA	33.14%
	\$	TEM	7.08%
	\$	TNA	84.96%
	\$	TEA	127.25%
Dec III i to contrato	U\$S	TEM	1.21%
Penalty interest rates	U\$S	TNA	14.47%
	\$	TEM	6.88%
	\$	TNA	82.56%
I and the second			

CFT <sup>3</sup>	CFT (PESOS)	CFT (U.S. DOLLARS)
Credit Card⁴	153.97%	40.10%
Charge Cards⁵	153.97%	40.10%

1- The Interest Rates stated in this section do not include VAT. NAR (Nominal Annual Rate), MER (Monthly Effective Rate), AER (Annual Effective Rate)
---

Sincerely yours,

Signature of Basic Cardmember or Alternative Basic Cardmember:	ID (DNI):
Printed Name:	Date:
Company name:	CID·

<sup>2-</sup> The displayed Interest Rates are those in effect for the financing of statements due in April 2025. 3- AERC (Annual Effective Rate Cost).

<sup>4-</sup> Includes Corporate Cards.



NUMBER OF SHARES VALUE PERSHARE 19 NITEREST IN THE AGGREGATE SHAREHOLDERS ID (ONI / CUIT) NATIONALITY DATE OF SHARES VALUE PERSHARE 19 NITEREST IN THE AGGREGATE SHAREHOLDERS ID (ONI / CUIT) NATIONALITY DATE OF SHARES	Company									
In my capacity as of		Name:								
DISTRIBUCIÓN DEL CAPITAL SOCIAL  Please list all the shareholders that make up 100% of the Company's capital.  NUMBER OF SHARES PAR VALUE PER SHARE SHARE SHAREHOLDERS ID (DNI / CUIT) NATIONALITY DATE OF SHAREHOLDERS ID (DNI / CUIT) NATIONALITY DATE OF SHARES PARE SHAREHOLDERS ID (DNI / CUIT) NATIONALITY DATE OF BIRTH PROFESSION  DISTRIBUCIÓN DEL CAPITAL SOCIAL  SHAREHOLDERS ID (DNI / CUIT) NATIONALITY DATE OF SHAREHOLDERS ID (DNI / CUIT) NATIONALITY DATE OF BIRTH PROFESSION  DATE OF SHAREHOLDERS ID (DNI / CUIT) NATIONALITY DATE OF BIRTH PROFESSION	In my capa							(the "Compa	ny"), I hereby	
Please list all the shareholders that make up 100% of the Company's capital.    NUMBER   PAR   VOITS   % INTERESTIN   SHAREHOLDERS   ID (INI/OUT)   NATIONALITY   DATE OF SHARES   VALUE   PER SHARE   % INTERESTIN   IT HE AGGREGATE   SHAREHOLDERS   ID (INI/OUT)   NATIONALITY   DATE OF SHAREHOLDERS   ID (INI/OUT)   NATIONALITY   DATE OF BIRTH   PROFESSION      NATIONALITY   DATE OF BIRTH   PROFESSION						ıp of:				
NUMBER OF SHARES VALUE PERSHARE THE AGGREGATE SHAREHOLDERS ID (ONI / CUIT) NATIONALITY DATE OF SHARES VALUE PERSHARE THE AGGREGATE SHAREHOLDERS ID (ONI / CUIT) NATIONALITY DATE OF SHARES					DISTRIBUCIÓN D	EL CAPITAL SOCI	AL			
OF SHARES VALUE PERSHARE THE AGGREATE SHAREDLERS BILLION NATIONALITY DATE OF BIRTH PROFESSION  IN HIGH CASH OF BIRTH PROFESSION	Please list	all the sha	areholders	that make	up 100% of the Compa	ny's capital.				
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION					SHAF	EHOLDERS	ID (DNI / CUIT)	NATIONALITY	DATE OF BIRTH	
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION										
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION	n the case of a contracts, trar	a chain of own isfer of share:	nership, it mu s and/or any	st accompany, i other document	n each case, the respective su t that proves the chain of owne	pporting documentation, rship and/or control.	corporate bylaws, stock	records company	shares,	
PLEASE MARK WITH A CROSS (X), AS APPLICABLE:    I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.    I declare under oath that the company does NOT have final beneficiaries as of the date of this date.    FINAL RECIPIENT 1    SHAREHOLDING %   ID (DNI)   NAME/S AND LAST NAME/S    NATIONALITY   DATE OF BIRTH   PROFESSION					FINAL REC	CIPIENTS				
I declare under oath that the information indicated below corresponds to the final recipients of the company as of the date of the date. It is understood by "Final recipients" means natural persons who, directly or through legal entities, hold 10% or more of the capital stock or of the company voting rights.  I declare under oath that the company does NOT have final beneficiaries as of the date of this date.  FINAL RECIPIENT 1  SHAREHOLDING % ID (DNI)  NAME/S AND LAST NAME/S  NATIONALITY  DATE OF BIRTH  PROFESSION										
SHAREHOLDING % ID (DNI) NAME/S AND LAST NAME/S  NATIONALITY DATE OF BIRTH PROFESSION		ood by "Fina	that the inf	ormation indic	ated below corresponds to	the final recipients of through legal entities.	the company as of the	e date of the da he capital stock	te. It is	
NATIONALITY DATE OF BIRTH PROFESSION	compan	ood by "Fina y voting righ	ll recipients nts.	" means natur	al persons who, directly or IOT have final beneficiaries	through legal entities, as of the date of this	hold 10% or more of t	e date of the da he capital stock	te. It is cor of the	
NATIONALITY DATE OF BIRTH PROFESSION	compan	ood by "Fina y voting righ	ll recipients nts.	" means natur	al persons who, directly or IOT have final beneficiaries	through legal entities, as of the date of this	hold 10% or more of t	e date of the da he capital stock	te. It is cor of the	
	compan	ood by "Fina y voting righ	ll recipients nts.	" means natur	al persons who, directly or IOT have final beneficiaries	through legal entities, as of the date of this	hold 10% or more of t	e date of the da he capital stock	te. It is cor of the	
	compan	ood by "Fina y voting righ under oath	Il recipients its.	" means natur mpany does N	al persons who, directly or  IOT have final beneficiaries  FINAL REC	through legal entities, as of the date of this	hold 10% or more of t	e date of the da he capital stock	te. It is cor of the	
	compan	ood by "Fina y voting righ under oath	Il recipients its.	" means natur mpany does N	al persons who, directly or  IOT have final beneficiaries  FINAL REC	through legal entities, as of the date of this	hold 10% or more of t	e date of the da he capital stock	te. It is	
LEGAL STATUS ACTUAL DOMICILE	company I declare	ood by "Fina y voting righ under oath	Il recipients its.	" means natur mpany does N NI)	al persons who, directly or  IOT have final beneficiaries  FINAL REC  NAME/S	through legal entities, as of the date of this CIPIENT 1  AND LAST NAME/S	hold 10% or more of t	e date of the da he capital stock	te. It is	
ACTORE BOINICILE	compan	ood by "Fina y voting righ under oath	Il recipients its.	" means natur mpany does N NI)	al persons who, directly or  IOT have final beneficiaries  FINAL REC  NAME/S	through legal entities, as of the date of this CIPIENT 1  AND LAST NAME/S	hold 10% or more of t	e date of the da he capital stock	te. It is	
	company I declare  SHAREHOL  NATIONAL	ood by "Fina y voting righ under oath DING %	I recipients its.  that the co	" means natur mpany does N	al persons who, directly or  IOT have final beneficiaries  FINAL REC  NAME/S  DATE OF BIRTH	through legal entities, as of the date of this CIPIENT 1  AND LAST NAME/S	hold 10% or more of t	e date of the da he capital stock	te. It is	
CUIT/CUIL/CDI	company I declare  SHAREHOL  NATIONAL	ood by "Fina y voting righ under oath DING %	I recipients its.  that the co	" means natur mpany does N	al persons who, directly or  IOT have final beneficiaries  FINAL REC  NAME/S  DATE OF BIRTH	through legal entities, as of the date of this CIPIENT 1  AND LAST NAME/S	hold 10% or more of t	e date of the da he capital stock	te. It is	
	company I declare  SHAREHOL  NATIONAL  LEGAL STA	ood by "Fina y voting right under oath DING %	I recipients its.  that the co	" means natur mpany does N	al persons who, directly or  IOT have final beneficiaries  FINAL REC  NAME/S  DATE OF BIRTH	through legal entities, as of the date of this CIPIENT 1  AND LAST NAME/S	hold 10% or more of t	e date of the da	te. It is	
I DECLARE UNDER OATH THAT:  (YES /NO ): I AM INCLUDED AND/OR REACHED WITHIN THE "LIST OF FUNCTIONS OF POLITICALLY EXPOSED PERSONS".  TO CONSULT THE LIST OF POLITICALLY EXPOSED PERSONS, <b>CLICK HERE</b> .	COMPANY I declare  SHAREHOL  NATIONAL  LEGAL STA	ood by "Fina y voting right under oath DING %	I recipients its.  that the co	" means natur mpany does N	al persons who, directly or  IOT have final beneficiaries  FINAL REC  NAME/S  DATE OF BIRTH	through legal entities, as of the date of this CIPIENT 1  AND LAST NAME/S	hold 10% or more of t	e date of the da	te. It is	
IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTION / HIERARCHY:	CUIT/CUIL  IDECLARE UN (YES / NO	Dood by "Fina y voting right under oath UDING % ITY TUS /CDI	In recipients ints.  that the co  ID (DN  AC	" means natur mpany does N NI) CTUAL DOMI	Al persons who, directly or IOT have final beneficiaries  FINAL RECONSTRUCTIONS OF POLITICAL PROPERTY OF FUNCTIONS OF POLITICAL PROPERTY OF THE "LIST OF FUNCTIONS OF POLITICAL PROPERTY OF THE PROPERTY OF TH	through legal entities, as of the date of this cipient 1  AND LAST NAME/S  PROFESSION	hold 10% or more of t	e date of the da	te. It is	
AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND POSITION HE/SHE OCCUPIES:  I ASSUME THE COMMITMENT TO REPORT ANY CHANGES THAT MAY OCCUR IN THIS RESPECT, WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF	COMPANY  I declare  SHAREHOL  NATIONAL  LEGAL STA  CUIT/CUIL  IDECLARE UN (YES / NO TO CONSULT	Dod by "Fina y voting right with voting right with the under oath DING %  ITY  ATUS  /CDI  IDER OATH THA  ): I AM INCLU THE LIST OF PO	I recipients its.  that the co  ID (DN  AC  AC  AT:  DED AND/OR R  DITICALLY EXP	" means natur mpany does N NI) CTUAL DOMI	Al persons who, directly or IOT have final beneficiaries  FINAL RECONSTRUCTIONS OF POLITICAL PROPERTY OF FUNCTIONS OF POLITICAL PROPERTY OF THE "LIST OF FUNCTIONS OF POLITICAL PROPERTY OF THE PROPERTY OF TH	through legal entities, as of the date of this cipient 1  AND LAST NAME/S  PROFESSION	hold 10% or more of t	e date of the da	te. It is	



**FINAL RECIPIENT 2** SHAREHOLDING % NAME/S AND LAST NAME/S ID (DNI) NATIONALITY DATE OF BIRTH **PROFESSION** LEGAL STATUS ACTUAL DOMICILE CUIT/CUIL/CDI I DECLARE UNDER OATH THAT: (YES /NO ): I AM INCLUDED AND/OR REACHED WITHIN THE "LIST OF FUNCTIONS OF POLITICALLY EXPOSED PERSONS".\* TO CONSULT THE LIST OF POLITICALLY EXPOSED PERSONS, CLICK HERE. AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND POSITION HE/SHE OCCUPIES: I ASSUME THE COMMITMENT TO REPORT ANY CHANGES THAT MAY OCCUR IN THIS RESPECT, WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED. THROUGH THE PRESENTATION OF **FINAL RECIPIENT 3** SHAREHOLDING % ID (DNI) NAME/S AND LAST NAME/S NATIONALITY DATE OF BIRTH **PROFESSION ACTUAL DOMICILE** LEGAL STATUS CUIT/CUIL/CDI I DECLARE UNDER OATH THAT: (YES / NO ): I AM INCLUDED AND/OR REACHED WITHIN THE "LIST OF FUNCTIONS OF POLITICALLY EXPOSED PERSONS".\* TO CONSULT THE LIST OF POLITICALLY EXPOSED PERSONS, CLICK HERE. IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTION / HIERARCHY: AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND POSITION HE/SHE OCCUPIES: I ASSUME THE COMMITMENT TO REPORT ANY CHANGES THAT MAY OCCUR IN THIS RESPECT, WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF A NEW SWORN STATEMENT **FINAL RECIPIENT 4** SHAREHOLDING % ID (DNI) NAME/S AND LAST NAME/S NATIONALITY DATE OF BIRTH **PROFESSION LEGAL STATUS ACTUAL DOMICILE** CUIT/CUIL/CDI I DECLARE UNDER OATH THAT: (YES /NO ): I AM INCLUDED AND/OR REACHED WITHIN THE "LIST OF FUNCTIONS OF POLITICALLY EXPOSED PERSONS".\* TO CONSULT THE LIST OF POLITICALLY EXPOSED PERSONS, CLICK HERE. IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTION / HIERARCHY: AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND POSITION HE/SHE OCCUPIES: I ASSUME THE COMMITMENT TO REPORT ANY CHANGES THAT MAY OCCUR IN THIS RESPECT, WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF

	FINAL REC	APIENT 5
SHAREHOLDING % ID (D	NAME/:	S AND LAST NAME/S
(		
NATIONALITY	DATE OF BIRTH	PROFESSION
LEGAL STATUS A	ACTUAL DOMICILE	
CUIT/CUIL/CDI		
I DECLARE UNDER OATH THAT: (YES / NO ): I AM INCLUDED AND/O TO CONSULT THE LIST OF POLITICALLY E.	OR REACHED WITHIN THE "LIST OF FUNCTIONS OF PO XPOSED PERSONS, <u>CLICK HERE</u> .	DLITICALLY EXPOSED PERSONS".*
IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTI	ION / HIERARCHY:	
AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOS  I ASSUME THE COMMITMENT TO REPORT A NEW SWORN STATEMENT.		WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF
	FINAL REC	IPIENT 6
SHAREHOLDING % ID (D	NAME/:	S AND LAST NAME/S
NATIONALITY	DATE OF BIRTH	PROFESSION
LEGAL STATUS A	ACTUAL DOMICILE	
CUIT/CUIL/CDI		
TO CONSULT THE LIST OF POLITICALLY E.  IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCT  AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOS	TION / HIERARCHY: SED PERSON AND POSITION HE/SHE OCCUPIES:	LITICALLY EXPOSED PERSONS".* WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF
	FINAL REC	CIPIENT 7
SHAREHOLDING % ID (D	ONI) NAME/:	S AND LAST NAME/S
NATIONALITY	DATE OF BIRTH	PROFESSION
TWATTOTO LETT		1 1.01 200.011
LEGAL STATUS A	ACTUAL DOMICILE	
CUIT/CUIL/CDI		
TO CONSULT THE LIST OF POLITICALLY E.  IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTION  AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSE	ION / HIERARCHY: SED PERSON AND POSITION HE/SHE OCCUPIES:	DLITICALLY EXPOSED PERSONS".* WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF

		FINAL RECI	PIENT 8	
SHAREHOLDING %	ID (DNI)	NAME/S	S AND LAST NAME/S	
NATIONALITY		DATE OF BIRTH	PROFESSION	
LEGAL STATUS	ACTUAL DON	MICILE		
CUIT/CUIL/CDI				
I DECLARE UNDER OATH THAT: (YES / NO ): I AM INCLUDE TO CONSULT THE LIST OF POLIT		IIN THE "LIST OF FUNCTIONS OF POLI S, <u>CLICK HERE</u> .	ITICALLY EXPOSED PERSONS".*	
IF YES, INDICATE AS APPROPRIATE: POSITI				
AND/OR RELATIONSHIP WITH THE POLITIC			MITUINI TUIDTY /20\ DAVO AETED IT UAG	COCCUPATED THROUGH THE PRESENTATION OF
A NEW SWORN STATEMENT.	REPORT AINT CHAINGES IF	1AT MAY OCCUR IN THIS RESPECT, W	WITHIN THIRTT (30) DATS AFTER IT HAS	S OCCURRED, THROUGH THE PRESENTATION OF
		FINAL RECI	PIENT 9	
SHAREHOLDING %	ID (DNI)	NAME/S	S AND LAST NAME/S	
SHARLIOLDING 70	ID (DINI)	TVAIVIL/ 3	AND LAST NAME/S	
NATIONALITY		DATE OF BIRTH	PROFESSION	
LEGAL STATUS	ACTUAL DON	MICILE		
CUIT/CUIL/CDI		]		
LDEGLADE UNDER GATUTUAT				
I DECLARE UNDER OATH THAT: (YES / NO ): I AM INCLUD	ED AND/OR REACHED WITH	HIN THE "LIST OF FUNCTIONS OF POL	LITICALLY EXPOSED PERSONS".*	
TO CONSULT THE LIST OF POLIT		S, <u>CLICK HERE</u> .		
IF YES, INDICATE AS APPROPRIATE: POSITI				
AND/OR RELATIONSHIP WITH THE POLITIC  I ASSUME THE COMMITMENT TO			VITHIN THIRTY (30) DAYS AFTER IT HAS	S OCCURRED, THROUGH THE PRESENTATION OF
A NEW SWORN STATEMENT.				
		FINAL RECIF	PIENT 10	
SHAREHOLDING %	ID (DNI)	NAME/S	S AND LAST NAME/S	
OTIVINE TOEDING 70		TV/ (IVIE) O	THE ENGLISH WILL C	
NATIONALITY		DATE OF BIRTH	PROFESSION	
LEGAL STATUS	ACTUAL DON	MICILE		
CUIT/CUIL/CDI				
I DECLARE UNDER OATH THAT:				
(YES / NO ): I AM INCLUDE TO CONSULT THE LIST OF POLIT		IIN THE "LIST OF FUNCTIONS OF POL S. <b>CLICK HERE</b> .	ITICALLY EXPOSED PERSONS".*	
IF YES, INDICATE AS APPROPRIATE: POSIT		.,		
AND/OR RELATIONSHIP WITH THE POLITIC		ION HE/SHE OCCUPIES:		
	) REPORT ANY CHANGES TH	HAT MAY OCCUR IN THIS RESPECT, V	VITHIN THIRTY (30) DAYS AFTER IT HAS	S OCCURRED, THROUGH THE PRESENTATION OF
A NEW SWORN STATEMENT.				



## MEMBERS OF THE MANAGEMENT BODY

Please complete the information on the members of the management body (eg Business Directory, Board of Directors, etc).

MANAGEMENT BODY MEMBER 1

ID (DNI)	NAME/S A	ND LAST NAME/S		
NATIONALITY		DATE OF BIRTH	PROFESSION	
LEGAL STATUS A	ACTUAL DOM	ICILE		
CUIT/CUIL/CDI				
TO CONSULT THE LIST OF POLITICALLY E  IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTI  AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOS	EXPOSED PERSONS, ION / HIERARCHY: SED PERSON AND POSITIO	N HE/SHE OCCUPIES:	TICALLY EXPOSED PERSONS".*  THIN THIRTY (30) DAYS AFTER IT HAS OCCURRED	D, THROUGH THE PRESENTATION OF
		MANAGEMENT BO	ODY MEMBER 2	
ID (DNI)	NAME/S A	ND LAST NAME/S		
NATIONALITY		DATE OF BIRTH	PROFESSION	
LEGAL STATUS A	ACTUAL DOM	ICILE		
CUIT/CUIL/CDI				
	EXPOSED PERSONS, ION / HIERARCHY: SED PERSON AND POSITION	CLICK HERE.  N HE/SHE OCCUPIES:	CALLY EXPOSED PERSONS".*  THIN THIRTY (30) DAYS AFTER IT HAS OCCURRED	D, THROUGH THE PRESENTATION OF
A NEW SWORN STATEMENT.		MANAGEMENT BO	ODY MEMBER 3	
		-		
ID (DNII)	NAME (C.A.	ND LAST NAME/S		
ID (DNI)	INAIVIE/ 5 A	IND LAST NAME/S		
NATIONALITY		DATE OF DIDTH	DDOFFCCION	
NATIONALITY		DATE OF BIRTH	PROFESSION	
LEGAL STATUS A CUIT/CUIL/CDI	ACTUAL DOM	IICILE		
I DECLARE UNDER OATH THAT: (YES / NO ) I AM INCLUDED AND/OF	R REACHED WITHIN	THE "LIST OF FUNCTIONS OF POLITIC	CALLY EXPOSED PERSONS".*	
TO CONSULT THE LIST OF POLITICALLY E	EXPOSED PERSONS,		<u> </u>	
IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTI  AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOS		N HE\SHE OCCUPIES:		
			THIN THIRTY (30) DAYS AFTER IT HAS OCCURRED	D, THROUGH THE PRESENTATION OF

## **MANAGEMENT BODY MEMBER 4** ID (DNI) NAME/S AND LAST NAME/S NATIONALITY DATE OF BIRTH **PROFESSION LEGAL STATUS ACTUAL DOMICILE** CUIT/CUIL/CDI I DECLARE UNDER OATH THAT: (YES / NO ): I AM INCLUDED AND/OR REACHED WITHIN THE "LIST OF FUNCTIONS OF POLITICALLY EXPOSED PERSONS".\* TO CONSULT THE LIST OF POLITICALLY EXPOSED PERSONS, CLICK HERE. IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTION / HIERARCHY AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND POSITION HE/SHE OCCUPIES: I ASSUME THE COMMITMENT TO REPORT ANY CHANGES THAT MAY OCCUR IN THIS RESPECT, WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF A NEW SWORN STATEMENT **MANAGEMENT BODY MEMBER 5** ID (DNI) NAME/S AND LAST NAME/S NATIONALITY DATE OF BIRTH **PROFESSION LEGAL STATUS ACTUAL DOMICILE** CUIT/CUIL/CDI I DECLARE UNDER OATH THAT: (YES / NO ): I AM INCLUDED AND/OR REACHED WITHIN THE "LIST OF FUNCTIONS OF POLITICALLY EXPOSED PERSONS".\* TO CONSULT THE LIST OF POLITICALLY EXPOSED PERSONS, CLICK HERE. IF YES, INDICATE AS APPROPRIATE: POSITION / FUNCTION / HIERARCHY AND/OR RELATIONSHIP WITH THE POLITICALLY EXPOSED PERSON AND POSITION HE/SHE OCCUPIES: LASSUME THE COMMITMENT TO REPORT ANY CHANGES THAT MAY OCCUR IN THIS RESPECT, WITHIN THIRTY (30) DAYS AFTER IT HAS OCCURRED, THROUGH THE PRESENTATION OF A NEW SWORN STATEMENT ON BEHALF OF THE COMPANY WHOSE DATA IS CONTAINED IN THIS FORM, AND IN MY OWN NAME, I FULLY AGREE TO THE ACCOUNT APPLICATION AND THE TERMS AND CONDITIONS FOR THE USE OF THE CORPORATE ACCOUNTS CONTAINED IN THESE 10 PAGES AND KEEP A COPY THEREOF. I UNDERSTAND AND AGREE THAT SUCH TERMS AND CONDITIONS APPLY TO ANY OTHER PRODUCT FOR WHICH I APPLY IN THE FUTURE. I REQUEST TO BE ISSUED THE ADDITIONAL CARDS DETAILED IN THIS FORM. I HEREBY STATE UNDER OATH THAT THE FOREGOING DATA IS TRUE AND THAT I HAVE IN MY POSSESSION THE DOCUMENTATION IN SUPPORT OF THEIR TRUTHFULNESS, WHICH I WILL PROVIDE TO AMERICAN EXPRESS UPON REQUEST. I AGREE THAT IF I DO NOT PROVIDE SUCH DOCUMENTATION IN DUE TIME AND IN PROPER FORM AND/OR IF SUCH DOCUMENTATION DOES NOT EVIDENCE THE DATA TRANSCRIBED HEREIN. THE COMPANY MAY BE LIABLE TO THE DECISIONS THAT AMERICAN EXPRESS MAY TAKE AS REGARDS THE PRODUCTS PROVIDED TO THE COMPANY I HEREBY STATE UNDER OATH THAT ALL THE DOCUMENTATION AND INFORMATION PROVIDED BY THE COMPANY AND/OR ME, THE UNDERSIGNED, TO AMERICAN EXPRESS IN CONNECTION WITH THIS FORM ARE TRUE AND CORRECT. I UNDERTAKE TO REPORT ANY CHANGE IN THIS CONNECTION WITHIN THIRTY (30) DAYS OF ITS OCCURRENCE BY PROVIDING A NEW SWORN STATEMENT. I ALSO STATE UNDER OATH THAT THE FUNDS USED AND/OR TO BE USED IN OUR BUSINESS WITH AMERICAN EXPRESS ARE PROVIDED BY THE COMPANY'S LAWFUL ACTIVITY DECLARED IN THESE TERMS AND CONDITIONS. LASTLY, I AGREE TO RECEIVE ONLINE ANY SERVICE INFORMATION RELATED WITH THE CARDS AND/OR ANY OTHER COMMUNICATION. SIGNATURE OF BASIC CARDMEMBER (REPRESENTATIVE I) \*SIGNATURE OF ALTERNATE BASIC CARDMEMBER \*SIGNATURE OF ALTERNATE BASIC CARDMEMBER (REPRESENTATIVE III) ONLY IF THE ATTACHED DOCUMENTATION IS SIGNED JOINTLY WITH THE BASIC CARDMEMBER. (REPRESENTATIVE II) ONLY IF THE ATTACHED DOCUMENTATION IS SIGNED JOINTLY WITH THE BASIC CARDMEMBER. PRINTED NAME PRINTED NAME PRINTED NAME DNI DNI DNI