

PROFESSIONAL CLIENT ACCOUNT OPENING FORM CFI FINANCIAL MARKETS L.L.C

CFI Financial Markets L.L.C (the "CFI Financial") is a company incorporated with limited liability in and existing under the laws of the United Arab Emirates, under commercial registration number 1971503, licensed and regulated by the Securities and Commodities Authority of the United Arab Emirates ("SCA") to conduct brokerage trading of over-the-counter derivatives and currencies in the spot market, under license number 20200000154, having its principal place of business at Office no. 2102 BLVD PLAZA T1, Burj Khalifa area, United Arab Emirates.

Prior to filling in the account opening form, the below should be understood by the professional clients those that are company/corporate or HNI.

- This account opening application form is for opening professional client account (High Net worth Individual) or Company) only.
- This form will need to be signed by authorised representatives of your company. Before applying, please ensure you have read the below documents are read, understood and wherever applicable understood prior to trading with the below:
 - a) Risk Disclosure Document should be read. Part A must be signed.
 - b) Client Agreement terms and conditions.
 - c) Privacy Policy.
 - d) Order Execution Policy.
 - e) Conflicts of Interest Policy.

All the above are available on our website www.cfifinancial.com

BOARD RESOLUTION

If the client is a company or corporate, your board of directors must pass a resolution approving the company to apply for a trading account with CFI Financial. This includes authorising the signing of this account application form and confirming the authorised signatories to the trading account.

If HNI wants to trade, then a letter intent to trade with CFI Financial should be submitted.

Supporting Documents

Along with your account application form you must submit the following documents: as applicable, company/corporate and HNI/Professional clients.

- a) Certified copy of the Certificate of Incorporation, Formation or Organization
- b) Certified copy of Memorandum of Association and Articles of Association
- c) Proof of registered address of the company (lease agreement/utility bill (must be less than 3 months old) in the name of the company.



- d) Proof of trading address (if different to the above) of the company.
- e) Certified copy of Register of Members or Shareholders.
- f) Copy of the most recent bank statement (within the last 3 months) of the account that will be used for execution of the trades.
- g) Certified copy of Trade License (if applicable).

You may not need to provide all of the Supporting Documents listed above and your Sales contact at CFI Financial will provide you with the applicable list of Supporting Documents, if you fall under one of the following categories (please tick the relevant box):

- a High net worth individual;
- a regulated financial institution whose entire operations are subject to regulation and supervision, including AML regulation and supervision, in a jurisdiction with AML regulations which are equivalent to the standards set out in the FATF recommendations.
- a subsidiary of a regulated financial institution if such subsidiary observes the same AML standards as the regulated financial institution;

IDENTIFICATION DOCUMENTS

For the shareholders and beneficial owners with 25% or more ownership in the company: One of the items listed in each of Sections A and B below must be provided.

SECTION A (ANY ONE OF THE FOLLOWING)

- a) Certified copy of a valid passport
- b) Certified copy of government Issued ID

NOTE: A GOVERNMENT ID WILL ONLY BE ACCEPTED IN THE ABSENCE OF A PASSPORT AND MUST BE ACCOMPANIED BY THE FOLLOWING:

- 1- an attestation that you do not hold a valid passport.
- 2- MUST be valid and not older than 10 years from the date of issue (unless it does not have an expiry).
- 3- MUST display the legal name, date of birth, nationality & registered ID number.

SECTION B (ANY ONE OF THE FOLLOWING)

UTILITY BILL

MUST state the current residential address of the UBO as indicated on the account opening application form for the Company and for the HNI.



MUST have been issued within the last 3 calendar months.

BANK STATEMENT

MUST state the current residential address of the UBO as indicated on the account opening application form.

MUST have been issued within the last 3 calendar months.

MUST be issued from a bank or financial institution with a certification for its authenticity.

Lease / Tenancy Agreement.

MUST state the current residential address as indicated on the account opening application form.

MUST be valid as on the date of the application for the trading account.

CERTIFYING YOUR DOCUMENTS

For the copies of your documents to be considered certified, they must be signed as a true and complete copy by ONE of the following:

- a) Ministry of Foreign Affairs or equivalent.
- b) Registered lawyer/legal consultant.
- c) Police officer.
- d) Registered Notary Public.
- e) Embassy or consulate.
- f) Registered Chartered accountant.

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA) AND COMMON REPORTING STANDARDS (CRS)

To comply with the Foreign Account Tax Compliance Act (FATCA) and Organization for Economic Co-operation and Development ("OECD"), CFI Financial is required to obtain a US tax certificate (W-8 series as appropriate) and a completed CRS Form from corporate clients. Please refer to the following websites for more information or consult your tax advisor:

CRS: https://www.mof.gov.ae/en/StrategicPartnerships/Pages/CRS.aspx

FATCA: https://www.irs.gov/businesses/corporations/foreign-account-tax-compliance-act-fatca

Please note that we are unable to consider your application until the above is received and in some cases, we may ask for further information or documentation.

Please return this application form along with its attachments to our Sales Team. If you have any questions, please reach out to your CFI Financial. Sales contact.



1- ACCOUNT I	1- ACCOUNT INFORMATION						
Introduced By (for Introduced Accounts Only)							
Managed By (for Managed Accounts Only)							
		count, you will need to su to your trading account.	bmit the Limited Power o	of Attorney ("LPOA") authorising (persons			
ACCOUNT TYPE	Standard	Pro	Elite				
Please indicate how	v often you would like t	o receive account statement	5.				
Monthly	Quarterly	Annually					
COMPANY DETAIL		of Incorporation, Formatic	n or Organization) (the "C	'omnany")			
Tutt Corporate Na	me (AS III Cel lilicale	or meor por ation, i ormatic	ir or organization) (the c	——————————————————————————————————————			
Country of Incorpo	oration:						
Corporate License	e No.:						
Establishment da	te:						
Trading Name (if o	different):						
Nature of Busines	s:						
Telephone No.:							
Business Email A	ddress:						
Registered Office	Address: (P.O. Box No).)					



Business Trading Address: (If different from above)			
Company Website:			
Company tax residency:			
TIN (if available):			
Is the Company regulated by any Financial Services Regulator?	YES	NO	
Name of Regulator:			
Regulatory Number:			
Is the Company Listed on a Recognised Stock Exchange?	YES	NO	
Name of Exchange:			
Type of Industry:			
LEI No.:			
GIIN (if applicable):			
Primary Email (for delivery of electronic statements):			
Primary Contact Person (must be a shareholder/director or an auth	orised signator	у)	
Name:			
Email Address:			
Contact Number:			



2. DIRECTO		npany (or equivalent). If	necessary, provide an
PERSON 1			
Title:	Ms	Mrs.	Mr.
Full Name:			
Date of Birth:			
Residential Add	ress:		
TIN (if available)	:		
PERSON 2			
Title:	Ms	Mrs.	Mr.
Full Name:			
Date of Birth: _			
Residential Add	ress:		
TIN (if available)	:		
PERSON 3			
Title:	Ms	Mrs.	Mr.
Full Name:			
Date of Birth:			
Residential Add	ress:		
TIN (if available)	:		
PERSON 4			
Title:	Ms	Mrs.	Mr.
Full Name:			
Date of Birth:			
Residential Add	ress:		
TIN (if available)	:		



3. BENEFICIAL Please list all Benef	OWNER DI	Shareholders with 25	% or more equity or voting	rights. If necessary, ple	ease provide in an additional
A) CORPORATE OV	VNERS OR SHA	AREHOLDERS (LEGA	AL ENTITIES		
ENTITY 1					
Legal Name:					
Country of Incorpo	ration:				
Incorporation Date	: Registered _				
Office Address: TIN	(if available):				
Holding (%):					
ENTITY 2					
Legal Name:					
Country of Incorpo	ration:				
Incorporation Date	: Registered _				
Office Address: TIN	(if available):				
B) INDIVIDUAL BEI PERSON 1					
B) INDIVIDUAL BEI PERSON 1 Title:					
B) INDIVIDUAL BEI PERSON 1 Title: Full Name:	MS	NERS OR SHAREHOL Mrs.	LDERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name:	MS	NERS OR SHAREHOL Mrs.	LDERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres	Ms Ms	NERS OR SHAREHOL Mrs.	LDERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available):	Ms Ms	NERS OR SHAREHOL Mrs.	DERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available):	Ms Ms	NERS OR SHAREHOL Mrs.	DERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available): Holding (%):	Ms Ms	NERS OR SHAREHOL Mrs.	DERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available): Holding (%):	Ms Ms	NERS OR SHAREHOL Mrs.	DERS Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available): Holding (%): PERSON 2 Title:	Ms Ms	Mrs.	Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available): Holding (%): PERSON 2 Title: Full Name:	Ms Ms	Mrs.	Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth:	Ms Ms Ms	Mrs.	Mr.		
B) INDIVIDUAL BEI PERSON 1 Title: Full Name: Date of Birth: Residential Addres TIN (if available): Holding (%): PERSON 2 Title: Full Name: Date of Birth:	Ms Ms Ms	Mrs.	Mr.		



4. ADDITIONAL	L AUTHORISED	SIGNATORY SE	CTION FOR COMPANY	
PERSON 1				
Title:	Ms	Mrs.	Mr.	
Full Name:				
Designation:				
Date of Birth:				
Residential Addres	s:			
Corporate Email Ad	ddress:			
PERSON 2				
Title:	Ms	Mrs.	Mr.	
Full Name:				
Designation:				
Date of Birth:				
Residential Addres	s:			
Corporate Email Ad	ddress:			
Trading Experience	e (Base your answe	rs on the experience	of the main controller of the accou	nt)
DO YOU HAVE TRA	DING EXPERIENCE	IN THE FOLLOWING	FINANCIAL PRODUCTS? (PLEASE 1	TICK APPLICABLE BOXES)
FX	CFDs	Futures	Shares	
WHAT PROPUCT A	DE VOU INTERECT	ED IN TRADINGS		
WHAT PRODUCT A FX	CFDs	Futures	Shares	
EXPECTED TRADIN	IG VOLUME PER M	ONTH IN LOTS?		
Less than 10 lots		10-50 lots	50-100 lots	More than 50 lots
and FX and the risl	c of trading leverag	ed products?	ience or qualifications which would	d assist your understanding of CFD's



5. FINA	NCIAL DET	TAILS			
What is the		te size of the Company's	liquid financial instrument p	ortfolio? (including cash deposits,	investments but excluding
Has the C	ompany ever	· been declared or subje	ct to bankruptcy or insolvenc	y proceedings?	
YES	NO	If so, please provide	details:		
Has the C	ompany or it	s shareholders or direct	ors ever been subject to any	criminal, regulatory or legal p	roceedings?
YES	NO	If so, please provide	details:		
Annual Tu	ırnover USD:				
Please pr	ovide details	on the source of the Com	pany's accumulated wealth.		
Do you or	perate as brol	ker or intermediary for a	any third narty?		
YES	NO	If yes, please provide			
Approxim	ate amount to		ths with CFI FInancial: USD		
Amount o	f initial depos	sit: USD Net			
ASSETS (
Under 50	0,000	500,001 – 2 mil	above 2 mil - 10 mil	above 10 mil - 20 mil	above 20 mil
BANKING	DETAILS (FO	R ALL DEPOSITS AND W	THDRAWALS)		
Account N	lame:				
Bank Nan	ne and Branch	n:			
Sort Code	e / BIC: Bank				
Account N	lo.: SWIFT:				
IBAN:					



6. CONFIRMATION OF KNOWLEDGE AND UNDERSTANDING

You should not sign this account opening application form if you are unsure as to the nature of the risks involved in trading using the services provided by CFI Financial. Margined transactions carry a high level of risk to your capital and it is possible that you lose more than your initial investment.

DECLARATION

I/We understand and accept that I/We give the declarations below on behalf of the Company and I/We confirm that I/We have proper authorisation to do so:

I/We have had the opportunity to seek independent financial advice and have chosen to proceed with this account opening application form with full awareness of the associated risks.

I/We confirm that the (Company or HNI) fully understands the nature and risks of margin trading. I/We understand that I/we can incur losses significantly greater than the amount ("margin") I/We are initially required to deposit to open a margined transaction and should this occur

I/We will be required to cover these losses and accept full liability for any such losses.

I/We confirm receipt by the Company or HNI of all relevant documents mentioned in this account opening application form and in particular the Risk Disclosure Document, the Client Agreement, Order Execution Policy, Conflicts of Interest Policy and Privacy Policy which were made available via the CFI Financial website: www.cfifinancial.com.

For the Company's benefit and protection, I/we and the Authorised Signatories have read and understood these documents. Furthermore, I/we hereby agree that the Company shall be bound by the terms of all these documents and that they form part of its contractual relationship with CFI Financial.

I/We hereby represent that, by signing below, the information provided on this account opening application form is true and accurate (and not misleading in any material respect). I/We confirm that I/we will notify CFI Financial immediately of any changes to the information I/we have provided including but not limited to any change in beneficial ownership within 30 days of such change coming into effect.

I/We hereby confirm that all documents submitted along with this account opening application form are genuine, true and valid. I/We agree to hold harmless, release and indemnify CFI Financial from any and all loss or liability arising from CFI Financial, its employees and authorised persons and its related group companies or affiliates placing reliance on this declaration made by us.

SIGNATURES OF TWO AUTHORISED REPRESENTATIVES

Name:	
Designation:	
Signature:	Date:
Name:	
- · · · ·	
Designation:	
Signature:	Date:



7. CERTIFIEI	D BOARD RESOLUTION	
I/We certify that a	at a meeting of the directors of	("Company") whose registered office is at
	held on	the following resolutions were duly passed:
	t(s) ("Account") be opened with CFI Financial Limited ("CFI Financian time to time ("Instruments") according to the relevant terms and	
	e persons whose names and specimen signatures appear in the atta nereby jointly and severally authorised:	ched Authorised Signatories list (each an "Authorised Signatory"),
a. To sign	any document in connection with the opening and operation of the	Account, including the account opening application form;
b. To auth	norise fees and commissions to be paid to CFI Financial or third pa	rty from the Account;
c. To auth	norise deposits and withdrawals to be made in and from the Accoun	nt;
	eive requests and demands for additional margin, notices of inten of whatever character;	tion to purchase or sell any Instrument and any other notices or
e. To rece	vive and confirm the correctness of notice, confirmations, requests	, demands and confirmations of every kind;
f. To place	e electronic and oral orders for Instruments with CFI Financial dire	ectly or through the system in the Account;
•	norise and appoint traders, account Managers, or other persons or cial directly or through the system in the Account;	entities to place electronic and oral orders for Instruments with
h. To sett relating to	tle, compromise, adjust and give release on behalf of the Compa o the Account;	ny with respect to any and all claims, disputes and complaints
	orm all terms and provisions of any and all agreements executed matters.	d with CFI Financial and to take any action relating to any of the
	olutions be communicated to CFI Financial and shall remain in forcolution shall be passed and a copy certified by a Director of the Cor	· · · · · · · · · · · · · · · · · · ·
	tify that the Company has the power under its governing instrume the foregoing resolutions. We agree to hold harmless, release and	* *

from CFI Financial, and its related group companies or affiliates and each of their its shareholders, directors, employees from placing reliance on this

declaration made by us and the company acknowledges that the actions of the authorized signatories are binding upon the company.



Sole Signature:

Name:	
Designation:	
Signature:	Date:
Signature.	
Name:	
Designation:	
Signature:	Date:
AUTHORISED SIGNATORIES LIST	
Name:	
Designation:	
Specimen Signature:	Date:
Specimen Signature:	Date:
Specimen Signature:	Date:
Specimen Signature: Sole Signature:	Date:
Specimen Signature: Sole Signature: Name:	Date:

November, 2023

Joint Signature: