INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

DOCUMENTATION ENCLOSED

*** CORPORATE ENTRY ***

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

- LETTER OF INTENT (LOI)
- CLIENT INFORMATION SHEET
- CORPORATE RESOLUTION
- CORPORATE CERTIFICATE
- CURRENT SCREEN SHOT
- ONLINE ACCOUNT STATEMENT
- NCND/NON SOLICITATION
- SOURCE OF FUNDS AFFIDAVIT
- GLOBAL C&D TO EVERYONE PRIOR TO THIS ENGAGEMENT
- INDEMNITY STATEMENT
- ORIGIN HISTORY OF FUNDS
- PASSPORT(S)
- SUMMARY USE OF FUNDS
- BOARD RESOLUTION

ATTACHMENTS (IF NEEDED)

■ LETTER OF LIAISON AND COMMUNICATIONS AUTHORITY

E-mail, facsimile copies or photocopies of documents or agreements pertaining to this subject are declared and regarded as valid and equal to the original, provided they are represented by proper signatories. Originals may be required upon request.

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

LETTER OF INTENT

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

Dear Sir,

I, (NAME), the undersigned, hereby confirm under penalty of perjury, my full commitment and agreement to participate in an investment opportunity, subject to my acceptance of the terms, conditions and procedures that shall be outlined in the Private Placement Program.

Furthermore, I hereby warrant and represent that I have available for placement into the proposed investment, the sum of (SPELL AMOUNT) United States Dollars (\$_____,000,000.00 USD) of clean, clear funds, free of any levy, liens or encumbrances and of non-criminal origin, and herewith attach documentary evidence of same. I hereby warrant and represent that the Rule of Full-disclosure has established these funds were legally obtained from non-criminal business or actions. I further confirm that I am the beneficial owner of these cash funds, that I have full signatory authority and control thereof, and that such funds are available for immediate placement at my sole discretion.

I confirm and acknowledge, with full responsibility, that neither your company nor anyone working on your behalf has solicited me; that the documents that I shall receive shall not be deemed to be a solicitation of funds in connection with an investment program; and, that I am approaching you voluntarily for the purpose of securing participation in a bona fide Secure Private Placement Program.

I am prepared to instruct my bank to act upon the funds as required pursuant to the specifics of this program. In the case of Blocked Funds, it is my understanding the funds will be blocked and or reserved) in the account and they will remain, at all times, non-callable.

I hereby request information from you covering the terms, condition and procedures of a secured investment and look forward to commencing the transaction, upon my acceptance of the agreement.

Email, facsimile copies or photocopies of documents or agreements pertaining to this subject are declared and regarded as valid and equal to the original, provided they are represented by proper signatories. Originals may be obtained upon request.

Δ	PPI	ICANIT	INITIALS	
М		ICAIVI	HALLIALS	

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

I, (NAME), hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: March 27, 2021

For and on behalf of (NAME OF COMPANY)

SEAL OF COMPANY Signature: _ Name / Title:

Company: Passport Number:

Date of Issue: Date of Expiry:

Country of Issuance:

THIS SECTION LEFT BLANK

APPLICANT INITIALS

PAGE 3 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

CLIENT INFORMATION SHEET

Directions: This document must be completed in full. If a line item does not pertain then insert the term: "N/A" (non-applicable).

Corporate Information

APPLICANT INITIALS

Full Name of Corporation: Date of Incorporation:

Incorporated in (City/State/Country):
Registration Number:
Board of Directors (Name & Title):
Officers (Name & Title):
Shareholders (List all shareholders owning more than 5% of all outstanding shares of
Corporation):
Location of Address: Registered Address (Corporation)
Full Name of Corporation:
Street Address:
City:
State:
Country:
Postal Code:
1 ostal code.
Location of Address: Mailing Address (Corporation)
Escation of Address. Walling Address (Corporation)
Full Name of Corporation:
Street Address:
City:
State:
Country:
Postal Code:
rostal code.
Contact Information (Corporation)
Contact information (Corporation)
Telephone Number:
Fax Number:
Mobile Number:
Email Address:

PAGE 4 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

Financial Information (Corporation)

Annual Income of Corporation:
Liquid Assets of Corporation:
Net Worth of Corporation:
Investment Experience (in years) of Corporation:

Languages / Translator

Languages:

Does the Signatory speak English?:

If No, Name of Translator:

Tel Number: Email Address:

Legal Advisor

Full Name:

Company:

Address:

City:

State:

Country:

Postal Code:

Telephone Number:

Fax Number:

Email Address:

Bank Information (Corporate)

* Please attach copy of account statement from bank

Bank Name (where funds are currently on deposit):

Street Address:

City:

State:

Country:

Postal Code:

Account Name:

APPLICANT INITIALS

\Box	Λ.				\cap		2	\cap
P	н	u	_	2	U	г	Z١	0

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020
Account Number: Sort Code ABA No.: SWIFT Code: Account Signatory (1): Account Signatory (2):
Bank Officer # 1 Name: Bank Officer # 2 Name: Telephone Number: Fax Number:
Client Account where Profits to be paid
Bank Name: Street Address: City: State: Country: Postal Code:
Account Name: Account Number: Sort Code ABA No.: SWIFT Code:
Bank Officer Name: Telephone Number: Fax Number:
Personal Information of Officer(s) of Corporation / Passport Information (Please attach copy of corporate resolutions adopted by the Board of Directors appointing and authorizing said officer(s) to represent and legally bind the corporation) * Duplicate the section below for each Director.
First Name: Middle Name: Last Name: Gender: Date of Birth: Social Security Number:

PAGE 6 OF 20

APPLICANT INITIALS

INVESTOR TRANSACTION CODE: **GDH.XXX.XXX.DATE.2020**

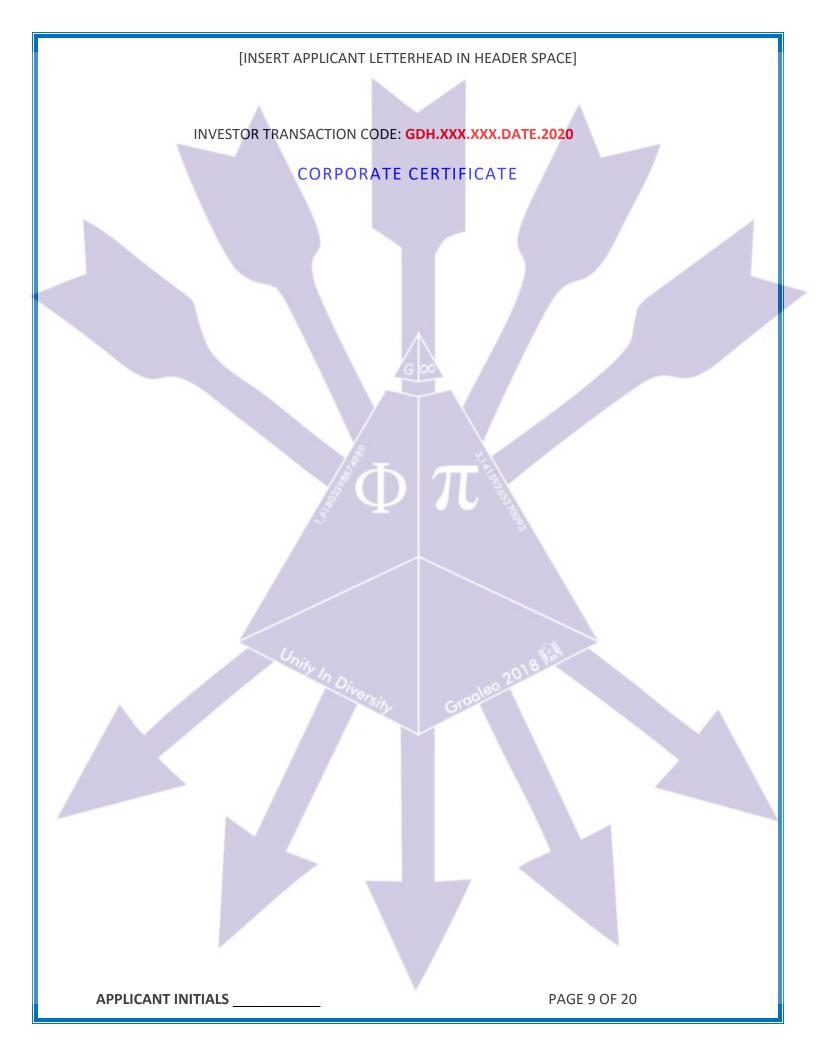
Country of Citizenship: Languages:	
Passport Information of Officers(s) of Corporation *Please attach copy of photo and signature page of pass	port
Passport Number: Date of Issue: Date of Expiry: Issuing Authority:	
Location of Address: Home-Legal Residence (Officer(s) or (Please attach copy of utility bill) Full Name of Officer: Street Address:	
Street Address: City: State: Country: Postal Code: Cell Phone: Home Phone:	Single State of the State of th
Office Phone: Fax: Skype: Email:	100 2018 Fill
(Below, duplicate the section above for each Director)	
APPLICANT INITIALS	PAGE 7 OF 20

INVESTOR TRANSACTION CODE: **GDH.XXX.XXX.DATE.2020**

Investment
Funds available for this transaction:
Type of currency:
Origin of funds:
Are these funds free and clear of all liens, encumbrances and third party interests:
I, (NAME), hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: March 27, 2021
For and on behalf of (NAME OF COMPANY)
Signature: SEAL OF COMPANY
Name / Title:
Company:
Passport Number:
Date of Issue: Date of Expiry:
Country of Issuance:
Country of Issuance.

APPLICANT INITIALS

PAGE 8 OF 20



INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

CORPORATE RESOLUTION

All of the directors of **(COMPANY NAME)** below listed were in attendance, in person or by telephone conference. General discussion was then held concerning the issue, and all aspects of the same, were fully explained in detail to the satisfaction of the board members.

DIRECTOR Name/Title:
Passport No.:
DIRECTOR Name/Title:
Passport No.:
SECRETARY Name/Title:
Passport No.:
1 433port 140

The Board of Directors of (COMPANY NAME) an International Business Company incorporated on (DATE) in (LOCATION) in (COUNTRY), with Registered Offices at (ADDRESS) in a meeting held on this the (Day) Day of (MONTH), (YEAR), adopted the following resolutions.

RESOLUTION 1:

It is resolved that the Board of Directors of (COMPANY NAME) hereby authorizes: (NAME) holder of Passport Number (NUMBER) issued on (DATE).

As our Managing Member, as the **(President-CEO etc)** who assigned authority, on our behalf stay and name, to instruct, negotiate, arrange, monitor, execute, manage and sign any and all agreements and/or necessary contracts with third parties pertinent to all financial transactions with bank instruments (securities/derivatives)

RESOLUTION 2:

It is resolved that at this meeting of the Board of Directors that our Managing Member and in fact (NAME) acts for (COMPANY NAME) with regards to the afore said financial investment.

RESOLUTION 3:

It is resolved that **(NAME)** is hereby authorized to act as our Financial Director for afore said purpose.

R	ES	OL	U	ΠΟ	N	4:

APPLICANT INITIALS	PAGE 10 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

It is resolved the Board of Directors of (COMPANY NAME) hereby authorized (NAME) to assume all authority, powers, duties, signatory rights and responsibilities on our behalf.

RESOLUTION 5:

It is resolved that **(NAME)** is hereby authorized to open a personal, corporate, trading, trust and/or custodial account in any bank, domestic or foreign and to sign such resolutions as may be required by such bank to accomplish the objective(s) as stated herein and to give irrevocable instructions to said bank(s) on our behalf.

I, **(NAME)**, hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: March 27, 2021

For and on behalf of (NAME OF COMPANY)

Signature:	SEAL OF COMPANY
Name / Title:	and
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	
Uni	Till.
my In A	2018
	agleo
Signature:	Gic
Name / Title: SECRETARY	
Company:	
Passport Number:	
Date of Issue:	

APPLICANT INITIALS

Date of Expiry: Country of Issuance:

PAGE 11 OF 20

INVESTOR TRANSACTION CODE: **GDH.XXX.XXX.DATE.2020**

CURRENT SCREENSHOT

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

Grooleo 2018

APPLICANT INITIALS

PAGE 12 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

COPY OF ONLINE ACCOUNT STATEMENT

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

Graaleo 2018 M. Graaleo 2018

APPLICANT INITIALS _____

PAGE 13 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

NCND/NON SOLICITATATION

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

Dear Sir,

- I, (NAME), bearing (COUNTRY) Passport No. (NUMBER), duly authorized and full legally representative director for and on behalf of (NAME OF COMPANY), give notice to have Cease and Desist and any/other group previous group approached in the past regarding our/my files
- I, (NAME), make a clear statement and confirm under risk and penalty of perjury not to have any other entities, associations, financial institutions, affiliates, intermediaries, groups or others with my /our permission nor any specific authorization to handle nor process any one of my /our documents as from March 27, 2021

And that; All previous entities, associations, financial institutions, affiliates, intermediaries, groups or others have been notified of such by the correspondent official Cease and Desist Letter communication. This exclusive authority and engagement shall continue fully effective until cancelled in writing by me.

I, (NAME), hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: March 27, 2021

For and on behalf of (NAME OF COMPANY)

Signature:	SEAL OF COMPANY
Name / Title:	
Company:	
Passport Number:	
Date of Issue:	
Date of Expiry:	
Country of Issuance:	

APPLICANT INITIALS

PAGE 14 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

GLOBAL CEASE AND DESIST

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

Dear Sir,

I, Name bearing Country Passport No. duly authorized and full legally representative Trustee for and on behalf of Company do solemnly swear/attest the following statements to be true.

I, Name declare under penalty of perjury and with full personal and legal responsibility under the International Court of Law that I legally hold the sum of United States Dollars (USD) and it is deposited in Account No at Name of BANK located at

I further declare these funds are current and valid currency lawfully obtained and constitute clean, cleared funds of legitimate, non-criminal, commercial origin. There are no liens, contractual obligations or encumbrances of any kind against these funds.

I have full and complete, legal ownership of, and the unrestricted right and authority to pledge or otherwise utilize these funds. The funds are ready for transfer or release upon my instruction.

These funds are authentic and verifiable. I am not aware of any matter which could or might cause the non-validation of these funds and I hereby indemnify the Fund Manager and/or assignees, or other parties involved, against any claims, demands, civil and/or criminal in nature, and liabilities, damages, or expenses including without limitation any attorney's fees which may arise, whether in whole or in part, caused by reason of reliance upon this sworn declaration.

E-mail, facsimile copies or photocopies of documents or agreements pertaining to this subject are declared and regarded as valid and equal to the original, provided they are represented by proper signatories. Originals may be obtained upon request.

I, (NAME), hereby swear under penalty of perjury, that the information provided herein is accurate and true as of this date: March 27, 2021

PAGE 15 OF 20

APPLICANT INITIALS

INVESTOR TRANSACTION CODE: **GDH.XXX.XXX.DATE.2020**

For and on behalf of (NAME OF COMPANY)

Signature:	SEAL OF COMPANY
Name / Title: Company: Passport Number: Date of Issue: Date of Expiry: Country of Issuance:	
	Φ
Unity In I	Piversin Gradeo 2018 Mill
APPLICANT INITIALS	PAGE 16 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

INDEMNITY STATEMENT

DATE: March 27, 2021

TO: DTC/IPIP PRINCIPLE RECEIVER

For and on behalf of (NAME OF COMPANY)

RE: NET ZERO M1 OFF LEDGER FUNDS TRANSACTION

Dear Sir,

I, (NAME), agrees to indemnify and hold you harmless against any and all losses, claims, damages or liabilities, joint or several, to which you may become subject under the Underwriting Agreement insofar as such losses, claims, damages or liabilities (or actions in respect thereof) arise out of or are based upon any breach of the contract based upon the omission or alleged omission to state therein a material fact required to be stated therein or necessary to make the statements therein not misleading; provided, however, that the Company will not be liable to you in any such case to the extent that any such loss, claim, damage or liability arises out of or is based upon any such untrue statement or alleged untrue statement or omission or alleged omission made therein in reliance upon and in conformity with written information furnished to the Company by you, or by or on behalf of, or through the Representatives specifically for inclusion therein. In connection with the foregoing, the Company agrees to reimburse you, as incurred, for any legal or other expenses reasonably incurred by you in connection with investigating or defending any such loss, claim, damage, liability or action. This indemnity agreement will be in addition to any liability which the Company may otherwise have and will be in addition to any rights that you may have at common law or otherwise.

Signature: ______ SEAL OF COMPANY

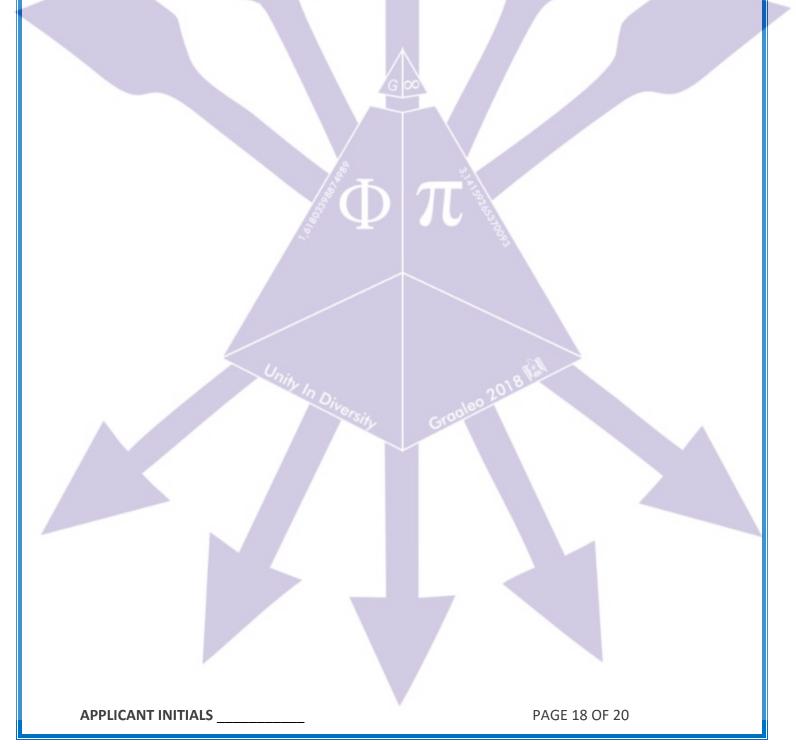
Name / Title:
Company:
Passport Number:
Date of Issue:
Date of Expiry:
Country of Issuance:

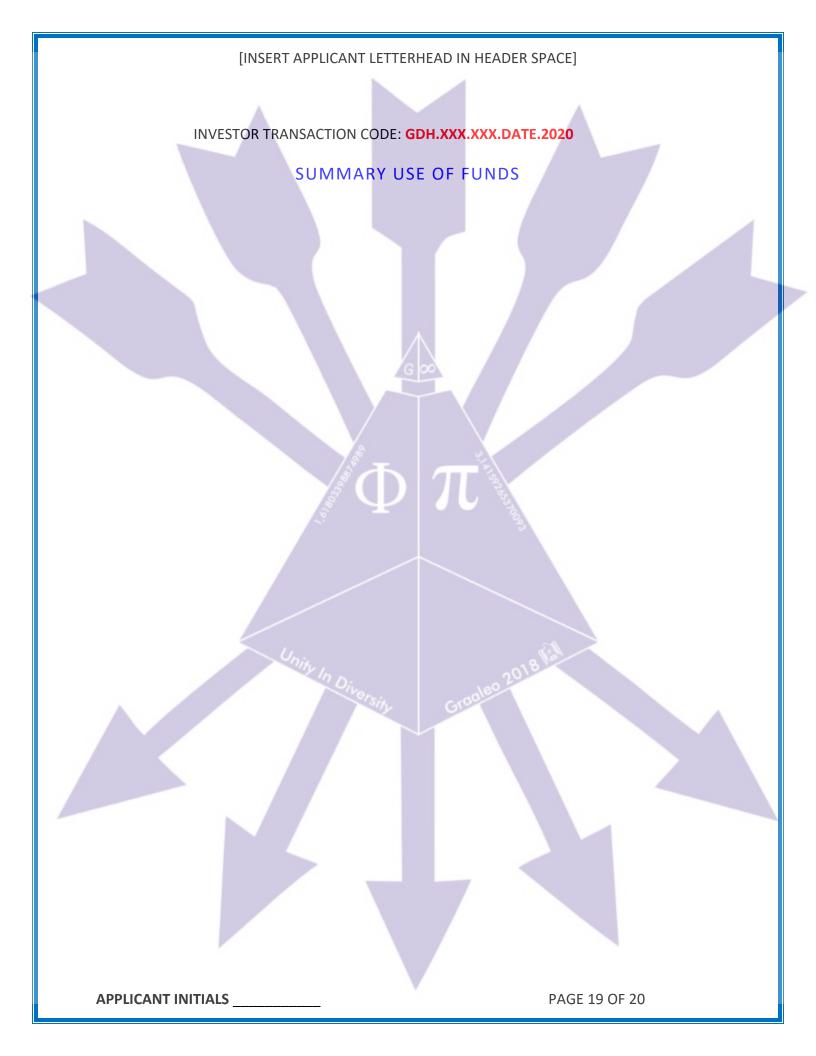
APPLICANT INITIALS PAGE 17 OF 20

INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

ORIGIN -HISTORY OF FUNDS

PLEASE STATE THE ORIGIN OF WHERE YOUR FUNDS COME FROM. HOW DID YOU GET THEM? BE SPECIFIC.

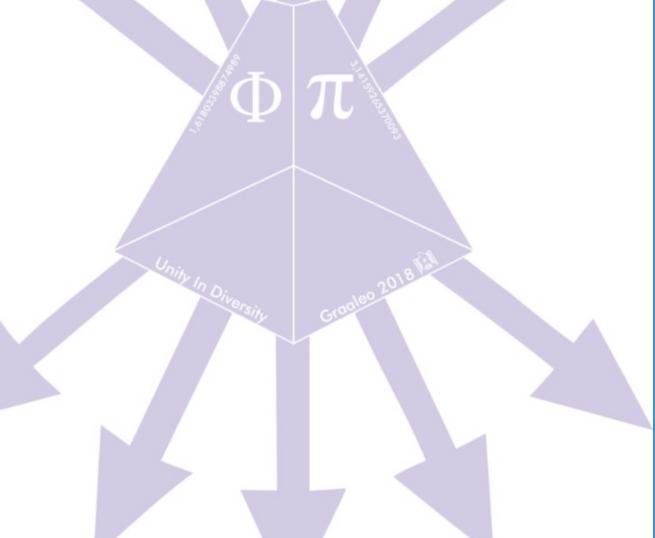




INVESTOR TRANSACTION CODE: GDH.XXX.XXX.DATE.2020

PASSPORT

PROVIDE COLOR COPY ENLARGED (140%) TO THIS SIZE (8½ X 11 INCHES). PICTURE MUST BE CLEAR AND NOT DARK. ENLARGE & LIGHTEN (USING PHOTO SETTING). COLOR SCAN THE PASSPORT INTO YOUR COMPUTER AT A HIGH RESOLUTION IN THE JPEG FORMAT AND INSERT.



*****END OD DOCUMENT****

APPLICANT INITIALS

PAGE 20 OF 20