Form R-8

Rev. 03/13



**COMMONWEALTH OF PUERTO RICO**

**COMMISSIONER OF FINANCIAL INSTITUTIONS**

**Centro Europa Building, Suite 600**

**1492 Ponce de León**

**San Juan, PR 00907-4127**

**Tel. (787) 723-8403 Fax (787) 724-2604**

**APPOINTMENT AND APPLICATION FOR REGISTRATION AS AGENT**

Securities Regulation Division

Office of the Commissioner of Financial Institutions

San Juan, Puerto Rico

The undersigned hereby certifies that it

Issuer

Has \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ employed

Name Street/Address City State

as its agent under the provisions of the Uniform Securities Act.

Dated and signed this day of , .

Year

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Issuer

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Title