## **Address and Distribution Change Form**

Investor Na	me(s):
Investment 1	Fund (check all that apply): BSH II BSH III BSH IV BSH V
	☐ BSH VI ☐ BSH VII Other Offering
Change physical mailing address only	
	<del></del>
	Check here if you wish to also have distribution checks mailed to above.
investor phy	tribution checks to this institution (i.e. brokerage accounts), but retain current vsical address on file: me:
Address:	
Account Nu	mber:
	oution sections of this form do not apply to investments held in retirement accounts*
Change of	email address
Replace	previously provided ACH instructions with:
AUTHO	ORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)
entries and adjust Account or □ Sa acknowledge the	hereby authorize Bourne Financial Group, to initiate credit tements for any credit entries in error to my (our): (select one-required)   Avings Account indicated below, at the banking institution named below. I (we) at the authority will remain in effect until I have (or either of us) cancelled it in the origination of ACH transactions to my (our) account must comply with the .S. law.
Name on Accoun	ıt
Bank Name	
Bank Address	
Routing	Account
Number	Number
ALL INVESTOR	RS MUST SIGN: This information is to remain in full force and effect until Bourne has received written notification from me (or either of us) of its termination in such time, her as to afford Bourne Financial Group and the Financial Institution a reasonable ton it.
Date	Signature (required)
Date	Signature (required)

Mail, fax or email to: Cobalt Investment Services, LLC

801 International Parkway, Suite 500 PMB #5242, Lake Mary, FL 32746

Email: <u>info@cis-ta.com</u> / Fax: 321-400-1359