



## BROKER DEALER / REP CHANGE REQUEST

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

Investor Number: \_\_\_\_\_

Investor Name: \_\_\_\_\_

Investor Address: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_

Broker Dealer Affiliate: \_\_\_\_\_

Representative Name: \_\_\_\_\_

Branch Address: \_\_\_\_\_

Rep Phone #: \_\_\_\_\_

Rep Fax #: \_\_\_\_\_

Rep Email Address: \_\_\_\_\_

**ALL TITLEHOLDER SIGNATURES ARE REQUIRED.**

\_\_\_\_\_  
Investor Signature Date Investor Signature Date

WHEN COMPLETED PLEASE PRINT AND MAIL TO:

JLL Exchange TRS, LLC  
**Attention: Investor Services Department**  
2401 Kerner Boulevard  
San Rafael, CA 94901-5569