Guidelines for Completing the Company

Certificate

1 Please insert the Name of Your Legal Representative or Authorized Director who is on behalf of the company to complete the Company Certificate and KYC Process.

2. 3. 8. 9 Please delete the information as applicable.

7 Please insert the Entity Type (Private or Public).

The undersigned, [1], hereby certifies that [he/she²] is [the/a³] duly elected and acting [Authorized Director 4] of [5], a [6] [7] (the "Company"), and that, as such, [he/she³] is duly authorized to execute and deliver this Certificate on behalf of the Company. [He/She³] hereby further certifies on behalf of the Company that:

4 Please insert the Title of the person signing this Certificate (e.g. Director).

5 Please insert Legal Name of the Entity as listed in the certificate of incorporation or business registration or equivalent document.

6 Please insert state of incorporation or formation.

This for need be complete by the Authorized Director of your company. the Authorized Director should be a member of the company's board of directors and authorized by the company to complete the seller kyc process on behalf of the company.

Please note that shareholder name information needs to be fully disclosed to the ultimate beneficiaries, including all intermediate companies and natural persons

Please ensure that the percentage includes both direct and indirect shareholdings.

For company shareholder, please fill in the country of registration; For natural person shareholders, please fill in nationality

The chart below relevant information Mandatory fields		ist of holders of	equity inte	rest of the Co	ompany and	their
*Holder/Owner Full Name	Tax ID (Optional)	No. of Share/ Units	*% Owned	*Nationality	Date of birth (Optional)	Address (Optional)

Please note that the information filled in should not conflict with other KYC documents provided and make sure there are no omissions or spelling mistakes;

Please ensure that the name and ID number of the natural person are consistent with the Identity Document submitted

Your residential address must be true and valid and does not conflict with the information in other materials (e.g. ID/Annual Return etc.) provided.

2. The natural permore of the equal applicable for list * Mandatory fields	ity interest	s of the legal				
*Holder/Owner Full Name	*Tax ID	No. of Share/ Units	*% Owned	*Nationality	*Date of birth	*Address ⁸

Please do not omit any natural person with direct or indirect shareholding >= 25%

Please ensure that all asterisked questions are completely filled in according to the actual situation. In addition, please ensure that the information in this form is consistent with other forms in this document.

The content of this part is not mandatory, please complete the information according to the actual situation of the company. This part is mandatory only when there are no natural person holding your company equal or more than 25% shares.

3.In addition to the persons identified above, the persons (legal or natural) described below exercise some type of control over the Company, even when they own less than 25% of the capital stock

* Mandatory fields

*Holder/Owner Full Name	*Tax ID	No. of Share/ Units	*% Owned	*Nationality	*Date of birth	*Address ⁸

Please ensure that all asterisked questions are completely filled in according to the actual situation. In addition, please ensure that the information in this form is consistent with other forms in this document.

Please fill in the full name of the company's authorized director here, and the ID number must be consistent with the resident ID card;

4. Each of the persons named below is a duly elected and acting as Director who is also authorized person that completes the from and KYC process of the Company; the signature appearing below is the true and genuine signature of that person; and each of them has the capacity to represent the Company and to execute and deliver, on behalf of the Company, each document to which the Company is a party and all other-agreements, documents and Certificates to be delivered by the

ID type and

number

Company.

Name

Please add the signature of authorized director here

Office/Title

Please ensure that the information in this part is consistent with other parts in the company certificate.

Signature

The name, ID type and number of the legal representative or officer who completes the Know-Your-Client form online is included in this list.

5) The undersigned and Company certify that the natural persons mentioned in this Certificate and within the Know-Your-Client process have expressly consented to the Company's disclosure of their information to Mercado Libre in accordance with the terms of the Privacy Policy.

Please do not omit the signed date, ens accurate and complete	ure it is
IN WITNESS WHEREOF, the undersigned this day of, 20	has executed this Certificate on behalf of the Company as of
Company Name Plea	ase affix the company's official seal

Please ensure that the information in this part is consistent with other parts in the company certificate.