Change Form

Instructions: For each numbered section, please check the box for the desired change and follow the instructions noted.

1. DEMAND NOTE INFORMATION

Please begin by providing the following information.

First Class Demand Note number 9400- _____

PRIMARY PHONE NUMBER

2. ADDRESS CHANGE

☐ **Mailing address:** Complete this section to change your mailing address.

STREET ADDRESS

CITY | STATE | ZIP CODE

☐ **Seasonal:** Complete this section to add, change, or delete your seasonal address. Seasonal address is only valid during dates requested. You must update this address to indicate future dates.

☐ Add ☐ Change ☐ Delete

STREET ADDRESS

CITY | STATE | ZIP CODE

START DATE (MM/DD/YYYY) | END DATE (MM/DD/YYYY)

☐ **Residential Address:** If your residential address is changing and is different than your mailing address, please use the space provided.

RESIDENTIAL ADDRESS (NO P.O. BOXES)

CITY | STATE | ZIP CODE

PRIMARY PHONE NUMBER | SECONDARY PHONE NUMBER

3. OWNERSHIP CHANGE(S)

To add or remove an owner, to change existing Social Security numbers, or to make changes due to a death, you may also call the Service Center at 1-866-242-0120, Monday through Friday 8 a.m. to 7 p.m. ET.

☐ **Add Owner:** In order to process this change you must complete all fields, have all owners sign in section 6 and the new owner's accredited investor status must be successfully verified.

JOINT OWNER (FIRST, MIDDLE, LAST)

SOCIAL SECURITY NUMBER | DATE OF BIRTH (MM/DD/YYYY)

RESIDENTIAL ADDRESS (NO P.O. BOXES)

CITY | STATE | ZIP CODE

EMAIL ADDRESS

PRIMARY PHONE NUMBER | SECONDARY PHONE NUMBER

In order to add a new owner, it is required that the new owner be an accredited investor. In order to have the new owner's accredited investor status verified, the new owner must successfully complete the verification process. The new owner should visit firstclassdemandnotes.com to begin the verification process.

☐ **Add Spouse:** In order to process this change you must complete all fields, have all owners sign in Section 6, and the accredited investor status of the existing owner and the added spouse must be successfully verified.

SPOUSE (FIRST, MIDDLE, LAST)

SOCIAL SECURITY NUMBER | DATE OF BIRTH (MM/DD/YYYY)

☐ **Remove Non-Primary Owner:** All remaining owners must sign in section 6, including the owner being removed, if applicable.

PRINT NAME(S) TO BE REMOVED

SOCIAL SECURITY NUMBER

4. CHANGE PERSONAL INFORMATION

☐ **Name:** To change your name, a copy of the marriage certificate or original/certified copies of other legal documents substantiating the name change must be submitted along with this form. These forms will not be returned to you.

PRINT PREVIOUS NAME

SIGNATURE PREVIOUS NAME

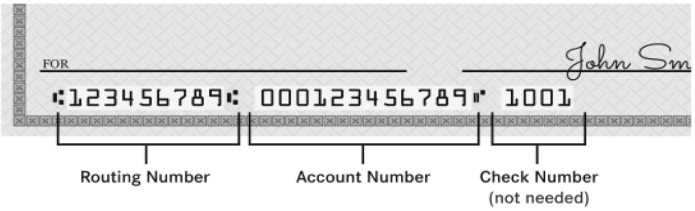
PRINT NEW NAME

SIGNATURE NEW NAME

SOCIAL SECURITY NUMBER | DATE OF BIRTH (MM/DD/YYYY)

5. ADD OR CHANGE BANK ACCOUNT INSTRUCTIONS

You must have at least one bank account on file in order to complete electronic transactions with your First Class Demand Note. Please attach a voided blank check for a checking account or a deposit slip for a savings account. At least one of the names on the deposit slip or voided check must match at least one of the registered owners of this First Class Demand Note. Only U.S. Bank accounts are allowed. Note: Only Bank Account A may be used with the automated phone system to complete transactions.



Bank Account A:

Account type (check only one): ☐ Checking ☐ Savings

ACCOUNT HOLDER NAME(S)

BANK NAME STATE

ROUTING NUMBER BANK ACCOUNT NUMBER

Note: If you would like to complete same day wire transactions with this bank account, please confirm that the wire transfer routing number for your bank is the same as the routing number listed on your checks. If the wire transfer routing number is different, please enter it here _ _ _ _ _ _ _ _ _.

Bank Account B:

Account type (check only one): ☐ Checking ☐ Savings

ACCOUNT HOLDER NAME(S)

BANK NAME STATE

ROUTING NUMBER BANK ACCOUNT NUMBER

Note: If you would like to complete same day wire transactions with this bank account, please confirm that the wire transfer routing number for your bank is the same as the routing number listed on your checks. If the wire transfer routing number is different, please enter it here _ _ _ _ _ _ _ _ _.

You can initiate investment and redemption transactions through the automated phone system at 1-866-242-0120 or online at www.eaccountservices.com/mbfs. Please note that a redemption will not be made in the form of a check. If you would like to establish recurring transactions, please visit the website. Please note you must maintain a minimum balance of $750 in your Note to make automated recurring redemptions.

6. SIGNATURES AND TAXPAYER CERTIFICATION
(Signatures are required for processing)

By signing this form, I certify that I have reviewed, and agree to be bound by the terms and description of First Class Demand Notes as contained in the Private Placement Memorandum, and acknowledge that the First Class Demand Notes Committee has the full power and authority to amend the Program, to interpret its provisions, to adopt rules and regulations in connection with the Program, and to set and adjust the rate of interest to be paid on the First Class Demand Note, all as described in the Private Placement Memorandum.

Further, under penalties of perjury, I certify that the Social Security identification number provided on this form is correct and that I am a U.S. person (including a U.S. resident alien). Unless the box below is checked, I am not subject to backup withholding because I have not been notified by the Internal Revenue Service that I am subject to such withholding, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. Check box below if applicable:

☐ I am subject to backup withholding under provisions of Section 3406(a)(1)(C) of the Internal Revenue Service Code.

The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

WRITTEN SIGNATURE DATE

PRINTED NAME

WRITTEN SIGNATURE DATE

PRINTED NAME

Before you return your completed Change Form, please review the following checklist:

☐ *Make certain your First Class Demand Note number, Social Security/Tax ID number, printed name and primary phone number are provided.*

☐ *Verify the information supplied on this form is complete and accurate.*

☐ *Verify all owners have signed and dated the request.*

☐ *If required, enclose a voided blank check or deposit slip.*

☐ *Verify a valid and non-expired copy of one of the following is provided for all applicable investors: U.S. Driver's License, U.S. State ID, Passport or Passport Card.*

Mail to: *Mercedes-Benz Financial Services USA LLC*
First Class Demand Notes
P.O. Box 535406
Pittsburgh, PA 15253

Overnight to: *Mercedes-Benz Financial Services USA LLC*
First Class Demand Notes
500 Ross Street, 154-0510
Pittsburgh, PA 15262

Please call 1-866-242-0120 with any questions regarding this form, M-F from 8 a.m. to 7 p.m. ET. Additional forms can be found on the web at www.eaccountservices.com/mbfs.