



RESOLUTION

AMENDING AUTHORIZED REPRESENTATIVES

WHEREAS, The City of Shoreacres

("Participant") is a local government of the State of Texas and is empowered to delegate to a public funds investment pool the authority to invest funds and to act as custodian of investments purchased with local investment funds; and

WHEREAS, it is in the best interest of the Participant to invest local funds in investments that provide for the preservation and safety of principal, liquidity, and yield consistent with the Public Funds Investment Act; and

WHEREAS, the Texas Local Government Investment Pool ("TexPool"), a public funds investment pool, was created on behalf of entities whose investment objective in order of priority are preservation and safety of principal, liquidity, and yield consistent with the Public Funds Investment Act.

NOW THEREFORE, be it resolved as follows:

- A. That the individuals, whose signatures appear in this Resolution, are Authorized Representatives of the Participant and are each hereby authorized to transmit funds for investment in TexPool and are each further authorized to withdraw funds from time to time, to issue letters of instruction, and to take all other actions deemed necessary or appropriate for the investment of local funds.
- B. That an Authorized Representative of the Participant may be deleted by a written instrument signed by all remaining Authorized Representatives provided that the deleted Authorized Representative (1) is assigned job duties that no longer require access to the Participant's TexPool account or (2) is no longer employed by the Participant; and
- C. That the Participant may by Amending Resolution signed by the Participant add an Authorized Representative provided the additional Authorized Representative is an officer, employee, or agent of the Participant;

List the Authorized Representatives of the Participant. These individuals will be issued P.L.N. numbers to transact business via the phone with a participant service representative.

1. Name Nancy Edmonson Title Mayor
 Signature *Nancy Edmonson* Phone Number (281)471-2244
 TEX - REP

2. Name Shari Tait Title City Secretary
Signature [Signature] Phone Number (281) 471-2244

3. Name Jayo Washington Title Alderman
Signature [Signature] Phone Number (281) 471-2244

List the name of the Authorized Representative listed above that will have primary responsibility for performing transactions and receiving confirmations and monthly statements under the Participation Agreement.

Name Shari Tait
Email citysecretary@cityofshoreacres.us

In addition and at the option of the Participant, one additional Authorized Representative can be designated to perform only inquiry of selected information. This limited representative cannot make deposits or withdrawals. If the Participant desires to designate a representative with inquiry rights only, complete the following information.

4. Name N/A Title N/A

D. That this Resolution and its authorization shall continue in full force and effect until amended or revoked by the Participant, and until TexPool receives a copy of any such amendment or revocation. This Resolution is hereby introduced and adopted by the Participant at its regular/special meeting held on the 14 day June, 20 04.

NAME OF PARTICIPANT City of Shoreacres

BY: [Signature]
Signature
Nancy Edmonson
Printed Name
City Secretary
Title

ATTEST: [Signature]
Signature
Shari Tait
Printed Name
City Secretary
Title

OFFICIAL SEAL