

For informative purposes only

(1) _____ (2) _____ , (3) _____ .

BBVA BANCOMER, SERVICIOS S.A.
INSTITUCION DE BANCA MULTIPLE
GRUPO FINANCIERO BBVA BANCOMER
DIRECCION FIDUCIARIA.

REF: Notice of Death of Trust Beneficiary (Beneficiaries)
Trust Number F/ (4) _____

With reference to that certain Trust number first above written, which Trust was executed as evidenced under public instrument number (5) _____ , dated (6) _____ and certified by Mr. (10) _____ , Notary Publico number (7) _____ in and for (8) _____ , (9) _____

This is to inform you that on (11) _____ (12) _____ , (13) _____ , Mr. (Mrs.) (14) _____ designated Trust Beneficiary under the above mentioned Trust, was deceased. Please find enclosed a certified copy of the corresponding Death Certificate, duly legalized or bearing an apostille, as required in your country.

Therefore, I (we) request you, as Trustee under the relevant Trust, to acknowledge receipt of this Notice of Death of Trust Beneficiary and acknowledge my (our) capacity as holder(s) of the rights corresponding to the Trust Beneficiary under the above-mentioned Trust, in accordance with such participation percentage as set forth in the corresponding Trust Agreement.

For such purpose, enclosed you will find my (our) particulars, including the address designated to receive all kinds of notices and communications derived from or related to the above-mentioned Trust.

I (we) hereby agree to be vested with all the rights and assume any and all obligations now or hereafter corresponding to Beneficiaries under the relevant Trust Agreement, including payment of any due and unpaid trustee fees to this date.

Finally, please find enclosed a photocopy of my(our) ID(s), evidencing documents of my(our) address and a duly executed Politically Exposed Person representation.

Respectfully,

Mr. (15) _____
Substitute Trust Beneficiary

Mr. (15) _____
Substitute Trust Beneficiary

Trust Number F/ .

PARTICULARS OF A SUBSTITUTE TRUST BENEFICIARY ACQUIRING RIGHTS DUE TO THE DEATH OF THE ORIGINAL TRUST BENEFICIARY.

First Name, Last Name:

Nationality:

Address in country of residence:
(Street, Number, City, State, Country)

Address of the relevant Real Property:
(Street, Number, City, State, Zip Code, Country.)

Telephone Number

In country of residence:
In Mexico:

Date of Birth:

Birthplace:

Marital Status: (Single, Married)

(One format per Substitute Trust Beneficiary)

FILL-IN INSTRUCTIONS

- (1) Month
- (2) Day
- (3) Year
- (4) Trust Number on the ID card provided to the business.
- (5) Number of that certain public instrument written on top of your first page.
- (6) Certification date for that certain public instrument written on top of your first page.
- (7) Notary Number.
- (8) City where the Notary is authorized to attest to documents.
- (9) State where the Notary is authorized to attest to documents.
- (10) Name of the relevant Notary (*first name and last name.*)
- (11) Day of death of Trust Beneficiary.
- (12) Month of death of Trust Beneficiary.
- (13) Year of death of Trust Beneficiary.
- (14) First name and last name of deceased Trust Beneficiary. (*the same name on the Trust Agreement and on the Death Certificate.*)
- (15) Name (first name and last name) and Signature of Substitute Trust Beneficiary (*Beneficiaries*) under Trust. (*Names shall match those recorded on the Trust Agreement and those on IDs used.*)