



Change of Custodian and Broker/Dealer Request

Insurance Company Name

Date: _____

Attention: Policy Services

Address: _____

Fax: _____

RE: Client Name: _____

Client Name: _____

Contract Number(s): _____

Client's SSN/Tax ID: _____ Client's State of Residence: _____

Qualified

Non-Qualified

401K

On the above referenced contract(s), please change the following:

1. The Broker/Dealer of record to:

International Assets Advisory, LLC ("IAA")
390 N. Orange Ave. Suite 750
Orlando, FL 32801
(407) 254-1500

2. The Agent of record to:

Representative Name

Representative Number

3. Please network to IAA brokerage account number: _____

X _____
Client Signature

X _____
Client Signature (Co-Owner, if applicable)

X _____
Authorized Signature of accepting Broker-Dealer (IAA)

X _____
Authorized Signature of Resigning Custodian (if applicable)