RESOLUTION CHANGING AUTHORIZED REPRESENTATIVES FOR LOCAL GOVERNMENT INVESTMENT COOPERATIVE

WHEREAS, City of North Richland Hills, Texas (the "Government Entity") by authority of that certain Local Government Investment Cooperative Resolution No. 2017-024 (the "Resolution") has entered into that certain Interlocal Agreement (the "Agreement") and has become a participant in the public funds investment pool created thereunder known as Local Government Investment Cooperative ("LOGIC"); WHEREAS, the Resolution designated on one or more "Authorized Representatives"

WHEREAS, the Government Entity now wishes to update and designate the following persons as the "Authorized Representatives" within the meaning of the Agreement;

NOW, THEREFORE, BE IT RESOLVED:

within the meaning of the Agreement;

The following officers, officials or employees of the Government Entity are hereby designated as "Authorized Representatives" within the meaning of the Agreement, with full power and authority to: deposit money to and withdrawal money from the Government Entity's LOGIC account or accounts from time to time in accordance with the Agreement and the Information Statement describing the Agreement and to take all other actions deemed necessary or appropriate for the investment of funds of the Government Entity in LOGIC:

| 1. Name: Mark C. Mills | Title: Finance Director |
|----------------------------------|-------------------------------|
| Signature: | Phone: 817-427-6167 |
| | Email: mmills@nrhtx.com |
| 2. Name: Karen Bostic | Title: Assistant City Manager |
| Signature: | Phone: 817-427-6005 |
| | Email: kbostic@nrhtx.com |
| _{3. Name:} Amanda Brown | Title: Accountant II |
| Signature: | Phone: 817-427-6153 |
| | Email: abrown@nrhtx.com |
| 4. Name: | Title: |
| Signature: | |
| | Email: |

Amending Resolution 4/7/2016

{REQUIRED} PRIMARY CONTACT: List the name of the Authorized Representative listed above that will be designated as the Primary Contact and will receive all LOGIC correspondence including transaction confirmations and monthly statements

| {OPTIONAL} | INQUIRY | Y ONLY | CONTACT | : In | addition | , the | e following | additional | Part | icipant |
|-------------------|------------|-------------------|--------------|------|-----------|-------|--------------|-------------|-------|---------|
| representative (| not listed | <i>above</i>) is | designated a | s an | Inquiry (| Only | Representati | ve authoriz | ed to | obtain |
| account informa | ation: | | | | | | | | | |

| Name: Amanda Townsend | Title: Finance Assistant |
|-----------------------|----------------------------|
| Signature: | Phone: (817) 427-6169 |
| | Email: atownsend@nrhtx.com |

Applicant may designate other authorized representatives by written instrument signed by an existing Applicant Authorized Representative or Applicant's chief executive officer.

The foregoing supersedes and replaces the Government Entity's previous designation of officers, officials or employees of the Government Entity as Authorized Representatives under the Agreement pursuant to paragraph 4 of the Resolution. Except as hereby modified, the Resolution shall remain in full force and effect.

| PASSED AND APPROVED this | 15th day | _{v of} May | . 20 17 |
|--------------------------|----------|---------------------|---------|
| TABBLE AND ATTROVED uns | uay | y O1 | , 20 |

| | City of North Richland Hills, Texas (NAME OF ENTITY/APPLICANT) |
|------------------------------|---|
| | SIGNED BY:(Signature of official) |
| | Mark Hindman, City Manager |
| | (Printed name and title) |
| | ATTESTED BY: |
| | (Signature of official) |
| | Alicia Richardson, City Secretary |
| OFFICIAL SEAL OF PARTICIPANT | (Printed name and title) |

LOGIC strongly recommends that the Personal Identification Number (PIN) be changed if there is a change in "Authorized Representatives". Please include a request to change the PIN number when sending the "Amending Resolution" to LOGIC.

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