



Omar Hodge Bldg-Road Town,Tortola.
British Virgin Islands

REVOCATION OF LIMITED POWER OF ATTORNEY
The Information below must be completed in FULL

Account #
User Name
Customer Name

Account Type:
 Individual Joint Business

Customer Info: (must match existing account application on file)

Mailing Address
State/Province
Country

Telephone
Email Address

Select One:

Please keep my account open and change to a self traded account
 Please close my account and send funds via check*
 Please close my account and send funds via wire transfer (bank fee will apply)*
* If requesting a withdrawal, please be sure to complete the Withdrawal Form.

In connection with my foreign exchange investor account carried by FIENEX Group, I hereby revoke Limited Power of Attorney from the Designated Trader named below:

Designated Trader Info:

Name Account #

The undersigned agrees that he/she understands and certifies that by revoking the Limited Power of Attorney, the Trading Agent's right to trade the account will be emoved. In addition, any position(s) that may be open on the account will be closed at the current market price.

THE ABOVE INFORMATION MUST BE COMPLETED IN FULL TO PROCESS THIS CHANGE

I/We hereby represent that the information provided by me/us is true and correct. I/We further represent that I/we will notify FIENEX GROUP of any material changes in writing. FIENEX GROUP reserves the right, but has no duty, to verify the accuracy of information provided, and to contact various sources as it deems necessary

Primary Customer Signature	Date	Primary Customer Signature	Date
<hr/>	<hr/>	<hr/>	<hr/>
Print Primary Name		Print Joint Name	
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