

### SCHEDULE A - Affiliated Companies List

Check One:       New Affiliate List       Addition/Deletion to Existing Affiliate List

Date of Request: \_\_\_\_\_

### Data Recipient / Data Feed Distributor Contact Information

Company Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

### Affiliated Companies

Affiliated Company Names	Registered Address

### Certification

I certify that the information provided in this form is complete and accurate and complies with all terms and conditions of the Exchange Data Agreement with Miami International Securities Exchange, LLC (“MIAX Options”) and/or MIAX PEARL, LLC (“MIAX PEARL”) (either or both referred to herein as the “Exchange” as applicable).

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_