Pattern Day Trader "Change of Strategy" Agreement

DATE: _____

TO: Success Trade Securities, Inc.
1900 L Street NW Suite 525
Washington, DC 20036
Fax – 202.466.6895

RE: Account Number: _____

Account Holder(s): _____

_____

Customer Address: _____

_____

I understand that, at the present time, my account has been identified and coded as pattern day trader. I hereby advise you that I do not intend to conduct further pattern day trading activities in my account. I understand that my account will be coded as a non-pattern day trader and that I may be allowed to conduct occasional day trades, but that if I conduct pattern day trading: 4 or more day trades in 5 business days, where the day trading activities are greater than 6% of my total trading activity for that same five-day period, then my account will be closed immediately and limited to liquidating (closing) transactions only.

Therefore, I agree to cease pattern day trading activities in my account, and I understand that my account will be closed immediately if I conduct pattern day trading activities.

Sincerely,

_____	_____	_____
Account Holder Signature	Print Name	Date
_____	_____	_____
Joint Holder Signature (if applicable)	Print Name (if applicable)	Date

FOR OFFICE USE ONLY:

_____	_____
Authorized Principal Approval	Date