

Order form: Adoption of new constitution

Order placed by								simila		
Your name				Telephone Fac			acsimile			
Firm name					Email address					
Firm	n address									
Package – choose one										
		Includes:	'S:		Please submit the following:			On this form, please complete:		
	Standard adoption	 ✓ New constitution ✓ Minutes 		 + Company's existing Constitution + Up-to-date ASIC annual company statement/search/extract 				Page 1 & Page 2 only		
	Adoption + changes	 ✓ New constitution ✓ Minutes ✓ Change officers/members 		 Company's existing Constitution Up-to-date ASIC annual company statement/search/extract 				All relevant sections of the form		
Deli	very	· change on		310	ternenty search	iy extract				
Req	uired delive	ry date	🗆 ASAP 🗆 Sp	oecific da	te					
Deli	very address	S								
	et address prefe									
PDF	required		□ Constitution	🗆 Ent	ire file	Not required				
Pay	ment - The o	options to pay	ı in 14 or 30 days a	re only a	vailable for a	approved clients				
		□ Cheque	Please make	cheques pa	yable to: Castle	Corporate Pty Ltd.				
	Pay now	Credit ca	rd Please compl	ete a <u>Credit</u>	Card Authorisa	tion form and return with	this form			
	Account details: Please provide reference you will use for direct deposit:									
_	Bank deposit BSB: 083-419, Account: 66332-9114									
	Pay in 14 da	ys with our <u>Er</u>	during Credit Card	Authoris	<u>ation</u>					
	Pay in 30 da	ys – I, the per	son named above,	agree to	pay Castle fo	r this order within 30) days of	f the invoice date		
Con	npany detail	S								
Con	npany name									
					ASIC corpo	rate key (for changes	only)			
ACN	1				ASIC corporate key (for changes only) 8 digit number on annual statement					
Date of change					ASIC must be advised of changes within 28 day to avoid penalties.					
	-	nuiromonto						.,		
Constitution requirements Purpose of adopting new constitution:			 To replace or update Constitution/Memorandum & Articles of Association To operate with one director and one member To act solely as super fund trustee Death of a director or member (Castle Corporate will contact you to obtain additional details) Other 							
	Will Castle's standard constitution* suffice									
Doy	Do you require any special provisions in the new				If 'yes', please provide details:					
constitution? (Additional fees may apply) Ites I area *Please note our standard constitution: allows for a minimum of one director and one member • does not include pre-emptive rights regarding share allotments and transfers • does not allow chairman to have casting vote at board or general meetings • does not require AGMs to be held										

Me	Meeting information										
	dress for meetings										
(if not principal place of business)			_	_					_		
Boa	ard meeting information	on									
Chair of board meetings											
Will all directors attend the			Yes No – please specify which directors will <u>not</u> attend:								
board meeting?											
-		tion									
Ger	neral meeting informa										
Chair of general meeting		Same	Same as chair of board meetings? Yes No – please specify:								
Do all classes of shares			Yes No – please specify which classes do <u>not</u> have the right to vote:								
issued have the right to			Tes Tho – please specify which classes do <u>not</u> have the right to vote.								
vote	e at a general meeting	(? 									
Ger	neral meeting attenda	nce	Il voting mer			-					
			bsent voting			point a	proxy:-	□ Yes	🗆 No		
If p	roxies are to be appoi	nted, plea	se complete	table belov	w:						
					N.4-	If member is a Multiple Sole				a company: If sole director company,	
	Name of membe	r	Name of p	roxy		ector	director			rector's name:	
1											
2					_						
2											
3											
Со	Complete this section if you are ordering an adoption with changes										
Same as chair of board meetings? Search Yes No – please specify:											
ASIC form signatory											
Changes to officers											
-					• •			. [Oth	er Title Please specify	
Title	e	∐ Mr			Miss	∐ Dr		ther			
Nar	me		Give	n name(s)					Surna	ame	
Ado	dress – residential										
7100					Г		City		Sta	te (Country if not Australia)	
Dat	e of birth		Place of birth								
Acti	ion	🗆 Арро	Appoint 🗆 Resign To/from office of 🗆 Director 🗆 Secretary 🗆 Public offi								
Title	e	🛛 Mr	□ Mrs □	Ms 🛛	Miss	🛛 Dr		ther	Oth	er Title Please specify	
Nar	ne	Given name(s) Surname					ime				
Address – residential											
Date of birth											
Dat				Place of b	irth		City		Sta	te (Country if not Australia)	
Dat Acti	e of birth	🗆 Арро	int 🗆 Res		L	ffice of		ector 🗆		te (Country if not Australia)	
	e of birth	Appo Mr	int 🗆 Resi	gn To/f	L	ffice of	Dire		Secretary		
Acti Title	e of birth ion e	_	□ Mrs □	gn To/f	rom of		Dire		Secretary	Public officer er Title Please specify	
Acti	e of birth ion e	_	□ Mrs □	gn To/f	rom of		Dire		Secretary	Public officer er Title Please specify	
Acti Title Nar	e of birth ion e	_	□ Mrs □	gn To/f	rom of		Dire		Secretary	Public officer er Title Please specify	
Acti Title Nar Adc	e of birth ion e me	_	□ Mrs □	gn To/f	L irom of Miss		Dire		Secretary Oth	Public officer er Title Please specify	

Share transfers – Shares to be sold by one shareholder to another entity.								
Transfer 1								
Seller		Buyer		Share information				
Title For individual	□ Mr □ Mrs □ Ms □ Miss □ Dr □ Other	Title For individual	□ Mr □ Mrs □ Ms □ Miss □ Dr □ Other	New share certificate number				
Name Individual or company		Name Individual or company		Number of shares				
ACN For company		ACN For company		Class of shares	Ordinary Other:			
Address		Address		Amount paid for above parcel of shares				
Shares are held	Beneficially In trust for another entity name of entity	Shares are held	Beneficially In trust for another entity name of entity					
Transfer 2				,				
Image: New seller - complete details below or Image: New buyer - complete details below or Image: Seller from transfer 1 Image: New buyer - complete details below or								
Title For individual	□ Mr □ Mrs □ Ms □ Miss □ Dr □ Other	Title For individual	□ Mr □ Mrs □ Ms □ Miss □ Dr □ Other	New share certificate number				
Name Individual or company		Name Individual or company		Number of shares				
ACN For company		ACN For company		Class of shares	 Ordinary Other: 			
Address		Address		Amount paid for above parcel of shares				
Shares are held	Beneficially In trust for another entity name of entity	Shares are held	Beneficially In trust for another entity name of entity					
Transfer 3				J				
	ller – complete details below or om transfer 1 or 🛛 transfer 2		er – complete details below or om transfer 1 or transfer 2					
Title For individual	□ Mr □ Mrs □ Ms □ Miss □ Dr □ Other	Title For individual	□ Mr □ Mrs □ Ms □ Miss □ Dr □ Other	New share certificate number				
Name Individual or company		Name Individual or company		Number of shares				
ACN For company		ACN For company		Class of shares	Ordinary Other:			
Address		Address		Amount paid for above parcel of shares				
Shares are held	 Beneficially In trust for another entity name of entity 	Shares are held	 Beneficially In trust for another entity name of entity 					

Allotments - New shares issued by the company If details for a party have been previously stated in the form, simply fill in the party's name.								
Allotment 1								
	Share information							
Title Mr Mrs Ms Dr Other:	New share cert no							
Full name	Number of shares							
Address Residential	Class of shares							
OR	Amount paid \$1 per share Other: \$							
Corporate shareholder ACN	Amount owing \$1 per share Other: \$							
Company name	Shares For the benefit of the holder							
Address	are held In trust for another entity – entity name:							
No of directors 2 or more (names not required)								
Allotment 2								
	Share information							
Title Mr Mrs Ms Miss Dr Other:	New share cert no							
Full name	Number of shares							
Address Residential	Class of shares							
OR	Amount paid \$1 per share Other: \$							
Corporate shareholder ACN	Amount owing \$1 per share 0 Other: \$							
Company name	Shares For the benefit of the holder							
Address	are held In trust for another entity – entity name:							
No of directors One full name: 2 or more (names not required)								
Allotment 3								
	Share information							
Title Mr Mrs Ms Miss Dr Other:	New share cert no							
Full name	Number of shares							
Address Residential	Class of shares							
OR	Amount paid per share 0 ther: \$							
Corporate shareholder ACN	Amount owing per share \$1 Other: \$							
Company name	Shares are held In trust for another							
Address	entity – entity name:							
No of directors One full name: 2 or more (names not required)								
Additional information – Please use this space to give us any other information that may he	elp us to complete your order.							