

Company name

Order form: Adoption of new constitution

Order placed by

Your name

Telephone

Facsimile

Firm name

Email address

Firm address

Package – choose one

		Includes:	Please submit the following:	On this form, please complete:
<input type="checkbox"/>	<i>Standard adoption</i>	<ul style="list-style-type: none"> ✓ New constitution ✓ Minutes 	<ul style="list-style-type: none"> + Company's existing Constitution + Up-to-date ASIC annual company statement/search/extract 	Page 1 & Page 2 only
<input type="checkbox"/>	<i>Adoption + changes</i>	<ul style="list-style-type: none"> ✓ New constitution ✓ Minutes ✓ Change officers/members 	<ul style="list-style-type: none"> + Company's existing Constitution + Up-to-date ASIC annual company statement/search/extract 	All relevant sections of the form

Delivery

Required delivery date

 ASAP Specific date

Delivery address

Street address preferred

PDF required

 Constitution Entire file Not required

Payment - The options to pay in 14 or 30 days are only available for approved clients

 Cheque

Please make cheques payable to: Castle Corporate Pty Ltd.

 Pay now

 Credit card
Please complete a [Credit Card Authorisation form](#) and return with this form.
 Bank deposit

 Account details:
 BSB: 083-419, Account: 66332-9114

Please provide reference you will use for direct deposit:

 Pay in 14 days with our [Enduring Credit Card Authorisation](#)
 Pay in 30 days – I, the person named above, agree to pay Castle for this order within 30 days of the invoice date

Company details

Company name

ACN

 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.

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

Other (please specify):

Will Castle's standard constitution* suffice

 Yes No

Do you require any special provisions in the new constitution? (Additional fees may apply)

 Yes No

If 'yes', please provide details:

*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

Meeting information

Address for meetings
(if not principal place of business)

Board meeting information

Chair of board meetings

Will all directors attend the board meeting?

Yes No – please specify which directors will **not** attend:

General meeting information

Chair of general meeting

Same as chair of board meetings? Yes No – please specify:

Do all classes of shares issued have the right to vote at a general meeting?

Yes No – please specify which classes do **not** have the right to vote:

General meeting attendance

All voting members will attend in person
 Absent voting members will appoint a proxy:- Yes No

If proxies are to be appointed, please complete table below:

If member is a company:

	Name of member	Name of proxy	Multiple director	Sole director	If sole director company, provide director's name:
1			<input type="checkbox"/>	<input type="checkbox"/>	
2			<input type="checkbox"/>	<input type="checkbox"/>	
3			<input type="checkbox"/>	<input type="checkbox"/>	

Complete this section if you are ordering an adoption with changes

ASIC form signatory

Same as chair of board meetings? Yes No – please specify:

Changes to officers

Title

Mr Mrs Ms Miss Dr Other

Other Title Please specify

Name

Given name(s)

Surname

Address – residential

Date of birth

Place of birth

City

State (Country if not Australia)

Action

Appoint Resign **To/from office of** Director Secretary Public officer

Title

Mr Mrs Ms Miss Dr Other

Other Title Please specify

Name

Given name(s)

Surname

Address – residential

Date of birth

Place of birth

City

State (Country if not Australia)

Action

Appoint Resign **To/from office of** Director Secretary Public officer

Title

Mr Mrs Ms Miss Dr Other

Other Title Please specify

Name

Given name(s)

Surname

Address – residential

Date of birth

Place of birth

City

State (Country if not Australia)

Action

Appoint Resign **To/from office of** Director Secretary Public officer

Share transfers – Shares to be sold by one shareholder to another entity.

Transfer 1

Seller

Title Mr Mrs Ms Miss
 Dr Other

For individual

Name
 Individual or company

ACN
 For company

Address

Shares are held Beneficially
 In trust for another entity
 name of entity

Buyer

Title Mr Mrs Ms Miss
 Dr Other

For individual

Name
 Individual or company

ACN
 For company

Address

Shares are held Beneficially
 In trust for another entity
 name of entity

Share information

New share certificate number

Number of shares

Class of shares Ordinary
 Other:

Amount paid for above parcel of shares

Transfer 2

New seller – complete details below or
 Seller from transfer 1

New buyer – complete details below or
 Buyer from transfer 1

Title Mr Mrs Ms Miss
 Dr Other

For individual

Name
 Individual or company

ACN
 For company

Address

Shares are held Beneficially
 In trust for another entity
 name of entity

Title Mr Mrs Ms Miss
 Dr Other

For individual

Name
 Individual or company

ACN
 For company

Address

Shares are held Beneficially
 In trust for another entity
 name of entity

New share certificate number

Number of shares

Class of shares Ordinary
 Other:

Amount paid for above parcel of shares

Transfer 3

New seller – complete details below or
 Seller from transfer 1 or **transfer 2**

New buyer – complete details below or
 Buyer from transfer 1 or **transfer 2**

Title Mr Mrs Ms Miss
 Dr Other

For individual

Name
 Individual or company

ACN
 For company

Address

Shares are held Beneficially
 In trust for another entity
 name of entity

Title Mr Mrs Ms Miss
 Dr Other

For individual

Name
 Individual or company

ACN
 For company

Address

Shares are held Beneficially
 In trust for another entity
 name of entity

New share certificate number

Number of shares

Class of shares Ordinary
 Other:

Amount paid for above parcel of shares

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

Individual

Title Mr Mrs Ms Miss Dr Other:

Full name

Address Residential

OR

Corporate shareholder

ACN

Company name

Address

No of directors One full name:
 2 or more (names not required)

Share information

New share cert no

Number of shares

Class of shares Ordinary
 Other:

Amount paid per share \$1
 Other: \$

Amount owing per share \$1
 Other: \$

Shares are held For the benefit of the holder
 In trust for another entity – entity name:

Allotment 2

Individual

Title Mr Mrs Ms Miss Dr Other:

Full name

Address Residential

OR

Corporate shareholder

ACN

Company name

Address

No of directors One full name:
 2 or more (names not required)

Share information

New share cert no

Number of shares

Class of shares Ordinary
 Other:

Amount paid per share \$1
 Other: \$

Amount owing per share \$1
 Other: \$

Shares are held For the benefit of the holder
 In trust for another entity – entity name:

Allotment 3

Individual

Title Mr Mrs Ms Miss Dr Other:

Full name

Address Residential

OR

Corporate shareholder

ACN

Company name

Address

No of directors One full name:
 2 or more (names not required)

Share information

New share cert no

Number of shares

Class of shares Ordinary
 Other:

Amount paid per share \$1
 Other: \$

Amount owing per share \$1
 Other: \$

Shares are held For the benefit of the holder
 In trust for another entity – entity name:

Additional information – Please use this space to give us any other information that may help us to complete your order.

Empty box for additional information.