



Amendment/Adoption of a Constitution Instructions

Company Name: ACN

Details of Officeholders/Members

The applicant hereby accepts full responsibility for any amount payable to CST Corporate Solutions Pty Ltd

Surname: Given Names:

Address:

Suburb: State: P/Code

Date of Birth Place of Birth (Town/State/Country):

Current Director Chairman Retiring Director Appoint Director Member

Current Secretary Public Officer Retiring Secretary Appoint Secretary New Member

Class Share Type: Number: 2nd Class Share Type: Number:

Transfer Shares To:

Surname: Given Names:

Address:

Suburb: State: P/Code

Date of Birth Place of Birth (Town/State/Country):

Current Director Chairman Retiring Director Appoint Director Member

Current Secretary Public Officer Retiring Secretary Appoint Secretary New Member

Class Share Type: Number: 2nd Class Share Type: Number:

Transfer Shares To:

Meeting Address:

Applicant Details: Customer No:

Firm Name:

Contact Person: Phone:

Street Add: Fax:

Postal Add: DX:

Email Address:

Please Deliver to: DX / Street Address / Postal Address / Other:

Payment Details: Chq Encl. Direct Deposit Money Order Encl.

or Charge our Credit Card: Bankcard Visa Mastercard Amount \$

Card Number: Expiry Date:

I, have been made aware of the requirements and of the implications, including any stamp duty and/or capital gains tax which may result in the alteration of the constitution of the abovenamed company to permit it to operate as a sole director/sole shareholder company and I have full knowledge and understanding of the existing constitution of the company of which I am director. I am satisfied that it's desirable and it's also my wish to proceed with the alteration of the company's constitution by adopting a new set in replacement of the existing constitution in order to permit the company to operate with a sole director/shareholder, namely myself, and I request you to prepare the necessary documents to facilitate this conversion and request further that you accept the information above to assist in this matter. I attach a copy of the current constitution and I understand that CST Online Pty Ltd is not and will not be responsible for any stamp duty or capital gains tax which may result from the changes requested.

Signed Date:



Company Name: PAGE 2 OF 2

Extra Company Officeholders and Members:

Surname: Given Names:

Address:

Suburb: State: P/Code

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Date of Birth Place of Birth (Town/State/Country):

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 Current Secretary Public Officer Retiring Secretary Appoint Secretary New Member

Class Share Type: Number: 2nd Class Share Type: Number:

Transfer Shares To:

*** Please attach a copy of the existing Articles of Association and a copy of the company's latest Annual Return.**