Affidavit

[Pursuant to section 7(1)(c) of the Companies Act, 2013 and rule
15 of the Companies (Incorporation and Incidental) Rules,
2014]

Name of the proposed company:									
I, being the subscriber to the memorandum /									
named as first director in the articles, of the above named									
propos	sed company, hereby solemnly declare and affirm that:								
	I have not been convicted of any offence in connection								
	with the promotion, formation or management of any								
	company during the preceding five years; and								
	I have not been found guilty of any fraud or								
	misfeasance or of any breach of duty to any company								
	under this Act or any previous company law during the								
	preceding five years; and								
	All the documents filed with the Registrar for								
	registration of the company contain information that is								
	correct and complete and true to the best of my								
	knowledge and belief.								
Date:	Signature:								
Place:									

Certificate of Incorporation

[Pursuant to sub- section (2) of section7 of the Companies Act, 2013and rule 8 the Companies (Incorporation and Incidental) Rules, 2014]

I hereby certify that
The CIN of the company is
Given under my hand at this day of two thousand
SEAL: Registrar of Companies (State)

Form No. INC-14 Declaration

[Pursuant to section 7(1)(b) and rule 19 (3)(b) of the Companies (Incorporation and Incidental) Rules, 2014]

Name of the Company:

I ,	,
	an advocate who is engaged in the formation of the
	company
	a Chartered Accountant in India who is engaged in the
	formation of the company
	a Cost Accountant in India who is engaged in the
	formation of the company
	a Company Secretary in practice in India who is engaged
	in the formation of the company
declare	e that all the requirements of Companies Act, 2013 and
the ru	iles made thereunder relating to registration of the
compa	ny under section 8 of the Act and matters precedent or
incider	ntal thereto have been complied with.
Date:	Signature:

Membership No.:

Place:

Declaration

[Pursuant to rule 19 (3)(d) of the Companies (Incorporation and Incidental) Rules, 2014]

- (a) the draft memorandum and articles of association have been drawn up in conformity with the provisions of section 8 and rules made thereunder; and
- (b) all the requirements of the Act and the rules made thereunder relating to registration of the company under section 8 and matters incidental or supplemental thereto have been complied with;

and I make this solemn declaration conscientiously believing the same to be true.

Professional Address:

Place:	Signature:
Date:	Name:

Form No. INC-13 Memorandum of Association

[Pursuant to rule 19(2) the Companies (Incorporation and Incidental) Rules, 2014].

1. The name of the company is "".
2. The registered office of the company will be situated in the State of
3. The objects for which the company is established are:
the doing of all such other lawful things as considered necessary for the furtherance of the above objects: Provided that the company shall not support with its funds, or endeavour to impose on, or procure to be observed by its members or others, any regulation or restriction which, as an object of the company, would make it a trade union.
4. The objects of the company extend to the
[Here enter the name of the State or States, and Country or Countries]
5. (i) The profits, if any, or other income and property of the company, whensoever derived, shall be applied, solely for the promotion of its objects as set forth in this

memorandum.

- (ii) No portion of the profits, other income or property aforesaid shall be paid or transferred, directly or indirectly, by way of dividend, bonus or otherwise by way of profit, to persons who, at any time are, or have been, members of the company or to any one or more of them or to any persons claiming through any one or more of them.
- (iii) No remuneration or other benefit in money or money's worth shall be given by the company to any of its members, whether officers or members of the company or not, except payment of out-of-pocket expenses, reasonable and proper interest on money lent, or reasonable and proper rent on premises let to the company.
- (iv) Nothing in this clause shall prevent the payment by the company in good faith of prudent remuneration to any of its officers or servants (not being members) or to any other person (not being member), in return for any services actually rendered to the company.
- (v) Nothing in clauses (iii) and (iv) shall prevent the payment by the company in good faith of prudent remuneration to any of its members in return for any services (not being services of a kind which are required to be rendered by a member), actually rendered to the company;
- **6.** No alteration shall be made to this memorandum of association or to the articles of association of the company which are for the time being in force, unless the alteration has been previously submitted to and approved by the Registrar.

- **7.** The liability of the members is limited.
- **8.** [FOR COMPANIES LIMITED BY GUARANTEE]

Each member, undertakes to contribute to the assets of the company in the event of its being wound up while he is a member or within one year afterwards, for payment of the debts or liabilities of the company contracted before he ceases to be a member and of the costs, charges and expenses of winding up, and for adjustment of the rights of the contributories among themselves such amount as may be required not exceeding a sum of Rs.

[FOR COMPANIES LIMITED BY SHARES]

The share capital of the company will consist of Rs. divided into shares of rupees each.

9. True accounts shall be kept of all sums of money received and expended by the company and the matters in respect of which such receipts and expenditure take place, and of the property, credits and liabilities of the company; and, subject to any reasonable restrictions as to the time and manner of inspecting the same that may be imposed in accordance with the regulations of the company for the time being in force, the accounts shall be open to the inspection of the members.

Once at least in every year, the accounts of the company shall be examined and the correctness of the balance-sheet and the income and expenditure account ascertained by one or more properly qualified auditor or auditors.

10. If upon a winding up or dissolution of the company, there remains, after the satisfaction of all the debts and liabilities,

any property whatsoever, the same shall not be distributed amongst the members of the company but shall be given or transferred to such other company having objects similar to the objects of this company, subject to such conditions as the Tribunal may impose, or may be sold and proceeds thereof credited to the Rehabilitation and Insolvency Fund formed under section 269 of the Act.

- **11.** The Company can be amalgamated only with another company registered under section 8 of the Act and having similar objects.
- **12.** We, the several persons whose names, addresses, descriptions and occupations are hereunto subscribed are desirous of being formed into a company not for profit, in pursuance of this Memorandum of Association:

Names, addresses, de	scriptions and occ	cupations of subscribers:
1	of	*
2	of	
3	of	*
4	of	*
5	of	*
6	of	*
7	of	*
Witnesses to the abov	e signatures of:	
1		
3		

Dated the...... day of......20....

*If the association is a company limited by shares, here enter "number of shares" taken by each subscriber.

Form No. INC-19 Notice

[[Pursuant to rule 22 the Companies (Incorporation and Incidental) Rules, 2014]

- 1. Notice is hereby given that in pursuance of sub-section (5) of section 8 of the Companies Act, 2013, an application has been made to the Registrar at for a licence that ----- a limited company may be given a licence to be registered under sub-section (5) of section 8 of the Companies Act, 2013 without the addition of the word "Limited" or the case may be, the words "Private Limited" to its name.
- 2. The principal objects of the company are as follows:

3. A copy of the draft memorandum and articles of the proposed company may be seen at
4. Notice is hereby given that any person, firm, company, corporation or body corporate, objecting to this application may communicate such objection to the Registrar at, within thirty days from the date of publication of this notice, by a letter addressed to the Registrar (give the address) a copy of which shall be forwarded to INthe Applicant at (give the address). Dated thisday of
Name(s) of Applicant 1 2

Licence under section 8 (1) of the Companies Act, 2013

[Pursuant to rule 20 the Companies (Incorporation and Incidental) Rules, 2014]

WHEREAS it has been proved to my satisfaction that, a person or an association of persons to be registered as a company under the Companies Act, 2013, for promoting objects of the nature specified in clause (a) of subsection (1) of section 8 of the said Act, and that it intends to apply its profits, if any, or other income and property in promoting its objects and to prohibit the payment of any dividend to its members;

NOW, THEREFORE, in exercise of the powers conferred by section 8 of the said Act, I, the Registrar at, hereby grant, this licence, directing that the said person or association or persons be registered as a company with limited liability without the addition of the word "Limited", or as the case may be, the words "Private Limited" to its name, subject to the following conditions, namely:

- (1) that the said company shall in all respects be subject to and governed by the conditions and provisions contained in its memorandum of association;
- (2) that the profits, if any or other income and property of the said company, whensoever derived, shall be applied solely for the promotion of the object as set forth in its

memorandum of association and that no portion thereof shall be paid or transferred, directly or indirectly, by way of dividend, bonus, or otherwise by way of profit, to persons who at any time are or have been members of the said company or to any of them or to any person claiming through any one or more of them;

- (3) that no remuneration or other benefit in money or money's worth shall be given by the company to any of its members except payment of out-of-pocket expenses, reasonable and proper interest on money lent, or reasonable and proper rent on premises let to the company;
- (5) that nothing in this clause shall prevent the payment by the company in good faith of prudent remuneration to any of its officers or servants (not being members) or to any other person (not being member), in return for any services actually rendered to the company;
- (6) that nothing in clauses (3), (4) and (5) shall prevent the payment by the company in good faith of prudent remuneration to any of its members in return for any services (not being services of a kind which are required to be rendered by a member), actually rendered to the company;
- (7) that no alteration shall be made to the memorandum of association or to the articles of association of the company,

- which are for the time being in force, unless the alteration has been previously submitted to and approved by the Registrar;
- (8) The Company can be amalgamated only with another company registered under section 8 of the Act and having similar objects; and
- (9) that, without prejudice to action under any law for the time being in force, this licence shall be liable to be revoked, if the company:
 - (a) contravenes any of the requirements of section 8 of the Act or the rules made thereunder or any of the conditions subject to which a licence is issued;
 - (b) if the affairs of the company are conducted fraudulently or in a manner violative of the objects of the company or prejudicial to public interest.

R	eg	gis	st	ra	ar	-						

Licence under section 8(5) of the Companies Act, 2013

[Pursuant to rule 20 the Companies (Incorporation and Incidental) Rules, 2014]

WHEREAS it has been proved to my satisfaction that the objects

of......Limited/ Private Limited, being a company registered under the Companies Act,, as a limited company are restricted to those specified in, clause (a) of subsection (1) of section 8 of the said Act and that it intends to apply its profits, if any, or other income in promoting its objects and to prohibit the payment of any dividend to its members;

NOW, THEREFORE, in exercise of the powers conferred by subsection (5) of section 8 of the said Act, I, the Regional Director at, hereby grant this licence authorising the company by a special resolution to change its name by omitting the word "Limited", or as the case may be, the words "Private Limited" from such name subject to the following conditions, namely:

- (1) that the said company shall in all respects be subject to and governed by the conditions and provisions contained in its memorandum of association;
- (2) that the profits, if any or other income and property of the said company, whensoever derived, shall be applied solely for the promotion of the objects as set forth in its memorandum of association and that no portion thereof shall be paid or transferred, directly or indirectly, by way of dividend, bonus or otherwise by way of profit to persons who at any time are or have been members of the said company or to any of them or to any person claiming through any one or more of them;
- (3) that no remuneration or other benefit in money or money's worth shall be given by the company to any of its members except payment of out-of-pocket expenses,

reasonable and proper interest on money lent, all or reasonable and proper rent on premises let to the company;

- (4) that nothing in this clause shall prevent the payment by the company in good faith of prudent remuneration to any of its officers or servants (not being members) or to any other person (not being member), in return for any services actually rendered to the company;
- (5) that nothing in clauses (3) and (4) shall prevent the payment by the company in good faith, of prudent remuneration to any of its members in return for any services (not being services of a kind which are required to be rendered by a member), actually rendered to the company;
- (6) that no alteration shall be made to the memorandum of association or in the articles of association of the company, which are for the time being in force, unless the alteration has been previously submitted to and approved by the Registrar;
- (7) The Company can be amalgamated only with another company registered under section 8 of the Act and having similar objects; and
- (8) that, without prejudice to action under any other law for the time being in force, this licence shall be liable to be revoked, if the company:
 - (a) contravenes any of the requirements of section 8 of the Act or the rules made thereunder or any of the conditions subject to which a licence is issued;

(b)	if	the	affairs	of	the	company	are	conducted
	fra	udule	ntly or in	n a r	mann	er violative	of the	e objects of
	the	com	pany or	prej	udicia	al to public i	intere	est.
						Registra	ar	
Dated th	nis.					day of	20.	

Declaration prior to the commencement of business or exercising borrowing powers

[Pursuant to section 11(1)(a) and rule 2.20]

[
1.(a) Corporate identity number (CIN) of company:	
(b) Global location number (GLN) of company:	
2.(a) Name of the company:	
(b) Address of the registered office of the company:	
(c) E-mail ID of the company:	
3. (a) Whether the Company a is Non-Banking Financial Company	/
(i) Yes (ii) No	
(b) If Yes, whether it has been registered with the Reserve	
Bank of India	
(i) Yes	
(ii) No	
4. Particulars of the director filing the declaration	
(a) Name:	
(b) DIN:	
5. I, the director of the company, do	
solemnly and sincerely declare that:	
(i) every subscriber to the memorandum has paid	
to the company the value of the shares agreed	
to be taken by him and the company has	
received the money in respect thereof.	
(ii) The paid up capital of the company is	
(iii) The company has filed with the Registrar a	

verification of its registered office in Form No. 2.25

(iv) the Company being a Non- Banking Financial Company, has obtained necessary registration certificate from the Reserve Bank of India.

I further declare that the statement given above is true to the best of my knowledge and belief.

Signature of the Director

Verification

I	. being
---	---------

- □ the Company Secretary of the company
- □ a Company Secretary in practice
- □ a Chartered Accountant
- □ a Cost Accountant

hereby certify that the information given in this form and its attachments is correct and complete to the best of my knowledge and belief.

Date: Signature:

Place: ——Membership number:

Attachments:

- (1) Certificate of Registration issued by the Reserve Bank of India (Only in case of Non-Banking Financial Companies)
- (2) Copy of acknowledgment of application filed with specific regulator for permission to carry on the business;
- (3) Optional attachment(s), if any

_			

Certificate of Incorporation pursuant to change of name

[Pursuant to rule 29 the Companies (Incorporation and Incidental) Rules, 2014]

I hereby certify that the name of the company has been changed fromto				
with effect from the date of this certificate and that the company is limited by shares/limited by guarantee/ unlimited company.				
The CIN of the company is				
Given under my hand at this day of two thousand				
SEAL: Registrar of Companies				
(State)				

Form no INC-26

[[Pursuant to rule 30 the Companies (Incorporation and Incidental) Rules, 2014]

Advertisement giving details of special resolution to be passed for change in objects for which money is raised through prospectus

CIN-

Name of the company-

Registered office address-

Public Notice

Notice is hereby given that by a resolution passed on....., the Board has proposed to change some or all of the objects for which money raised by the Company through Prospectus would be applied.

In pursuance of the said resolution, notice is hereby given that the members of the Company are being approached to pass a special resolution through postal ballot for approving the aforesaid change. Details of the proposal are given in the Notice of Postal Ballot dated ______ sent to the members individually.

Any interested person may obtain a copy o	f the notice along
with the explanatory statement free of	charge from the
registered office of the company or fro	m the Company
Secretary Shri at	
Sig	ınature
5 .	

Date:

Registered Office:

FORM NO. INC.1



Application for reservation of Name

[Pursuant to section 4(4) of The Companies Act, 2013 and pursuant to rule 8 & 9 of The

Companies (Incorporation and Incidental)
Rules 2014]

Form language o English o Hindi Refer the instruction kit for filing the form.	
1. *Application for:	
☐ Incorporating a new company (Part A, B, C)	
☐ Changing the name of an existing company (Part B, C, D)	
Part A: Reservation of name for incorporation of a new company	
2. Details of applicant (In case the applicant has been allotted DIN, then it is m	andatory to enter such DIN)
(a) *Director identification number (DIN) or Income tax	Pre-Fill
permanent account number (PAN) or passport number	Verify Detail
(b) *First Name	
Middle Name	
*Surname (c) *Occupation Type o Self-employed o Professional o Homemaker	a Student a Servicemen
Area of occupation	o stadent - o servicentan
(d) Address *Line I	
Line II	
(e) *City	
(f) *State/Union territory	
If 'NA' selected, specify	
(g) *Pin Code	
(h) *ISO Country Code	
(i) Country	
(j) *e-mail Id	
(k) *Phone (with STD/ISD code)	
(m) Mobile (with Country code)	
(I) Fax	
3. (a)*Type of company	
☑ Section 8 Company ☑ Part I Company (Chapter XXI) ☑ Producer Company (Chapter XXII) ☑ Producer Company (Chapter XXIII) ☑ Producer Company (Chapter XXIIII) ☑ Producer Company (Chapter XXIIII) ☑ Producer Company (Chapter XXIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	mpany 🛚 New Company (Others)
(b) *State the class of proposed company	
Public Private Private (One Person Company)	
(c) *State the category of proposed company	
{Values: Company limited by shares, Company limited by guarantee, Unlimited	company}
(d) *State the sub-category of proposed company	
{Values: Union Government company, State Government company, Non-Govern	ment company, Subsidiary of

		foreign company, Guarantee and association company)			
4.	. *Name of the State/Union territory in which the proposed company is to be registered				
5.	*Nam	ne of the office of the Registrar of Companies in which the proposed company is to be registered			
6	Detai	ls of promoter(s) (In case the promoter(s) has been allotted DIN, then it is mandatory to enter such DIN)			
		the number of promoter(s)			
I		*Category			
		\text{Values: Individual/company/foreign company/Company incorporated outside India/ body Corporate/ others} *DIN or Income-tax PAN or passport number or corporate identification number (CIN) or			
		ferring company registration purpler (FCDN) or			
		any other registration number			
		*Name			
7.*	Whet	ther the application is being certified by a practicing professional ② Yes ② No			
8. *	Obje	cts of the proposed Company to be included in its MoA			
		culars of proposed director(s)			
		nformation of one director in case the proposed company is One Person Company or of two directors in case the proposed is a private company (other than producer company) or of three directors in case the proposed company is a public company			
		directors in case the proposed company is a producer company)			
		irector identification number (DIN)			
	l N	ameame			
	L				
	Fa	ather's Name			
	N	ationality Date of birth (DD/MM/YY)			
		come tax permanent account number (PAN)			
	Passport number Voter identity card number				
Aadhaar number					
	Pr	resent residential address			
	10.	(a) *Whether the Promoters are carrying on any Partnership firm, sole proprietary or unregistered entity in the			
		name as applied for o Y es o No (If yes, attach NOC from all owners/partners of such entity for use of such name)			
		If yes, whether the business of such entity shall be taken over by the proposed Company			
		o Yes o No			
		(b) *Whether the proposed name(s) contain(s) name of any person other than the promoter(s) or their close			
	blood relatives o Yes o No				

[If Yes, attach No objection certificate from such person(s)]				
(c) *Whether the proposed name(s) include(s) the name of relatives				
o Yes o No (If Yes, attach proof of relation)				
11*Whether the proposed name is indicative of the object of the proposed company				
o Yes o No				
If yes, whether the proposed name is in consonance with the object of the proposed company				
o Yes o No				
Part B. Particulars about the proposed name(s)				
12. *Number of proposed names for the company				
(Please give maximum six names in order of preference)				
Proposed name				
Significance of key or				
coined word in the proposed name				
State the name of the				
vernacular language(s) if used in the proposed name				
13. *Whether the proposed name is in resemblance with any class of Trade Marks Rules, 2002				
o Yes o No				
If Yes, Please specify the Class(s) of trade mark				
14. *Whether the proposed name(s) is/are based on a registered trademark or is subject matter of an application				
pending for registration under the Trade Marks Act. ☐ Yes				
□ No				
If yes, furnish particulars of trade mark or application and the approval of the applicant or owner of the trademark				
15. In case the name is similar to any existing company or to the foreign holding company, specify name of such company				
and also attach copy of the No Objection Certificate by way of Board resolution (Duly attested by a Director of that				
company) a. Whether the name is similar to:				
☐ existing Company ☐ foreign holding Company				
b. In case of existing Company, provide CIN				
Pre fill				
c. Name of the Company				

16 .(a) *Whether the proposed name includes the word such as Insurance, Bank, Stock Exchange, Venture Capital, Asset Management, Nidhi, or Mutual Fund etc.
□ Yes
□ No
If Yes, whether the in-principle approval is received from <mark>(drop down: values- IRDA, RBI, SEBI, MCA, other)</mark> specify other o Yes o No
(If yes, attach the approval or if No, attach the approval at the time of filing the Incorporation form)
(b) *Whether the proposed name including the phrase 'Electoral trust'.
□ Yes
☐ No [If Yes, attach the affidavit as per rule 8(2)(b)(vi)]
Part C. Names requiring Central Government approval
17. *State whether the proposed name(s) contain such word or expression for which the previous approval of Central
Government is required.
□ Yes
□ No
(If yes, this form shall be treated as an application to the Central Govt. for such approval and shall be
dealt with accordingly)
Part D. Reservation of name for change of name by an existing Company
18. (a) *CIN of Company Pre-fill
(b) Global Location Number(GLN) of Company
19. (a) Name of Company
(b) Address of the registered office of the Company
(c) email ID of the company
20. (a) *State whether the change of name is due to direction received from the Central Government.
☑ Yes ☑ No (If yes, please attach a copy of such directions)
(b) *Whether the proposed name is in accordance with the rule 8(8) and specific direction of the Tribunal is
attached
(If 'Yes' selected, attach order of tribunal as required in Rule 8(8)
21.(a) *Whether the change in name requires change in object of the company
2 Yes 2 No
(b) Reasons for change in name (in case of yes above, mention proposed objects of the company

Attachments List of attachments (1) In case of change of name of an existing company, Attach a copy of Board resolution; (2) If change of name is due to direction received from the Central Government, then copy of such direction; Attach (3) In case the proposed name(s) are based on a registered trademark or is a subject matter of an application pending for registration under the Trade Marks Act, 1999, the Attach approval of the owner of the trademark or the applicant of such application for registration of Trademark; (4) Copy of Central Government's approval In case the proposed name contains such word(s) or expression(s) for Attach which the approval of Central Government is required,; Attach (5) Proof of relation; (6) In principle approval from the concerned regulator; Attach (7) NOC from the sole proprietor/partners/other associates; Attach (8) NOC from existing company, Attach (9) Copy of affidavit, in case proposed name including phrase Attach 'Electoral Trust' Attach (10) Resolution of unregistered companies in case of Chapter XXI (Part I) companies; Attach (11) Order of tribunal as required in Rule 8(8) (12) NOC from such other persons as required in rule 8(4) Attach (13) Optional attachment, if any. Attach Remove Attachment **Declaration** ☐ I am a Promoter (proposed first subscriber) to the Memorandum of Association) and I am also authorized by other proposed promoter(s) and first subscriber(s) to sign and submit this application. *I have gone through the provisions of The Companies Act, 2013, the rules thereunder and prescribed guidelines framed thereunder in respect of reservation of name, understood the meaning thereof and the proposed name(s) is /are in conformity thereof. *I have used the search facilities available on the portal of the Ministry of Corporate Affairs (MCA) for checking the resemblance of the proposed name(s) with the companies and Limited Liability partnerships (LLPs) respectively already registered or the names already approved. I have also used the search facility for checking the resemblances of the proposed name(s) with registered trademarks and trade mark subject of an application under The Trade Marks Act, 1999 and other relevant search for checking the resemblance of the proposed name(s) to satisfy myself with the compliance of the provisions of the Act for resemblance of name and Rules thereof. *The proposed name(s) is/are not in violation of the provisions of Emblems and Names (Prevention of Improper Use) Act, 1950 as amended from time to time. *The proposed name is not offensive to any section of people, e.g. proposed name does not contain profanity or words or phrases that are generally considered a slur against an ethnic group, religion, gender or heredity.

	The proposed name(s) is not such that its use by the company will constitute an offence under any law for the ime being in force.
	have complied with all the mandated requirements of the respective Act/regulator, such as IRDA, RBI, SEBI, MCA etc. (applicable only in case proposed name includes words like Insurance, Bank, Stock Exchange, Venture Capital, Asset Management, Nidhi, Mutual Fund, Finance, Investment, Leasing, Hire purchase etc. or any combination hereof).
	To the best of my knowledge and belief, the information given in this application and its attachments thereto is correct and complete, and nothing relevant to this form has been suppressed.
	have been authorized by the Board of Directors resolution Number Dated
	If undertake to be fully responsible for the consequences in case the name is subsequently found to be in contravention of the provisions of section 4(2) and section 4(4) of The Companies Act, 2013 and rules thereto and have also gone through and understood the provisions of section 4(5) (ii) (a) and (b) of The Companies Act, 2013 and rules thereunder and fully declare myself responsible for the consequences thereof.
	DSC BOX
*Directhe	or Income-tax PAN or passport number of the applicant or tor identification number of the director; or DIN or PAN of nanager or CEO or CFO; or Membership number of the pany Secretary
	Certificate by practicing professional reby certified that I have verified the above particulars (including attachment(s)) from the records maintained by plicant in respect of incorporation of
and	und them to be true and correct. I further certify that
	Ill required attachment(s) have been completely attached to this form.
	have used the search facility available on the portal of Ministry of Corporate Affairs (MCA) for checking the esemblance of the proposed name(s) with the companies and LLPs respectively already registered or the name already approved.
	he proposed name is not an undesirable name under the provisions of section 4(2) (b) (ii) of The Companies Act, 2013, rules prescribed and guidelines issued thereunder.
	Chartered accountant (in whole-time practice) or
	Cost accountant (in whole-time practice) or Company secretary (in whole-time practice) DSC BOX
	er associate or fellow O Associate O Fellow
ivien	ership number Certificate of practice number
iı f	ention is drawn to the provisions of sections 7(5) and 7(6) which, <i>inter-alia</i> , provides that furnishing of any false or orrect particulars of any information or suppression of any material information shall attract punishment for under section 447. Attention is also drawn to provisions of section 448 and 449 which provide for punishment false statement and punishment for false evidence respectively.

Modify Check Form	Prescrutiny	Submit
For office use only :	Affix filing detail	s
eForm Service request number (SRN)	eForm filing date	(DD/MM/YYYY)
Digital signature of the authorising officer		
This e-Form is hereby approved		
This e-Form is hereby rejected	Confirm Submission	
Date of signing	(DD/MM/YYYY)	
This eForm has been approved by the registrar	OR of companies through electronic mod	de and on the basis of statement of
correctness given by the applicant and certifica	[1] [[[[[[[[[[[[[[[[[[
Guidelines.		

FORM NO. INC.2



One Person Company-[Pursuant to section 3(1) and 7(1) of the Application for Incorporation

m languag	je o English o Hir	ndi			
er the inst	ruction kit for f	iling the form.			
*Ser	vice Request Nun	nber (SRN) of Form I	.N		Pre-Fill
(a) N	ame of the comp	any			
(b) Tuno o	f Company is				
(b) Type o (d) Categor	f Company is	(a)	(c) Class of Co Sub category	Прапу	
, ,	·	s (Radio Button)		al - N ot havin	g share canital
		on territory in which	_		g share capital
(a) Name	Of the state/office	The territory in which			
(h) Name	of the office of th	ne Registrar of Comp	anies in which the	company is to	he registered
(b) Name	or the office of th	Te Registral of Compa	anies in which the	company is to	be registered
	*Whathar tha	addrass for corrospo	ndonco will bo the	addrass of Dog	istered office of the Compan
□ Yes	□ No	address for correspon	ndence will be the	address of Reg	istered office of the Compan
		till the date registere	ed office of the con	nnanv is estahli	ished
*Line I					
Line II					
*City					
*State/Un	ion Territory			* Pin code	
*District					
		-			
ISO Count	ry code	<u></u>			
Country					
*Phone (w	ith STD/ISD code	e)	-		
Fax					
*email ID	of the company				
	<u> </u>				
	of the registered	office of the compar	ny from the date of	fincorporation	is
*Line I					
Line II					
*City					
*State/Un	ion Territory			* Pin code	
*District					
ISO Count	ry code				
Country					
*Phone (w	rith STD/ISD code	e)	-		
Fax T	•	<u> </u>			
	of the company				
*email ID	or the company				

Police station Name	
* Address Line I	
Line II	
* City	*
AND CONTRACTOR	
*Pin code	fabe Utility Comings Bill designing the address of
` '	f the Utility Services Bill depicting the address of d office (not older than two months)
*Capital stru	cture of the company, in case of company having share capital
•	apital of the company (in Rs.)
	equity shares Nominal amount per equity share
	nt of equity shares (in Rs.)
	preference shares Nominal amount per preference share
	nt of preference shares (in Rs.)
	apital of the company (in Rs.)
	· · · · · · · · · · · · · · · · · · ·
(i) Number of	
	nt of equity shares (in Rs.)
• •	preference shares Nominal amount per preference share
Total amou	nt of preference shares (in Rs.)
escription of the r	
Pescription of the r	
Particulars of *Whether the pro	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No
Particulars of *Whether the pro	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN)
Particulars of *Whether the pro	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No
Particulars of *Whether the pro Director Identifica *Income-tax perr	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN)
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN)
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN)
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Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN) Verify De
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Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Gender □ Male	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN) Verify De e o Mother's Name o Spouse's name
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN) Verify De e o Mother's Name o Spouse's name Female Transgender *Date of Birth
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Gender Male *Nationality	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN) Pre-Fill Verify De e o Mother's Name o Spouse's name Female - Transgender *Date of Birth District & State)
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Gender _ Male *Nationality *Place of Birth (D	Promoter (first subscriber to the MOA) Important shall be the sole director of the company o Yes o No Section number(DIN) Mananent account number (PAN) Pre-Fill Verify De Pre-Fill Verify De Pre-Fill Verify De Pre-Fill Pre-Fill Verify De Pre-Fill Verify De Pre-Fill Pre-Fill Verify De Pre-Fill Pre-Fi
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Nationality *Place of Birth (D *Educational qual *Occupation Type Area of occupatio	Promoter (first subscriber to the MOA) Immoter shall be the sole director of the company o Yes o No Ination number(DIN) Immanent account number (PAN) Pre-Fill Werifv De Pre-Fill Verifv De Pre-Fill Verifv De Pre-Fill Verifv De O Mother's Name o Spouse's name Female Transgender *Date of Birth District & State) Ilification O Self-employed O Professional O Homemaker O Student O Serviceman on
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Quality *Place of Birth (D *Educational qual *Occupation Type Area of occupatio Permanent Addre	Promoter (first subscriber to the MOA) Immoter shall be the sole director of the company o Yes o No Ination number(DIN) Immanent account number (PAN) Pre-Fill Werifv De Pre-Fill Verifv De Pre-Fill Verifv De Pre-Fill Verifv De O Mother's Name o Spouse's name Female Transgender *Date of Birth District & State) Ilification O Self-employed O Professional O Homemaker O Student O Serviceman on
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Qender _ Male *Nationality *Place of Birth (D *Educational qual *Occupation Type Area of occupatio Permanent Addre *Line I	Promoter (first subscriber to the MOA) Immoter shall be the sole director of the company o Yes o No Ination number(DIN) Immanent account number (PAN) Pre-Fill Werifv De Pre-Fill Verifv De Pre-Fill Verifv De Pre-Fill Verifv De O Mother's Name o Spouse's name Female Transgender *Date of Birth District & State) Ilification O Self-employed O Professional O Homemaker O Student O Serviceman on
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Nationality *Place of Birth (D *Educational qual *Occupation Type Area of occupatio Permanent Addre *Line II	Promoter (first subscriber to the MOA) Immoter shall be the sole director of the company o Yes o No Ination number(DIN) Immanent account number (PAN) Pre-Fill Werifv De Pre-Fill Verifv De Pre-Fill Verifv De Pre-Fill Verifv De O Mother's Name o Spouse's name Female Transgender *Date of Birth District & State) Ilification O Self-employed O Professional O Homemaker O Student O Serviceman on
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Nationality *Place of Birth (D *Educational qual *Occupation Type Area of occupatio Permanent Addre *Line II Line II *City	Promoter (first subscriber to the MOA) moter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN) Pre-Fill Verify De e o Mother's Name o Spouse's name Female Transgender * Date of Birth District & State) lification e O Self-employed O Professional O Homemaker O Student O Serviceman on Less
Particulars of *Whether the pro Director Identifica *Income-tax perr *First Name Middle Name *Surname Family Name * o Father's Name *Nationality *Place of Birth (D *Educational qual *Occupation Type Area of occupatio Permanent Addre *Line II	Promoter (first subscriber to the MOA) smoter shall be the sole director of the company o Yes o No ation number(DIN) manent account number (PAN) Pre-Fill Verify De e o Mother's Name o Spouse's name Female Transgender *Date of Birth District & State) lification e O Self-employed O Professional O Homemaker O Student O Serviceman on the service of the company of Yes o No Verify De *Pin code

Mobile (with country code) -						
Fax						
*email id						
*Whether present address is same as the permanent ad	*Whether present address is same as the permanent address					
Present Address						
*Line I						
Line II						
*City	WD:					
* State/ Union Territory	*Pin code					
*ISO Country code						
Country						
*Phone (with STD/ISD code)						
Mobile (with country code)						
Fax						
email id *Duration of stay at present address ye	month(c)					
	ear(s) month(s)					
If Duration of stay at present address is less than one y	ear then address of previous residence					
*Proof of identity						
*Residential Proof						
Residential F1001						
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8. *(a) Nomination						
I (Small description box), the subscriber to the memora	ndum of association of (Small description box) do hereby					
	otion box) who shall become the member of the company lare that the nominee is eligible for nomination within the					
meaning of Rule 3 of the Companies (Incorporation and						
(b) Particulars of the Nominee						
Director Identification number(DIN)	D. E'II					
*Income-tax permanent account number (PAN)	Pre-Fill					
*First Name	Verify Details					
Middle Name						
*Surname						
Family Name						
* o Father's Name o Mother's Name o Spouse's na	ume					
or datici 3 waitie o Piodrici 5 waitie o Spouse's lie						

*G	ender 🗆 Male_ 🗆 F	emale - Transgender							
	ationality ace of Birth (Distr	*Date of Birth cit & State)							
*E0	ducational qualifica	ation							
	*Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation								
	Permanent Address								
	*Line I								
Lir	Line II								
*Ci	*City								
*St	*State/ Union Territory *Pin code								
ISC	ISO Country code								
Co	Country								
*Pl	none (with STD/IS	D code) -							
Мо	bile (with country	code) -							
Fax	<								
*er	mail id								
*W	*Whether present address is same as the permanent address \(\) Yes \(\) No								
	Present Address								
*Li	*Line I								
Lir	ne II								
*Ci									
	State/ Union Territ	ory *Pin code							
*IS	60 Country code								
Co	ountry								
	none (with STD/IS	D code) -							
	Mobile (with country code)								
	Fax								
em	ail id								
		present address year(s) month(s)							
	*Duration of stay at present address								
	in Duration of Stay at present address is less than one year then address of previous residence								
*Dr	roof of identity								
	loor or identity								
*R6	esidential Proof								
(b) N	If yes, entrenched Jumber of Articles	ther the Articles are entrenched or not							
	etails of Articles t	o which provisions of entrenchment shall be applicable							
Sr.	Article	Content							
No.	Number								
10. Particulars of payment of stamp duty									

(i) Details of stamp				**************************************			
Type of docu Particula		Form 1NC.2	-	Memorandum of association	Arti	icles of association	
Amount of stamp duty			C 20 70 70 70 7 2 4 10 10 10 10 10 10 10 10 10 10 10 10 10	1		1	
(ii) Provide details							
ype of document/ Particulars	Form 1	Memorandum of association		Articles of association		Others	
otal amount of stamp ity paid (in Rs.)			7		╗		╗
ode of payment of amp duty							
ame of vendor or easury or Authority any other competent gency authorised to illect stamp duty or to ill stamp papers or to nboss the documents or dispense stamp uchers on behalf of the overnment							
erial number of nbossing or stamps or amp paper or treasury allan number							
gistration number of ndor		3.7					
ate of purchase of amps or stamp paper or syment of stamp duty DD/MM/YYYY)]				
ace of purchase of amps or stamp paper payment of stamp duty	3						
Attachments 1. *Memorandum of Association 2. *Articles of Association 3. *Proof of identity of the member and the nominee 4. *Residential proof of the member and the nominee 5. *Copy of PAN card of member and nominee 6. *Consent of Nominee in form INC.3 7. *Affidavit from the subscriber and first Director to the memorandum in Form No. INC.9 8. List of all the companies (specifying their CIN) having the same registered office address, if any; 9. Specimen Signature in Form INC.10 10. Entrenched Articles of Association 11. Proof of Registered Office address (Conveyance/ Lease deed/Rent Agreement etc. along with rent receipts) 12. Copies of the utility bills as mentioned above							
(not older than two months) Attach							
13. Proof that the Company is permitted to use the address as the registered office of the Company if the same is owned							
by ally other 6	entity/Person (not tal	cen on lease by COII	ıhqij	y <i>J</i>	-	Attach	

14. Consent from Director										
15. Optional Attachment, if any	Attach									
Declaration										
I										
, a person named in the articles as subscriber as well as the sole the requirements of the Companies Act, 2013 and the rules ma	de thereunder in respect to the registration of the									
company and matters precedent or incidental thereto have been that:	·									
 Whatever is stated in this form and in the attachment information material to the subject matter of this form ha original records maintained by the promoters subscribing Association. 	s been suppressed or concealed and is as per the to the Memorandum of Association and Articles of									
 All the required attachments have been completely, correctly and legibly attached to this form. I have not been convicted of any offence in connection with the promotion, formation or management of any 										
company during the preceding five years; 4. I have not been found guilty of any fraud or misfeasance or of any breach of duty to any company under this Act										
or any previous company law during the preceding five years; 5. I am not a director/promoter of any company which is defaulting in filing of financial statements and annual return and for any company which has been declared as vanishing company, and										
return and/or any company which has been declared as vanishing company; and 6. I have also understood the provisions of sections 7(5), 7(6), 447, 448 and 449 of the Companies Act, 2013 and understand that I shall be liable for punishment in terms of section 7(5) and 7(6) of the Companies Act, 2013 in case of furnishing of false or incorrect information or for suppression of material information for registration of										
captioned company. Declaration										
I										
all the requirements of the Companies Act, 2013 and the rules made thereunder in respect to the registration of the company and matters precedent or incidental thereto have been complied with. I am authorized by the promoter subscribing to the Memorandum of Association and Articles of Association and the first director(s) to give this declaration and to sign and submit this Form. It is further declared and verified that 1. Whatever is stated in this form and in the attachments thereto is true, correct and complete and no information material to the subject matter of this form has been suppressed or concealed and is as per the original records maintained by the promoters subscribing to the Memorandum of Association and Articles of Association. 2. All the required attachments have been completely, correctly and legibly attached to this form.										
*To be digitally signed by										
*	DSC BOX									
*DIN of the director or DIN or Income tax PAN of										
the manager or Membership number of the company secretary										
Note: Attention is drawn to provisions of section 7(5 furnishing of any false or incorrect particulars of any										
information shall attract punishment for fraud under										
provisions of sections 448 and 449 which provide for pur										
for false evidence respectively.										
ck form of Sand Preparitry (1.5 A F 5.5) Preparitry (1.5 F 5.5)	Frequenting Check Form									
For office use only: For office use only: Fig. allows as										
	te reque ន្ទក់លាស់ទៅស្រីបើ អ៊ុន eForm Gervice reque នាក់លេសទេស ប៊ីកីម៉ាប់									
This <u>e-Form is</u> hereby registered This e-Form is hereby registered Him. ii build. Hic s signas signature of the sumonising omos p opular signature of the authors on title D igitial sign	ation of the multipriving office state of the surface of the surface of									

FORM NO. INC.3

And the second

One Person Company -

[Pursuant to section 3(1) of the Companies Act, 2013 and pursuant to Rule 4 (2), (3), (4), (5) & (6) of the Companies (Incorporation and Incidental) Rules, 2014]

Nominee Consent Form Form language o English o Hindi Refer the instruction kit for filing the form. 1. (a) *SRN of Form INC.1 (In case of new company) or Pre-fill Corporate identity number (CIN) (In case of existing company) (b) Global location number (GLN) 2. (a) Name of the One Person Company (b) Address of registered office of the company *Consent I (Small description box) hereby give my consent to become the member of (Small description box), in the event of death of (Small description box) subscriber/member of the company or his incapacity to contract. Particulars of the nominee Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender

Male

Female

Transgender *Date of Birth *Nationality *Place of Birth (District & State) *Educational qualification O Self-employed O Professional O Homemaker O Student O Serviceman *Occupation Type Area of occupation Permanent Address *Line I Line II *City *State/ Union Territory *Pin code ISO Country code Country *Phone (with STD/ISD code) Mobile (with country code) Fax *email id *Whether present address is same as the permanent address Present Address *Line I

	Line II		
	*City]
	* State/ Union Terr	ritory *Pin code]
	*ISO Country code	:	
	Country		
	*Phone (with STD/	TSD code) -	
	Mobile (with countr	ry code) -	
	Fax		
	email id		¬
	*Duration of stay a	at present address year(s) month(s)	-
	•	at present address is less than one year then address of previous residence	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	$\neg \mid$
	*Proof of identity		_
	Proof of Identity		
	*Residential Proof		- l
	residential 11001		╛╽
		Declaration	
		nat I am an Indian citizen and resident in India and I have not been convicted	
		th the promotion, formation or management of any company or LLP and have n	
		I or misfeasance or of any breach of duty to any company under this Act or any p in the last five years. I further declare that I am not a nominee in any other One	
		omply with the eligibility criteria specified in Rule 3(3) within the prescribed p	
unders	tand that the pers	son nominating me may withdraw my nomination without my consent.	
To be p	hysically signed b	<u>ny</u>	
Nomine			
*Date			
*Place			
Enclos	ures Copy of PAN card		
	Proof of identity		
3.	Residential Proof		
		Modify Check form	
		to provisions of section 7(5) and 7(6) which, inter-alia, provides that furnishing	
		culars of any information or suppression of any material information shall nder section 447. Attention is also drawn to provisions of section 448 and 449	
		for false statement and punishment for false evidence respectively.	
	_		
		User is required to fill the form electronically and duly signed copy sho	ould be
attach	ea with e-Form	INC.2, INC.4 or INC.6, as the case may be.	

Further notice is given that *



One Person Company – Change in Member/ Nominee

[Pursuant to section 3(1) of the Companies Act, 2013 and Rule 4(4), (5) & (6) of the Companies (Incorporation and Incidental) Rules 2014]

	m language o English o Hindi er the instruction kit for filing the form.
1.	*This form is for
	□ Notice of withdrawal of consent by the nominee □ Intimation about change in the name of the nominee □ Intimation of cessation of member
2.	*(a) Corporate identity number(CIN) of company
	(b) Global Location Number of the company
3.	(a) Name of One Person Company
	(b) Address of registered office of the company
	(c) email Id of the company
4.	Notice of withdrawal of consent
	Notice is hereby given that
	who was nominated as the nominee of has withdrawn his/her consent vide his/her notice dated * a copy of which is attached herewith.
5.	Intimation about change in nomination
	Notice is hereby given that, member of
	has nominated *
	vide intimation dated * as his/her nominee in place of
	who shall become the member of the company in the event of his/her death or his/her incapacity to contract. He/she declares that the nominee is eligible for nomination within the meaning of Rule 3
	of the Companies (Incorporation and Incidental) Rules 2014.
6.	Intimation of cessation of member
	(a)
	has ceased to be the member of
	w. e. f. * due to *{Drop down - Values: Death of the member, Incapacity of member to contract,
	change in ownership} and *
	*(Drop down: his/her nominee, the transferee) has become the sole member of the above mentioned
	company.
	(b) *Whether the nominee is same (In case of change in ownership) o Yes o No
7.	Intimation about the change of nominee

*(Drop down - values: member, new member) Of
has nominated *
as his nominee w. e. f. * who shall become the member of the company in the event of
his/her death or incapacity to contract. He/she declares that the nominee is eligible for nomination
within the meaning of Rule 3 of the Companies (Incorporation and Incidental) Rules 2014.
8. Particulars of the New Nominee
Director Identification growth or (DIN)
*Income-tax permanent account number (PAN)
*First Name
Middle Name
*Surname
Family Name
* o Father's Name o Mother's Name o Spouse's name
The state of the s
*Gender - Male - Female - Transgender
*Nationality *Date of Birth
*Place of Birth (District & State)
*Educational qualification
*Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman
Area of occupation
Permanent Address
*Line I
Line II
*City *Pin code *Pin code
ISO Country code
Country
*Phone (with STD/ISD code) -
Mobile (with country code)
Fax
*email id
*Whether present address is same as the permanent address \(\text{Yes} \) \(\text{No} \)
Present Address
*Line I
Line II
*City
* State/ Union Territory *Pin code
*ISO Country code
Country
*Phone (with STD/ISD code)
Mobile (with country code) -
Fax
email id
*Duration of stay at present address year(s) month(s)
If Duration of stay at present address is less than one year then address of previous residence
*Proof of identity

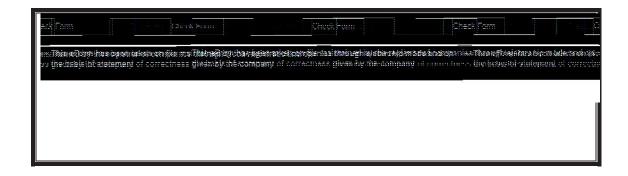
Director Identification number(DIN) *Income-tax permanent account number (PAN) *Surname *Orather Name *Orather Name
*Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender o Male o Female o Transgender *Nationality *Date of Birth Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation Permanent Address *Line I Line II *City *State/ Union Territory *Pin code Country *Phone (with STD/ISD code) Mobile (with country code) Fax *email Id *City *State/ Union Territory *Phone (with STD/ISD code) *Present Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *Present Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *Present Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *TSO Country code *State/ Union Territory *Phone (with STD/ISD code) *TSO Country code *TSO Country
*Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender o Male o Female o Transgender *Nationality *Date of Birth Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation Permanent Address *Line I Line II *City *State/ Union Territory *Pin code Country *Phone (with STD/ISD code) Mobile (with country code) Fax *email Id *City *State/ Union Territory *Phone (with STD/ISD code) *Present Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *Present Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *Present Address *Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) *TSO Country code *State/ Union Territory *Phone (with STD/ISD code) *TSO Country code *TSO Country
*First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender o Male o Female o Transgender *Nationality
Surname Surname
*Surname Family Name * o Father's Name o Mother's Name o Spouse's name "Gender D Male o Female o Transgender *Nationality Date of Birth Date of Birth Place of Birth Date of Birth District & State) *Gender D Male o Female o Transgender *Nationality Date of Birth Date
* o Father's Name o Mother's Name o Spouse's name * Gender
* O Father's Name o Mother's Name o Spouse's name *Gender o Male o Female or Transgender *Nationality
*Gender Male Female Transgender *Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type Self-employed Professional Homemaker Ostudent Oserviceman Area of occupation Permanent Address *Line I Line II *City *Plin code Country *Phone (with STD/ISD code) - *Whether present address is same as the permanent address Yes No Present Address *Line I Line II *Whether present address is same as the permanent address Yes No Present Address *Line I Line II *City *State/ Union Territory *Pin code *Iso Country code Country *State/ Union Territory *Pin code *Iso Country code *Country *State/ Union Territory *Pin code *Iso Country code *Country *City *State/ Union Territory *Pin code *Iso Country code *Country *City *State/ Union Territory *Pin code *Iso Country code *Country *City *State/ Union Territory *Pin code *Iso Country code *Country *Pin code *Iso Country code *Country *City *State/ Union Territory *Pin code *Iso Country code *Country *City *State/ Union Territory *Pin code *Iso Country *Iso Country code *Country *Pin code *Iso Country *Iso Country code *Country *Pin code *Iso Country *Iso Country code *Country *Pin code *Iso Country *Iso Country *Iso Country *Pin code *Iso Country *Iso Country *Pin code *Iso Country *Iso C
*Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type
*Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type
*Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation Permanent Address *Line I Line II Line
*Educational qualification *Occupation Type
*Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation Permanent Address *Line I Line II
Area of occupation Permanent Address *Line I Line II *City *State/ Union Territory *Pin code Country *Phone (with STD/ISD code) *Whether present address is same as the permanent address 'Yes No Present Address *Line I Line II *City *State/ Union Territory *Pin code *TSO Country code Country *Phone (with STD/ISD code) *TSO Country code Country *Phone (with STD/ISD code) *TSO Country code Country *Phone (with STD/ISD code) *Pin code *TSO Country code Country *Pin code *TSO Country code Country *Pin code *TSO Country code Country *Pin code *TSO Country code *TSO Country code Country *Pin code *TSO Country code *TSO Co
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*Line I Line II *City *State/ Union Territory *Phone (with STD/ISD code) Fax *email id *Whether present address is same as the permanent address
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*State/ Union Territory
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*Phone (with STD/ISD code)
Mobile (with country code) Fax *email id *Whether present address is same as the permanent address
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*Whether present address is same as the permanent address
Present Address *Line I Line II *City * State/ Union Territory *ISO Country code Country *Phone (with STD/ISD code) Mobile (with country code) Fax email id *Duration of stay at present address year(s) month(s) If Duration of stay at present address is less than one year then address of previous residence
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email id *Duration of stay at present address year(s) month(s) If Duration of stay at present address is less than one year then address of previous residence
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*Duration of stay at present address year(s) month(s) If Duration of stay at present address is less than one year then address of previous residence
If Duration of stay at present address is less than one year then address of previous residence
*Proof of identity

*Residential Proof	
Attachment(s) (1) *Consent of the nominee in Form No. INC.3 (2) *Copy of PAN card of the new nominee and/or new member (3) *Proof of identity of the new nominee and/or new member (4) *Residential proof of the new nominee and/or new member (5) Notice of withdrawal of consent filed by the nominee (6) Copy of intimation given by member for change in nominee (7) Proof of Cessation of member (8) Optional attachment(s) - if any.	Attach
*To be digitally signed by member *Income-tax PAN or Director identification number of the member To be digitally signed by Director Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of company secretary	
Note: Attention is drawn to provisions of sections 448 and 449 false statement and punishment for false evidence respectively. The statement are a section of the section	Check Form III

One person company-

Intimation of exceeding [Pursuant to Rule 6(4) of the Companies threshold (Incorporation and Incidental) Rules, 20147 Form language o English o Hindi Refer the instruction kit for filing the form. 1. (a) *Corporate identity number (CIN) of the company Pre-Fill (b) Global location number (GLN) 2. (a) Name of the company (b) Address of registered office of the company (c) email Id of the company 3. Date of incorporation of the one person company 4. (a) *Which of the following has exceeded beyond the threshold limit o Paid up share capital o Average annual turnover (b) *Amount exceeding beyond the threshold limit (c) *Date on which the paid up share capital or average annual turnover of the company, as the case may be, has exceeded the threshold li 5. the (drop down) (values: director/Manager or Company Secretary or CEO or CFO) of the one person company hereby affirm that: As the paid up share capital of the captioned company has exceeded fifty lakh rupees or its average annual turnover during the relevant period has exceeded two crore rupees, the company has ceased to be a one person company; and consequently the company is required to be converted into a private company or public company, as the case may be. Necessary steps are being taken for giving effect to such conversion in accordance with the provisions of section 18 read with section 122 of the Act; Attachments 1. *Copy of board resolution authorizing giving of notice; Attach 2. *Copy of the duly attested latest financial statement; Attach 3. Certificate from a Chartered Accountant in practice for calculation of the average annual turnover during the relevant period in case Attach of conversion is on the basis of such criteria; Attach 4. Optional attachment(s), if any. **Declaration** , declare that all the requirements of the Companies Act, 2013 and the rules made thereunder have been complied with. To the best of my knowledge and belief, the information given in this application and its attachments is correct and complete. *To be digitally signed by Designation **DSC BOX** *Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the Company Secretary

Note: Attention is drawn provisions of Section 448 and 449 which provide for punishment for false statement and punishment for false evidence respectively.



8. *Existing number of directors in the company



One Person Company -

Application for Conversion [Pursuant to section 18 of the Companies Act, 2013 and Rule 7(4) the Companies (Incorporation and Incidental) Rules, 2014] Form language o English o Hindi Refer the instruction kit for filing the form. 1. *Application for o Conversion of OPC into private company o Conversion of OPC into public company o Conversion of Private company into OPC Pre-Fill 2. (a) *Corporate identity number (CIN) of the company (b) Global location number (GLN) 3. (a) Name of the company (b) Category (c) Sub-category of the company (d) Address of Registered office of the company (e) Date of incorporation of the company (f) email ID of the company (g) Whether company is having share capital or not 4. *Name of the company at the time of incorporation (to be displayed in the certificate) Part A 5. (a) *Whether the conversion is mandatory by provisions of the Companies Act, 2013 o Yes o No (b) *Mention which of the following has exceeded the threshold limit o Paid up share capital o Average annual turnover (c) *Mention the SRN of form INC.5 6. *(a) Date of exceeding the threshold limit *(b) Amount so exceeded the threshold limit *(c) Specify the relevant period 7. I the director of the one person company hereby affirm that:-As the paid up share capital of the captioned company has exceeded fifty lakh rupees or its average annual turnover during the relevant period has exceeded two crore rupees, the company has ceased to be a one person company; and consequently the company is required to be converted into a private company or public company, as the case may be; 2. Necessary steps are being taken for giving effect to such conversion in accordance with the provisions of section 18 read with section 122 of the Act. Part B

	(Number of directors shall be minimum 2 in case of conversion into private company or 3 in case of conversion into public company)	
9.	Particulars of special resolution	
	(a) *SRN of Form MGT.14	
	(b) *Date of filing Form MGT.14	
	(c) *Date of passing the special resolution	
10.	I. Capital structure of the company	
	(a) Authorized capital of the company (in Rs.)	
	*(i) Number of equity shares Nominal amount per equity share	
	Total amount of equity shares (in Rs.)	
	*(ii) Number of preference shares Nominal amount per preference share	
	Total amount of preference shares (in Rs.)	
	* (b) Paid up capital of the company (in Rs.)	
	(i) Number of equity shares Nominal amount per equity share	
	Total amount of equity shares (in Rs.)	
	(ii) Number of preference shares Nominal amount per preference share	
	Total amount of preference shares (in Rs.)	
	II. Number of members	
	(a) Maximum number of members	
	(b) Maximum number of members excluding proposed employees	
	(c) Number of members	
	(d) Number of members excluding proposed employee(s)	
PAI	RT C	
11.	Particulars of the person who will be sole member of the OPC subsequent upon	
	conversion	
	conversion	
	Director Identification number(DIN)	
	Director Identification number(DIN)	
	Director Identification number(DIN) *Income-tax permanent account number (PAN)	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) Verify Details	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Varify Details	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender o Male o Female o Transgender *Nationality *Date of Birth	
	Director Identification number (DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender Male Female Transgender *Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender Male Female Transgender *Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation	
	Director Identification number (DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender Male Female Transgender *Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender o Male o Female o Transgender *Nationality of Birth or Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation Permanent Address	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname *Surname * o Father's Name o Mother's Name o Spouse's name *Gender	
	Director Identification number (DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender Male Female Transgender *Nationality *Date of Birth *Place of Birth (District & State) *Educational qualification *Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation Permanent Address *Line I Line II *City	
	Director Identification number(DIN) *Income-tax permanent account number (PAN) *First Name Middle Name *Surname Family Name * o Father's Name o Mother's Name o Spouse's name *Gender o Male o Female o Transgender *Nationality	

	Mobile (with country code) -	
	Fax	
	*email id	
	*Whether present address is same as the permanent address	
	Present Address	
	*Line I	
	Line II	
	*City	
	* State/ Union Territory *Pin code	
	*ISO Country code	
	Country	
	*Phone (with STD/ISD code)	
	Mobile (with country code)	
	Fax	
	email id	
	*Duration of stay at present address	
	If Duration of stay at present address is less than one year then address of previous residence	
	*Proof of identity	
	*Residential Proof	
L		
12.	Nomination	
	I (Small description box), the member of * (Small description box) do hereby nominate (Small description	
	box) who shall become the member of the company in the event of my death or incapacity to contract. I	
	declare that the nominee is eligible for nomination within the meaning of Rule 3 of the Companies Rules, 2014.	
•	2014.	
13.	Particulars of the person who will be nominee of the sole member subsequent	
	upon conversion	
	Director Identification number(DIN)	
	*Income-tax permanent account number (PAN)	
	*First Name	
	Middle Name	
	*Surname	
	Family Name	
	* o Father's Name o Mother's Name o Spouse's name	
	*Gender 🗆 Male 🗆 Female 🗆 Transgender	
	*Nationality *Date of Birth	
	*Place of Birth (District & State)	
	*Educational qualification	
	*Occupation Type O Self-employed O Professional O Homemaker O Student O Serviceman Area of occupation	
	Permanent Address	
	*Line I	
	Line II	
	*City	
	*State/ Union Territory *Pin code	

	ISO Country code						
	Country						
	*Phone (with STD/ISD code)						
	Mobile (with country code)						
	Fax						
	*email id						
	*Whether present address is same as the permanent address \(\) Yes \(\) No						
	Present Address						
	*Line I						
	Line II						
	*City						
	*ISO Country code						
	Country						
	*Phone (with STD/ISD code)						
	Mobile (with country code)						
	Fax						
	email id						
	*Duration of stay at present address year(s) month(s)						
	If Duration of stay at present address is less than one year then address of previous residence						
	Duration of stay at present address is less than one year their address of previous residence						
	*Proof of identity						
	Proof of Identity						
	*Residential Proof						
	Nesidential 17001						
L							
	chments Altered Memorandum of association Attach						
	Altered Articles of association						
	Copy of the duly attested latest financial statement.						
	Copy of board resolution authorizing giving of notice; Attach						
	Certificate from a Chartered Accountant in practice for calculation of Attach the average annual turnover during the relevant period in case of						
	conversion is on the basis of such criteria.						
	Affidavit confirming that all the members of the company have Attach						
	given their consent for conversion, the paid up capital of the company is Rs 50 lakhs or less and turnover is less than						
	Rs 2 crores in the immediately preceding year.						
7. (. Copy of minutes, list of creditors and list of members.						
	. Copy of NOC of every creditors with the application for Conversion.						
	Consent of the nominee in Form No. INC.3 Copy of PAN card of the nominee and member Attach						
	1. Proof of identity of the nominee and member Attach						
	2. Residential proof of the nominee and member 2. Optional attachment(s) if any						
13. (Optional attachment(s) - if any. Attach						
	Danlaustian						
[*	Declaration						
	La * (<i>Drop down</i>) { Values: Director/Manager/Company Secretary /CEO/CFO} of the company declare						
th	at all the requirements of the Companies Act, 2013 and the rules made thereunder in respect to the						
CO							
	nversion of the company and matters precedent or incidental thereto have been complied with. I am thorized by the board of directors to give this declaration and to sign and submit this Form. It is						
au fu	nversion of the company and matters precedent or incidental thereto have been complied with. I am thorized by the board of directors to give this declaration and to sign and submit this Form. It is ther declared and verified that *Whatever is stated in this form and in the attachments thereto is true, correct and complete and no						

the original records ma Articles of Association.	intained by the pr	omoters subscrib	ing to the Memoran	dum of Associa	tion and
☐ No objection certificate	has been received	d from the memb	ers and creditors a	llowina conversi	on from
_ private company into OF	C.			-	
\square *All the required attachi	ments have been o	completely, correc	tly and legibly attac	hed to this form	
*To be digitally signed	by				
*Designation			DSC BOX		
*Director identification nu DIN or PAN of the manage		,			
number of the Company S					
To be digitally signed by	/	DSC BOX			
Member (In case of conve	rsion of OPC)				
PAN or DIN of member					
Note: Attention is drawn				vide for punis	hment for
false statement and punis					
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(y) Date of signing (commonwey)	Dese of signing	(HRWWAAAA) (September 1997)	WHEN (DE/MM/YYY)	() Delical arguing	(DD/MM/Y/Y
			9.		

II. *Details of number of members



[Pursuant to Section 7(1) of the Companies Act, 2013 and pursuant to Rule 10, 12, 14 and 15 of the Companies (Incorporation and Incidental) Rules 20141 Application for Incorporation of Company (Other than OPC)

Incidental) Rules 2014] Form language o English o Hindi Refer the instruction kit for filing the form. *Service Request Number (SRN) of Form INC.1 Pre-Fill 1. 2. (a) Name of the com (b) Type of Company is (c) Class of Company (d) Category (e) Sub category (f) Section 8 license number *(g) Company is O Having share capital O Not having share capital (a) Name of the state/Union territory in which the company is to be registered (b) Name of the office of the Registrar of Companies in which the company is to be registered (c) *Whether the address for correspondence will be the address of Registered office of the Company o Yes (d) Address for correspondence till the registered office of the company is established *Line I Line II *City *State/Union Territory *District *Pin code ISO Country code Country *Phone (With STD/ISD code) *email ID of the company I. *Capital structure of the company (a) Authorized capital of the company (in Rs.) (i) Number of equity shares Nominal amount per equity share Total amount of equity shares (in Rs.) (ii) Number of preference shares Nominal amount per preference share Total amount of preference shares (in Rs.) (b) Subscribed capital of the company (in Rs.) (i) Number of equity shares \[\[\] Nominal amount per equity share [Total amount of equity shares (in Rs.) (ii) Number of preference shares Nominal amount per preference share Total amount of preference shares (in Rs.)

	(a) Enter the maximum number of members
	(b) Maximum number of members excluding proposed employees
	(c) Number of members
	(d) Number of members excluding proposed employee(s)
5.	*Main division of industrial activity of the company
٥.	Description of the main division
6.	*(a) Whether the proposed company shall be conducting any non – banking financial and investment
	(NBFI) activities within the meaning of section 45-I of the Reserve Bank of India Act, 1934 o Yes o No
	(b) If yes, please enter the date on which in principle approval was granted to it by the Reserve Bank of
	India or other concerned regulatory authority
7.	*Enter the number of promoters (first subscribers to the Memorandum of Association (MOA
	Particulars of Promoters (first subscribers to the MOA)
	*Category
	* Director Identification number(DIN) or Income –tax permanent account number (Income – tax PAN) or passport number or corporate identity
	number(CIN) Or foreign company registration number(FCRN) or any other registration number Verify Details
	*First Name
	Middle Name
	*Surname
	Family Name
	*o Father's Name o Mother's Name o Spouse's name
	*Nationality *Date of Birth
	*Gender (Radio button)
	*Place of Birth (District & State)
	*Occupation type O Self Employed O Professional O Homemaker O Student O Serviceman
	*Area of Occupation
	*Educational qualification
	*Name of the entity
	*Income tax permanent Account Number (PAN) Permanent Address/Registered address/Principal place of business
	*Line I
	*City
	*State /Union Territory *Pin code
	*ISO Country code
	Country
	*Phone (With STD/ISD code) -
	Mobile
	Fax
	*email id
	*Whether present address is same as the permanent address
	Present Address
	*Line I

Line II	
*City	
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*Duration of stay at present address Years Months	Promoter Promoter Promoter
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* Particulars of authorised person a) Name of the authorised pe	
b) o Father's Name o Mother's Name o Spouse's name	
b) 6 radici s Name 6 Plodici s Name 6 Spoase's name	
c) Gender o Male o Female o Transgender	
c) Gender o Male o Female o Transgender d) Nationality	٦
f) Phone (With STD/ISD code)	_
q) email ID	
g) email 10	
(a) *Whether the Articles are entrenched or not o Yes o No	
(If yes, entrenched Articles should be annexed thereto)	
(b) Number of Articles to which provisions of entrenchment shall be applicable	
Details of Articles to which provisions of entrenchment shall be applicable	
Sr. Article Content	
No. Number	
<u> </u>	

Type of docum Particulars		Form INC.7	Memorandum of association	Articles of association
Amount of stamp duty to	be paid (in Rs.)			
(ii) Provide details of	JL of stamp duty already paid			
Type of document/	Form INC.7	Memorandum of	Articles of	Others
Particulars		association	association	
Total amount of stamp duty paid (in Rs.)				
Mode of payment of stamp duty				
Name of vendor or Treasury or Authority orany other competent agency authorised to collect stamp duty or to sell stamp papers or to emboss the documents or to dispense stamp vouchers on behalf of the Government				
Serial number of embossing or stamps or stamp paper or treasury challan number				
Registration number of vendor				
Date of purchase of stamps or stamp paper or payment of stamp duty (DD/MMYYYYY)				
Place of purchase of stamps or stamp paper or payment of stamp duty				
*Proof of residential Specimen Signature Proof of identity Entrenched Articles Copy of In-principle NOC in case there is Proof of nationality (PAN card (in case of Copy of certificate o	on No. INC.8 of the subscriber to address in Form INC.10 of association approval granted by change in the pron (in case the subscribe Indian national) f incorporation of the onsent by all the pa	o the memorandum in y RBI or any concerne noters (first subscribe per is a foreign nation e foreign body corpor rtners or board resolu	Form No. INC.9 A A A A A A A A A A A A A	Attac Attac fice address Attac
		Declaration		
Susall danswinking (bass)	a narcan namad ir		Prop down) (Values: D	irector/Manager/Company

information material to the subject matter of this form has been suppressed or concealed and is as original records maintained by the promoters subscribing to the Memorandum of Association and A Association.	
2. All the required attachments have been completely and legibly attached to this form;	
3. * (Small description box), a/an * (Drop down) {Values: Chartered Accountant/ Company Secretar	
Accountant/ Advocate} having Membership number * and/or certificate of practice num	ber
has been engaged to give declaration under section 7(1) (b) and such declaration is attached.	
To be digitally signed by	BOX
*Decignation	DOM
Designation Dron down (values: Director, Manager, Company Secretary)	
DIN of the director; or DIN or Income tax PAN of the manager or Membership number of the company secretary	
Note: Attention is drawn to provisions of section 7(5) and 7(6) which, <i>inter-alia</i> , provides that furni false or incorrect particulars of any information or suppression of any material information shall attract for fraud under Section 447. Attention is also drawn to provisions of section 448 and 449 which punishment for false statement and punishment for false evidence respectively.	punishment
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License under section 8

Application for grant of

[Pursuant to 8(1) and 8(5) of the Companies Act, 2013 and Rule 19 & 20 of the Companies (Incorporation and Incidental) Rules, 2014]

Form language O English o Hindi Refer the instruction kit for filing the form. 10. *Application for Grant of license to a new company (Part A) Grant of license to an existing company (Part B) Part A: Grant of license to a new company (a) *Name of the Applicant (b) *Address O Self-employed O Professional O Homemaker O Student (c) *Occupation Type Area of occupation (d) *Phone (with STD/ISD) (e) Fax (f) *email Id 12. *Indicate Registrar of Companies (ROC) reference number for name approval (Service Request Number (SRN) of Form INC.1) Pre-Fill 13. (a) Name of the company (b) Company is (c) Type of Company (d) Category (e) Sub category *(f) Whether the company will ==ave share capital \(\bigcap \) Not have share capital I. Proposed authorized capital 14. II. Proposed maximum number of members Proposed maximum number of members excluding proposed employees 15. *a. Main division of industrial activity of the proposed company Description of the main division *b. Brief description of the work, if any already done or proposed to be done in pursuance of section 8 *c. Grounds on which application is made 16. *Enter the number of proposed promoters (first subscribers to MOA Particulars of Promoters (first subscribers to the MOA) (specify information of two promoters in case the proposed company is a private company or seven promoters in

C	case the proposed company is a public company)				
•	Category Category	Catagory		STATIOTY	
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	Name of the authorized representative				
II					
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	Meas any athas rayk ara lankumkan — 1 FRM (secure vilngang registal par quinkum (FCR Blank — Firm — 70 am				Tes
	Name of the authorized representative				
17.	*Enter the number of proposed director				
	(specify information of two directors in case the proposed	company is a pr	ivate company	or three directors in c	case
	the proposed company is a public company)				
I	Particulars of the proposed directors				
	*Proposed designation			Pre-fill	
	*Director identification number (DIN) Name of the person			11e-m	_
	Name of the company or institution				_
	whose nominee the appointee will be (Only in case of nominee director)				
II					
	*Proposed designation				
	*Director identification number (DIN) Name of the person			Pre-fill	_
	Name of the company or institution				_
	whose nominee the appointee will be (Only in case of nominee director)				
18.	*Enter the number of key managerial pers	٦			
(:	(specify information of up to four key managerial persons)	_			
I	Particulars of the key managerial personnel				
	*Proposed designation	<u> </u>			
	*Director identification number (DIN) or			Pre-fill	
	Income-tax permanent account number (PAN)				
	Name of the person				¬

	Membership number (in case of Company Secretary)
II	
11	*Proposed designation
	*Director identification number (DIN) or Income-tax permanent account number (PAN)
	Name of the person
	Membership number (in case of Company Secretary)
19.	(a) *Whether the Articles will be entrenched $\ \square$ Yes $\ \square$ No
	(If yes, entrenched Articles should be annexed thereto)
	(b) Number of Articles to which provisions of entrenchment shall be applicable Details of Articles to which provisions of entrenchment shall be applicable
	Sr. Article Content No. Number
	No. Number
Dav	t P. Crant of license to an existing company
Pai	t B: Grant of license to an existing company
20.	*(a) Corporate identity number (CIN)
	(b) Global location number (GLN) of company
21.	(a) Name of the company
	(b) Address of the company
	(c) email ID of the company
22.	(a) Compar
	(b) Category (c) Sub category
	(d) Whether the company is having share capital \rightleftharpoons es \rightleftharpoons o
23.	I. Authorized capital of the company II. Maximum number of members
	Maximum number of members excluding present and past employees
24.	a. Main division of industrial activity of the company Description of the main division
	*b. Brief description of the work, if any already done or proposed to be done in pursuance of section 8
	*c. Grounds on which application is made

25.	*Enter the number of directors	
	pecify information of two directors in case the company is a private company or three directors in case the	e
	mpany is a public company)	
	articulars of the directors	
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	*Designation	
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	Name of the company or institution	.
	whose nominee the appointee is (Only in case of nominee director)	
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	*Designation	
	*Director identification number (DIN) Name of the person	
	Name of the beloof	
	Name of the company or institution	
	whose nominee the appointee is (Only in case of nominee director)	
26.	*Enter the number of key managerial personnel	
20.	pecify information of up to four key managerial persons)	
	rticulars of the key managerial personnel	
	receipts of the key managerial personner	
	ractions of the key managerial personner	
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No. Number		Article	Content	Attach
*Draft Articles of Association as per form no. INC.13 *Draft Articles of Association *Declaration as per Form No. INC.14 *Declaration as per Form No. INC.15 *Estimated income and expenditure for next three years Approval/concurrence/NOC of the concerned authority/sectoral regulator, department or Ministry of the Central or State Government(s) Entrenched articles of association Copy of resolution passed in general meeting and board meeting last one/two year's financial statement(s), board's report(s) and Audit report(s) Assets and liabilities statements with their values as per applicable rule List of proposed promoters. List of proposed promoters. List of proposed promoters. List of proposed directors/ directors. List of key managerial personnel. Optional attachment, if any **Declaration** **Declar	No.	Number		Attach
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□ I am also authorized by other proposed promoters and first subscribers to the Memorandum of Association and Articles of Association to sign and submit this Form. □ *I also declare that all the information given herein above is true, correct and complete including attachments to this form and nothing material has been suppressed. □ *It is hereby further certified that (Small description box), a (Drop down) (Values: Chartered Accounted Company Secretary/ Cost Accountant) having Membership number (Big text box) and certificated practice number (Big text box) has been engaged to give declaration under section 8(1) or 8(5) and 19(3) (b) or rule 20(2) (b) and such declaration is attached. *To be digitally signed by DSC BOX *Designation DIN of the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter **Interval and the manager or CEO or CFO or promoter or suppression of any material have been engaged to give declaration under section 8(1) or 8(5) and 19(3) or 8(5) and 19		•		spect of the
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attachments to this form and nothing material has been suppressed. *It is hereby further certified that (Small description box), a (Drop down) (Values: Chartered Accountant Company Secretary/ Cost Accountant) having Membership number (Big text box) and certificate practice number (Big text box) has been engaged to give declaration under section 8(1) or 8(5) and 19(3) (b) or rule 20(2) (b) and such declaration is attached. *To be digitally signed by DSC BOX *Designation *Director identification number of the director; or Membership number of the company secretary; or VAN or DIN of the manager or CEO or CFO or promoter *Interval to this form and nothing material has been suppressed. *To be digitally signed by DSC BOX *To be digitally s				Association
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Company Secretary/ Cost Accountant having Membership number (Big text box) and certificate practice number (Big text box) has been engaged to give declaration under section 8(1) or 8(5) and 19(3) (b) or rule 20(2) (b) and such declaration is attached. To be digitally signed by DSC BOX Designation Director identification number of the director; or Membership number of the company secretary; or YAN or DIN of the manager or CEO or CFO or promoter Iote: Attention is drawn to provisions of Section 7(5) and 7(6) which, inter-alia, provides surnishing of any false or incorrect particulars of any information or suppression of any material.	att			Δccountant
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urnishing of any false or incorrect particulars of any information or suppression of any mate	□ *It Co pra 19 *To be dig *Designation *Director id	actice number ((3) (b) or rule 2 (itally signed bon	DSC BOX mber of the director; or	5) and rul
	□ *It Co pra 19 *To be dig *Designation *Director id Membership	actice number (2) (3) (b) or rule 2 (1) (itally signed be 1) on the control of the point of the point of the control of the co	DSC BOX The property of the director; or a company secretary; or	5) and rul
nformation shall attract punishment for fraud under Section 447. Attention is also drawn to provisi	"*It Co pra 19 *To be dig *Designation *Director id Membership PAN or DIN	actice number (2)(3) (b) or rule 2 itally signed become b	DSC BOX The provisions of Section 7(5) and 7(6) which, inter-alia, provisions (5) and 7(6) which, inter-alia, provisions (6) and 7(6) and	ovides th

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Application to Regional Director FORM NO. INC.18 for conversion of section 8 [Pursuant to section 8(4)(ii) of The company into company of any Companies Act, 2013 and Rule 21 (3) of The Companies (Incorporation and other kind Incidental) Rules 2014] Form language o English o Hindi Refer the instruction kit for filing the form. 1. (a)*Corporate identification number (CIN) of the company (b) Global location number (GLN) of the company Pre-fill 2. (a) Name of the company (b) Registered office address of the company (c) email ID of the company 3. License number issued to the Company under Section 8 4. (a) Date of incorporation of the company (b) Type of company 5. *Present object of the company *The proposed object of the company after conversion and the changes in the activities and operations of the company and manner of application of its income and assets, after the proposed conv 7. Brief description of the activities of the company done in pursuance of section 8, if any 8. *Detailed reasons for conversion into any other kind of company 9. (a) *Date of passing board resolution (b) *Date of passing special resolution (c) *SRN of Form No. MGT.14 10. (a) *Whether the company is regulated under a special Act _ Yes _ No (b) If yes, furnish the below details (i) *Name of the regulatory body (ii) *Date of obtaining the approval of regulatory body approving conversion 11. *Number of existing director(s) and key managerial personnel *Particulars of existing director(s) and key managerial personnel (i) DIN or Income tax PAN Pre-fill (ii) Name (iii) Designation 12. *Whether the company has obtained any special status/ privilege as mentioned in rule 22(4) □ Yes □ No (If yes, name the authority and attach No objection certificate) 13. *Whether the company has acquired any immovable property through lease or otherwise from any Government or authority or body corporate or person since incorporation at concessional rate or free of cost □ Yes □ No (If yes, attach proof of payment of differential amount as per rules) 14. *Whether company has received any donation and/or grant/benefits from any person or authority since (If yes, attach the details of the same) incorporation ⊓ Yes ⊓ No 15. *Whether there is any surplus amount after payment of dues to be transferred to IEPF as per applicable rule If yes, mention the amount to be so transferred

16. *Whether the company is regular in filing of financial statements, annual returns and other due statutory

□ Yes □ No

filinas

□ Yes □ No

17. * Whether NOC is obtained from all the creditors

18. *Whether the company is being regulated by any sectoral regulator

(If Yes, attach the NOC)

□ Yes □ No

	If yes, attach approval/concurrence of the regulator and specify the below		
	Name of the regulator		
10	Letter number Approval/concurrence Dated I *		
19.			
,	the Director of the company hereby affirm that:		
	 a) The conversion is not being sought with the object of depriving the creditors of cause loss or prejudice to any person. 	f their dues or to	
	b) No portion of the income or property of the company has been paid or trans	sferred directly or	
	indirectly by way of dividend or bonus or otherwise to persons who are or have		
	promoters of the company or to any one or more of them or to any persons claim	ming through any	
	one or more of them.		
	c) I/We shall be liable under section 448 of the Act and under relevant provision o Code, 1860 and any other law as applicable, if any statement in this application is		
	or any fact in any material particular is found to be omitted.	s round to be raise	
Att	achment(s)		
1.	* Memorandum of association;	Attachment	
2.	* Articles of association;	Attachment	
3.	*Copy of board resolution(s); *Copy of the angulation passed and Nation convening the general meeting	Attachment	
4.	*Copy of the special resolution passed and Notice convening the general meeting along with the relevant explanatory statement annexed thereto;	Attachment	
5.	*Certificate from CA/CS/CWA (in practise) certifying that the conditions laid down	Attachment	
_	in the Act and rules, have been complied with;	Attachment	
6.	*Statement of assets and liabilities of the company as on the date not earlier than thirty days of that date duly certified by the auditor;		
7.	*Copy of valuation report by a registered valuer about the market value of assets;	-Attachment	
8.	*Audited financial statements, the Board's reports, annual returns and	-Attachment	
	the audit reports for each of the two financial years immediately preceding		
	the date of the application or, where the company has functioned only for one financial year, for such year;		
9.	Statement of financial position if applicable;	Attachment .	
	Full details of fixed assets alienated if any, during the preceding three financial years;	-Attachment	
	Written consent of the lenders, if any loan is outstanding; NOC from the concerned authority in case special status;	-Attachment	
	Proof of payment of differential amount;	-Attachment	
14.	Details of donation/grant/benefit received since incorporation of company;	Attachment	
	Copy of NOC received from sectoral regulatory authority;	Attachment	
	NOC from all the creditors	-Attachment	
1/.	Optional attachment(s) Peclaration		
I an	n authorized by the Board of Directors of the Company vide *resolution number	*dated	
	sign this form and declare that all the requirements of Companies Act, 2013 and the rule		
	reunder in respect of the subject matter of this form and matters incidental thereto have	e been complied	
1.	 I further declare that: Whatever is stated in this form and in the attachments thereto is true, correct and com 	plete and no	
	information material to the subject matter of this form has been suppressed or conceal		
	the original records maintained by the company.		
2.	All the required attachments have been completely and legibly attached to this form;		
3. ,	*I		
,	a *{Drop down - Values: Chartered Accountant/ Company Secretary/ Cost Accountant/	<mark>'}</mark> having	
	*Membership number and *Certificate of practice number has been engaged to give declaration as per applicable rules and such declaration is at	tached.	
*To be digitally signed by DSC BOX			
	Director *Director identification number of the director		
	te: Attention is drawn to provisions of Section 448 and 449 which provide for pose statement / certificate and punishment for false evidence respectively.	unishment for	

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[Pursuant to section 8(4) and 8(6) 23 of The Rule (Incorporation and Rules 20141

Intimation to Registrar of revocation/surrender license issued under

of The Companies Act, 2013 and Companies section 8 Incidental) Form language o English o Hindi Refer the instruction kit for filing the form. 1.(a) *Corporate identity number (CIN) of the company Pre-Fill (b) Global location number (GLN) of the company 2.(a) Name of the company (b) Address of the registered office of the company (c) Type of company (d) email ID of company 3. License number issued under section 8 4. *Whether application for revocation of license is made o On directions of the central government o Voluntarily 5. (a) *Date of issue of order (b) *Due date for filing the order (c) *SRN of form INC.18 (d) *Reason for revocation/surrender of such license 6. *Mention the name of the company in view of the order of revocation of license under section 8 (The word(s) Private limited, Limited may be added in name of the company and the word(s) like Electoral trust, foundation, forum, association, federation, chambers, confederation, council etc. shall be removed from the name. Thereupon the status of company will be changed accordingly.) Attachment(s) Attach *Copy of order of Central Government; Attach (2) *Copy of altered Memorandum and articles of association; (3) *Declaration of directors for compliance of conditions; Attach Attach (4) Optional attachment(s) (if any) Declaration I am authorized by the Board of Directors of the Company vide *resolution number *dated sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. I further declare that: 1. Whatever is stated in this form and in the attachments thereto is true, correct and complete and no information material to the subject matter of this form has been suppressed or concealed and is as per the original records maintained by the company. 2. All the required attachments have been completely and legibly attached to this form. *To be digitally signed by **DSC BOX** *Designation *Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of the company secretary

Certificate by practicing professional I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder relevant to this form and I have verified the above particulars (including attachment(s)) from the original records maintained by the Company/applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. To be digitally signed by igitally signed by Chartered accountan (DSC BOX practice) or Cost accountant (in whole-time practice) or Company secretary (in whole-time practice) O Associate O Fellow Membership number Certificate of practice number Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false statement / certificate and punishment for false evidence respectively. For office deelenly Hanne Hannes and Alfred Mark Street **EEDWIN STOPESS** eForm Service requestrations of the This e-Form is hereby registered

[Pursuant to Section 11(1)(a) of the Companies Act, 2013 and Rule 24 of the Companies Rules, 2014]



Declaration prior to the commencement of business or exercising borrowing powers

Form language o English o Hindi Refer the instruction kit for filing the form. *(a) Corporate identity number (CIN) of company (b) Global location number (GLN) of company **Pre-fill** (a) Name of the company (b) Address of the registered office of the company (c) email ID of the company (a) *Whether the affairs of the Company is regulated by any sectoral regulator (like RBI in case of NBFI activities) o No (b) *Specify the name of the regulator Specify 'others' (c) *Specify the letter number/registration number and date of approval/registration 4. *Particulars of the paid up capital Total paid up capital of the company (i)(a)Number of total equity shares (b) Nominal amount per equity share (c)Total amount of equity shares (ii)(a)Number of total preference shares (b)Nominal amount per preference share (c)Total amount of preference shares Particulars of payment of stamp duty State or Union territory in respect of which stamp duty is paid Type of document/Particulars Form INC.21 *Total amount of stamp paper (in Rs.) Mode of payment of stamp duty Name of vendor authorised to sell stamp papers on behalf of the Government

	Serial number of stamp paper	
	Registration number of vendor	
	Date of purchase of stamp paper	(DD/MM/YYYY)
	Place of purchase of stamp paper	
Attac	:hments	List of Attachments
(1)*5	Specimen signature in form INC.10.	
(2) Ce	rtificate of Registration issued by the RBI	Attach
	in case of Non-Banking Financial Companies)/	Attach
	other regulators	Attach
(3) 0	ptional attachment(s) (if any)	Kemove
	D	eclaration
*		vide resolution number. * dated hat all the requirements of Companies Act, 2013 and the rules made and matters incidental thereto have been complied with. I further
	re that:	and matters incidental thereto have been complied with. I further
		ts thereto is true, correct and complete and no information material
t	o the subject matter of this form has been suppresse	ed or concealed and is as per the original records maintained by the
С	ompany.	
2. A	II the required attachments have been completely and	d legibly attached to this form.
3. E	very subscriber to the MOA has paid the value for sha	ares agreed to be taken by him and the paid up capital the company
is	not less than the 1 lakh rupees in case of private co	mpany or 5 lakh rupees in case of public company.
4. T	he company has filed with the registrar a verification	of its registered office as provided in subsection (2) of section 12.
di ==		
	pe digitally signed by	
Direc	ctor identification number	7
Dire	ctor identification number	
	Certificate b	y practicing professional
	are that I have been duly engaged for the purpose of	certification of this form. It is hereby certified that I have gone
throu	gh the provisions of the Companies Act, 2013 and Rul	les thereunder relevant to this form and I have verified the above
		ords maintained by the Company/applicant which is subject matter of and no information material to this form has been suppressed.
*	Chartered accountant (in whole-time practice	
		you good accountant (in whole-time practice) or
	Whether associate or fellow Associate	Fellow
* 1	Membership number	
*C	ertificate of practice number	
	: Attention is drawn to provisions of Section 448 icate and punishment for false evidence respect	3 and 449 which provide for punishment for false statement / tively.
	Modify Check Form	Prescrutiny Submit
-		
	is eForm has been taken on file maintained by the e basis of statement of correctness given by the c	e registrar of companies through electronic mode and on company

[Pursuant to section 12(2) & (4) of The Companies Act, 2013 and Rule 25 and 27 of The Companies (Incorporation and Incidental) Rules 2014]



Notice of situation or change of situation of registered office

Incidental) Rules 2014]	registered office	
Form language o English o Hi Refer the instruction kit for f 1. *This Form is for		
or SRN of Form N	number (CIN) of company o. INC.1 umber (GLN) of company	
3. (a) Name of the com	npany	
(b) Address of the reg	gistered office of the company	
(c) Name of the office	te of existing Registrar of Companies (RoC)	
(d) *Purpose of the form Change within local limits of city, town or village Change outside local limits of city, town or village, within the same RoC and state Change in RoC within the same state Change in state within the jurisdiction of same RoC Change in state outside the jurisdiction of existing RoC Notice is hereby given that *(a) The address of the registered office of the company with effect from (DD/MM/YYYY) is		
o The date of *Address Line	incorporation of company is	
Lin * City —	e II	
* District * State/Union Country *Pin code *email ID	Terri	
company) (c) *Name of office of	o Owned by director (Not taken on lease by company) by company o Owned by any other entity/Person(Not taken on lease by of proposed RoC or new RoC	
(d) Full address of the *Name	police station under whose jurisdiction the registered office is situated	

*Address Line I		
Address Line II		
*City		_
State/Union Territor		
*Pin code		
(e) *Particulars of the Utility Se (not older than two months	ervices Bill depicting the address	of the registered office
5. (a) *SRN of Form MGT.14 (b) *SRN of relevant Form (c) *Date of order of the Cent	tral Government	(DD/MM/YY)
Attachments (1) *Proof of Registered Office addre		List of Attachments
(Conveyance/ Lease deed/Rent A along with the rent receipts) etc (2) *Copies of the utility bills as mer	c.;	
above (not older than two month (3) *A proof that the Company is per		
to use the address as the registe office of the Company if the samby any other entity/ Person (not lease by company);	taken on	
(4) *Copy of order of competent aut	Attach	
(5) List of all the companies (specify having the same registered office	e address if any:	
(6) Optional attachment, if any.	Attach	Remove attachment
(6) Optional attachment, if any.	Declaration	Remove attachment
(6) Optional attachment, if any. I * A person named in the articles as have been authorized by the Boar to sign this form and declare that *all the requirements of The Commatter of this form and matters in *I also declare that all the informattachments to this form and nother than the informattachments.	Declaration S a (Drop down: director / manager / rd of Directors of the company vide r mpanies Act, 2013 and the rules mad ncidental thereto have been complied or mation given herein above is true hing material has been suppressed.	Company Secretary) of the company esolution number dated thereunder in respect of the subject with.
(6) Optional attachment, if any. I * A person named in the articles as have been authorized by the Boar to sign this form and declare that *all the requirements of The Commatter of this form and matters in *I also declare that all the informattachments to this form and noth It is hereby further certified that	Declaration S a (Drop down: director / manager / rd of Directors of the company vide r mpanies Act, 2013 and the rules mad ncidental thereto have been complied ormation given herein above is true hing material has been suppressed. t (Small description box), a (Drop description box), a (Drop description box)	Company Secretary) of the company esolution number dated thereunder in respect of the subject with. Correct and complete including the county (Values: Chartered Accountant/
(6) Optional attachment, if any. I * A person named in the articles as have been authorized by the Boar to sign this form and declare that *all the requirements of The Commatter of this form and matters in *I also declare that all the informattachments to this form and noth It is hereby further certified that Company Secretary/ Cost Accounting the company Secreta	Declaration S a (Drop down: director / manager / rd of Directors of the company vide r mpanies Act, 2013 and the rules mad ncidental thereto have been complied or mation given herein above is true hing material has been suppressed.	Company Secretary) of the company esolution number dated thereunder in respect of the subject with. , correct and complete including the county and certificate of
(6) Optional attachment, if any. I * A person named in the articles as have been authorized by the Boar to sign this form and declare that *all the requirements of The Commatter of this form and matters in *I also declare that all the informattachments to this form and note It is hereby further certified that Company Secretary/ Cost Accour practice number	Declaration s a (Drop down: director / manager / rd of Directors of the company vide r mpanies Act, 2013 and the rules mad incidental thereto have been complied formation given herein above is true hing material has been suppressed. It (Small description box), a (Drop dintant) having Membership number certifying this form has been dul SC BOX director; or CFO; or	Company Secretary) of the company esolution number dated thereunder in respect of the subject with. , correct and complete including the county and certificate of
(6) Optional attachment, if any. I * A person named in the articles as have been authorized by the Boar to sign this form and declare that *all the requirements of The Commatter of this form and matters in attachments to this form and noth It is hereby further certified that Company Secretary/ Cost Accour practice number *To be digitally signed by *Designation *Director identification number of the Company Secretary or CEO or Membership number of the Company secretary.	Declaration s a (Drop down: director / manager / rd of Directors of the company vide r mpanies Act, 2013 and the rules mad incidental thereto have been complied formation given herein above is true hing material has been suppressed. It (Small description box), a (Drop dintant) having Membership number certifying this form has been dul SC BOX director; or CFO; or	Company Secretary) of the company esolution number dated the thereunder in respect of the subject with. Town (Values: Chartered Accountant) and certificate of y engaged for this purpose.
(6) Optional attachment, if any. I * A person named in the articles as have been authorized by the Boar to sign this form and declare that *all the requirements of The Commatter of this form and matters in attachments to this form and not It is hereby further certified that Company Secretary/ Cost Accour practice number *To be digitally signed by *Designation *Director identification number of the ODIN or PAN of the manager or CEO or Membership number of the Company some through the provisions of The Cand matters incidental thereto and I records maintained by the company complete and no information materia 1. The said records have been maintained as per the relevance. 2. All the required attachments. 3. I further declare that I have	Declaration S a (Drop down: director / manager / rd of Directors of the company vide repaired of Directors of the companies Act, 2013 and the rules mad notidental thereto have been complied or Director of Directors of Director	Company Secretary) of the company esolution number dated e thereunder in respect of the subject with. correct and complete including the dated own) {Values: Chartered Accountant/ and certificate of y engaged for this purpose. this form. It is hereby certified that I have eunder for the subject matter of this form (including attachment(s)) from the original n and found them to be true, correct and further certify that: the required officers of the company and 2013 and were found to be in order;

 Chartered accountant (in whole-time practice) or Cost accountant (in whole-time practice) or Company secretary (in whole-time practice) 		
Whether associate or fellow Associate	Fellow	
Membership number Certificate of practice number		
Note: Attention is drawn to provisions of Section statement / certificate and punishment for false Modify Check Form	n 448 and 449 which provide for punishment for false e evidence respectively. Prescrutiny Submit	
For office use only:	Affix filing details	
eForm Service request number (SRN)	eForm filing date (DD/MM/YYYY)	
Digital signature of the authorising officer		
This e-Form is hereby registered	Confirm submission	
Date of signing	(DD/MM/YYYY)	
OR		
This eForm has been taken on file maintained by the statement of correctness given by the filing company	registrar of companies through electronic mode and on the basis of	

[Pursuant to section 12(5) and 13(4) of The Companies Act, 2013 and rule 28 and 30 of The Companies (Incorporation and Incidental) Rules, 2014]



Application to the Regional Director for approval to shift the Registered Office from one state to another state or from jurisdiction of one Registrar to another Registrar within the same State

Form language o English o Hindi

	efer the instruction kit for filing the form. *Application is for shifting the Registered Office from
	o One state to another state
	One registrar to another registrar within the State
2.	(a) *Corporate identity number (CIN) of company (b) Global location number (GLN) of company
3.	(a) Name of the company (b) Address of the registered office of the company
	(s) read east of the registered office of the company
	(c) Name of the existing ROC
4.	*(a) Name of the state/Union territory where the new registered office of the company would be sit
	*(b) Name of the office of new ROC where the new proposed registered office of the company would be situated
	*(c) Reasons for shifting the registered office
5.	*(a) Service request number of Form MGT.14
	*(b) Date of filing Form MGT.14
	*(c) Date of passing the special resolution
6.	(a) Details of members present at the meeting where the decision of shifting was taken and number of shares held by them (i) Number of members (ii) Number of shares held by them
	(b) Details of the members who voted in favour of the proposal and number of shares held by them (i) *Number of members (ii) Number of shares held by them
	(c) Details of the members who voted against the proposal and number of shares held by them (i) *Number of members (ii) Number of shares held by them
	(d) Details of members who abstained from voting and number of shares held by them (i) *Number of members (ii) Number of shares held by them
7.	*(a) Total Number of creditors *(b) Total Number of depositors *(c) Total Number of debenture holders
	(d) Brief details of the objections, if received any in response to the advertisement

8. *Whether any prosecution is pending against the company under the Act						
	o Yes o No					
If yes, Give brief details of the prosecution						
9.	*Whether any of the following is initiated against the company under the Act					
Э.	o inquiry o inspection o investigation					
	If yes, Give brief details of the inquiry, inspection, investigation					
10.	*Whether the company has serviced the copy of the application with complete annexures with the					
	Registrar					
	and the chief secretary of the state o Yes o No					
	If yes, specify the date of service					
11.	Facts of the case are given below					
	(Give a concise statement of facts in a chronological order, each paragraph containing as nearly as					
	possible a separate issue, fact or otherwise)					
Att	*Copy of Memorandum of Association and articles of association; Attach					
2.	*Conv. of notice of the general meeting along with relevant evaluations extrament:					
3.	*Copy of special resolution sanctioning alteration;					
4.	*Copy of the minutes of the general meeting authorizing such alteration;					
5.	*Power of attorney/vakalatnama/Board resolution;					
6.	*List of creditors and debenture holders; Attach					
7.	*Affidavit from Directors in terms of Rules;					
8.	*Affidavit verifying the application;					
9.	*Affidavit by the company secretary of the company and the directors in regards					
	to the correctness of list of creditors and affairs of the company;					
	*Affidavit by directors about no retrenchment of employees; Attach					
11.	*Details of prosecution/inspection/inquiry/Investigation filed against the					
12	company and its officers in default; *Copy of newspaper advertisement for notice of shifting the registered office; Attach					
	*Affidavit verifying the list of creditors;					
	Proof of service of the application to the Registrar, Chief secretary of the state, Attach					
	SEBI or any other regulatory authority (if applicable); Attach					
15.	Copy of objections (if received any);					
16.	Optional attachment(s), if any.					
Tar	Declaration n authorized by the Board of Directors of the Company vide resolution number * Dated *					
	sign this form and declare that all the requirements of Companies Act, 2013 and the rules made					
	reunder in respect of the subject matter of this form and matters incidental thereto have been complied					
	n. I further declare that:					
1.	Whatever is stated in this form and in the attachments thereto is true, correct and complete and no					
	information material to the subject matter of this form has been suppressed or concealed and is as per the original records maintained by the company.					
	the original records maintained by the company.					
2.	All the required attachments have been completely and legibly attached to this form					
_						
3.	Any application, writ petition or suit had not been filed regarding the matter in respect of which this					



the Board and not any s	uch application, writ petiti	on or suit is pending befor	e any of them.
*To be digitally signed by *Designation	[
*Director identification numb DIN or PAN of the manager of Membership number of the C	or CEO or CFO; or		
maintained as per t order;	ally engaged for the purpose provisions of The Compa ers incidental thereto and linal records maintained be correct and complete and that: we been properly prepared the relevant provisions of The line in the purpose the provisions of The line in the purpose the purpose the the purpose the the purpose the the purpose the the purpose the the purpose the the the the the the the th	nies Act, 2013 and Rules ti I have verified the above y the Company which is su no information material to	hereunder for the subject particulars (including bject matter of this form this form has been fficers of the Company and and were found to be in
me ptesticemene et en en post scoodilentini e preside in part secretary (in whole lime a wineliner escopete or fallo Certificate of preside number			Mitte gjeditejeres ebrogiest et etalen nu mudistompen, secretary (in whole-time AANISINE EPPENION Islam Mantherith number Continents of mudice number
Note: Attention is drawn t	ite and punishment for	false evidence respectiv	rely.
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(MO-D) EDT C-MARCO ECOTE DD. (Grand and Conjust baye	o Birmani, viend harisha et egyp galakkar zarzi e moto	Toom were accounted by the property of the care of careers of the	
	eren ere eren er Tainen Dannata bereite		

Application for approval FORM NO. INC.24 of Central Government [Pursuant to section 13(2) of The for change of name Companies Act, 2013 and Rule 29(2) of The Companies (Incorporation and Incidental) Rules 2014] Form language o English o Hindi Refer the instruction kit for filing the form. Pre-fill 1. *(a) Corporate identity number(CIN) of the company (b) Global Location Number of the company 2. (a) Name of the Company (b) Address of the registered office of the company (c) email ID of the company Pre-fill 3. (a) *Service Request Number (SRN) of Form INC.1 (b) Proposed name of the company 4. *Reason(s) for change of name 5. *Particulars of filing Form MGT.14 with Registrar of Companies (RoC) (a) SRN of Form MGT.14 (b) Date of passing the special resolution (c) Date of filing Form MGT 6. Name of the company at the time of incorporation (to be displayed in the certificate) 7. (a) Number of members present at the meeting where the special resolution was passed for change of name and number of shares held by them *Number of members Number of shares held by them (ii) (b) Number of members who voted in favour of change of name and number of shares held by them (i) *Number of members (ii) Number of shares held by them (c) Number of members who voted against the change of name and number of shares held by them *Number of members (i) (ii) Number of shares held by them (d) Details of members who abstained from voting and number of shares held by them

(i) *Number of members						
(ii) Number of shares held by them						
· · · · · · · · · · · · · · · · · · ·						
Attachments						
1. *Minutes of the members' meeting Attach						
2. Optional attachment(s) (if any) Attach						
Declaration						
To the best of my knowledge and belief, the information given in this application and its attachments is correct and						
complete and company has obtained all the mandatory approvals from the concerned authorities and departments in						
respect of change of name of the company.						
I have been authorized by the Board of director's resolution number * dated *						
to sign and submit this application.						
*To be digitally signed by						
*Designation						
*Director identification number of the director; or						
DIN or PAN of the manager or CEO or CFO; or						
Membership number of the company secretary						
Certificate by practicing professional						
I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and Rules thereunder for the subject matter of this form						
and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original						
records maintained by the Company which is subject matter of this form and found them to be true, correct and						
complete and no information material to this form has been suppressed. I further certify that; 6. The said records have been properly prepared, signed by the required officers of the Company and						
maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order;						
7. All the required attachments have been completely and legibly attached to this form.						
Chartered accountant (in whole-time practice) or Cost accountant (in whole-time practice) or						
Company secretary (in whole-time practice)						
Whathan acceptate as fallows						
Whether associate or fellow Associate Fellow						
Membership number						
Certificate of practice number						
Note: Attention is drawn to provisions of Section 448 and 449 which provide for punishment for false						
statement / certificate and punishment for false evidence respectively.						
Modify Check Form Prescrutiny Submit						
For office use only : Affix filing details						
eForm Service request number (SRN) eForm filing date (DD/MM/YYYY)						
Digital signature of the authorising officer						
This e-Form is hereby approved						
This e-Form is hereby rejected Confirm Submission						
This e-i office is necessary rejected						
Date of signing (DD/MM/YYYY)						



[Pursuant to section 14 of the Companies

Conversion of public company into private company or private company into public company

(I	ncorporation and Incidental) Rules, सत्यमेव जयते
	Form language o English o Hindi Refer the instruction kit for filing the form.
1.	*Application for o Conversion of private company into public company o Conversion of public company into private company
2.	*(a) Corporate identity number(CIN) of company (b) Global Location Number
3.	(a) Name of the Company (b) Address of registered office (c) email Id of the company
1	
٦.	*Reason(s) for conversion
5.	*Particulars of filing Form MGT.14 with Registrar of Companies (a) SRN of Form MGT.14 (b) Date of passing the special resolution (c) Date of filing Form MGT.14
6.	*Particulars of the order of Tribunal (a) Date of passing the order (b) Date of receiving the order
7.	*Name of the company at the time of incorporation (to be displayed in the certificate)
8.	(a) Details of members present at the meeting where the decision of conversion was taken and number of shares held by them (i) *Number of members (ii) Number of shares held by them
	(b) Details of the members who voted in favour of the proposal and number of shares held by them (i) *Number of members (ii) Number of shares held by them
	(c) Details of the members who voted against the proposal and number of shares held by them (i) *Number of members (ii) Number of shares held by them

(d) Details of members who abs (i) *Number of members (ii) Number of shares held by th	stained from voting and number of shares held by them					
Attachments 1. *Minutes of the members' meeting 2. *Altered Articles of Association; 3. *Order of tribunal; 4. Order for condonation of delay; 5. Optional attachment(s) (if any)	ng;					
	Declaration					
To the best of my knowledge and belief, the information given in this application and its attachments are correct and complete. The company has obtained all the mandatory approvals from the concerned authorities, departments and substantial creditors. I have been authorized by the board number * dated *						
to sign and	submit this application.					
To be digitally signed by						
*Designation						
*Director identification number of the director; or DIN or PAN of the manager or CEO or CFO; or Membership number of Company secretary						
Note: Attention is drawn to provisions of Se	ection 448 and 449 which provide for punishment for false statement					
and punishment for false evidence respective						
For office use only :	Affix filing details					
eForm Service request number (SRN)	eForm filing date (DD/MM/YYYY)					
This e-Form is hereby registered	12 15					
Digital signature of the authorising office	Confirm Submission					
Date of signing	(DD/MM/YYYY)					

FORM NO. INC.28 Notice of Order of the Court or Tribunal or [Pursuant to Section 12(6), 13(7), 48(4), 58(5), 62(4), 66(5), 87 & 252(2) of the other any competent Companies Act, 2013 and 167, 186, 188(5), 391, 394, 396, 397, 398, 445, 481, 466, 518, authority 559 & 621A of the Companies Act, 1956 and rules made thereunder] Form language o English o Hindi Refer the instruction kit for filing the form. 1.(a) *Corporate identity number (CIN) or foreign company Pre-Fill registration number (FCRN) of the company (b) Global location number (GLN) of company 2.(a) Name of the company (b) Address of the registered office or of the principal place of business in India of the company (c) e-mail ID of the company 3.(a) *Order passed by • (b) Name of the court or Tribunal or any other competent authority (c) Location (d) *Petition or application number (e) *Order number 4. Date of passing the order (DD/MM/YYYY) 5.(a) (i) Section of the Companies Act, 2013 under which order passed (ii) Section of the Companies Act, 1956 under which order passed (b) If others, mention 6. Number of days within which order is to be filed with Registrar (To be entered pursuant to aforesaid sections or in terms of court order or Tribunal order or order of the competent authority, as the case may be) 7. Date of application to court or Tribunal or the competent authority for (DD/MM/YYYYY) issue of certified copy of order 8. Date of issue of certified copy of order (DD/MM/YYYY) Due date by which order is to be filed with Registrar (DD/MM/YYYY) 10. In case of compounding of offence, enter Service request number (SRN)(s) of Form 61.

	In case of amalgamation, mention whether company filing the form is transferor or transferee Transferor Transferor Transfero
	CIN Pre-fill
	Name
	Appointed date of amalgamation (DD/MM/YYYY)
	(b) Details of transferor company(s)
	Number of transferor company(s)
70000	Category of the transferor company
9	CIN or FCRN or any other registration number
	Name
,	Appointed date of amalgamation (DD/MM/YYYY) SRN of Form INC.28
	Category of the transferor company
	CIN or FCRN or any other registration number
	Name
	Appointed date of amalgamation (DD/MM/YYYY) SRN of Form INC.28
00000	Category of the transferor company
STEED OF STREET	CIN or FCRN or any other registration number
	Name
3	Appointed date of amalgamation (DD/MM/YYYY) SRN of Form INC.28
	Category of the transferor company
	CIN or FCRN or any other registration number
	Name
	Appointed date of amalgamation (DD/MM/YYYY) SRN of Form INC.28
	Category of the transferor company
	CIN or FCRN or any other registration number
	Name
	Appointed date of amalgamation (DD/MM/YYYY) SRN of Form INC.28

	Declaration	No.	
		Rer	move attachment
, , , , , , , , , , , , , , , , , , , ,	7.11.10	_	
order by any other competent 2. Optional attachment(s) - if any		h l	
1. *Copy of court order or NCLT	,	h	
Attachments		List of	attachments
If yes, SRN of payment of po	enalty		
14. *Whether penalty involved o	The Man More represented		
(c) SRN of relevant Form INC.23			
	under section 66(1) of the Companie		(DD/MM/YYYY)
13.(a) SRN of relevant form	m INC.22, INC.28, CHG.1, CHG.4, CHG.9, MG	T 14 or any other form: 'f	aplicable
Under section 252 of the C	Companies Act, 2013		
· /	ch dissolution has been declared	as void	
Date of amalgamation		D/MM/YYYY)	
Name			
		T TO IIII	
CIN or FCRN	Tanasas sampan, missa alasa	Pre-fill	7
	e transferor company whose dissol		
(ii) Whether the order is in the	e respect of company dissolved und	ler section 394 of the Compa	nies Act, 1956 Yes No
(d) (i) Date with effect from which under section 559 of the Cor	h dissolution has been declared as mpanies Act, 1956.	void	(DD/MM/YYYY)
(c) Date of dissolution under sect	uon 481 of the Companies Act, 1956		(DD/MM/YYYY)
under section 466 of the Compar			(DD/MM2000)
	inding up proceedings have been s	tayed	(DD/MM/YYYY)
Pin code		 ,	
Country			
State			
City			
Line II			
Line I			
(iv) Address of liquidator			
liquidator			
(ii) Income-tax permanent acc	count number (Income-tax PAN)		
AND CONTRACTOR OF THE CONTRACT	f winding up under section 445 of the C	Companies Act, 1956	(DD/MIM/TTTT
12. In case of winding up, provide			(DD/MM/YYYY

Dated * and the rules of been complied 1. Whatever information original rec 2. All the req *To be digitally s	nade thereunde with. I further of is stated in the material to the cords maintaine uired attachmen	to sign this in respect of declare that: is form and in e subject matted by the compants have been of	form and de the subject of the attach er of this for any. completely as	matter of this for ments thereto is	requirements m and matte s true, corre pressed or co	s of Companies A rs incidental there ct and complete incealed and is as	eto hav
*Name	rie person signing	and submitting i	ine ioiiii				
ivame	<u> </u>						- 10
Capacity							
*Designation				•			
DIN or Incom	e-tax PAN or M	lembership nun	nber				
		Certifica	te by practi	cing profession			
thereunder for particulars (incl matter of this fo has been suppr	the subject ma luding attachme orm and found t essed.	tter of this fornent(s)) from the them to be true	n and matter e original rec e, correct and and second description of the visit line and allow.	rs incidental ther ords maintained complete and no	eto and I ha by the Comp o information	Act, 2013 and R ve verified the aboany which is submaterial to this f	oove oject form
and punishment		e respectively	tion 448 and		e for punishmo	ent for false stater	nent
Modify		Check Form		Prescrutiny	J	Submit	_
For office use of	only:			Affix filing	g details		
eForm Service	request number (SRN)		eForm filing date		(DD/MM/	YYYY)
This e-Form is	hereby registered	· ·				·	
Digital signatu	re of the authori	sing officer		Confirm submiss	ion		
Date of signing			VA	(DD/MM/YYY	Y)		
							1