

RESOLUTION OF THE BOARD OF DIRECTORS

At a meeting of the Board of Directors of

“the company” with registration number _____ held at place

_____ on _____ at which the named directors were present, the following changes to the company were proposed and approved :

Full Name and Surname	ID / Passport number	Change Proposed	Signature Approval
		() APPOINT DIRECTOR () RESIGN DIRECTOR () NO CHANGES ON DATE _____	
		() APPOINT DIRECTOR () RESIGN DIRECTOR () NO CHANGES ON DATE _____	
		() APPOINT DIRECTOR () RESIGN DIRECTOR () NO CHANGES ON DATE _____	
		() APPOINT DIRECTOR () RESIGN DIRECTOR () NO CHANGES ON DATE _____	
		() APPOINT DIRECTOR () RESIGN DIRECTOR () NO CHANGES ON DATE _____	

It was further resolved and authorized that the changes to the directors be affected by Amith Prahalath with customer code QCKPTY at CIPC.

The signatures of all the directors (including newly appointed, resigned, and where no changes are being made to their name) are included.

Date Resolution Approved : _____

Place : _____

Signature : Director / Shareholder authorizing changes

LIMITED POWER OF ATTORNEY

I / We the undersigned hereby appoint Amith Prahalath / Kyleen Harichander, to amend on my / our behalf a private company with the name

or any other name that the Commission may approve, to sign the **COR18.1, CoR 9.1** (Name Reservation), **CoR44, COR39, COR15.2, COR 15.1A, B, C, D, E** (Memorandum of Incorporation), or any other forms and to do anything necessary or expedient to the conversion of, or amendment to, the Pty Ltd company.

List all Directors / Shareholders below. Attach a new form if number exceeds 10 :

Full Name and Surname	ID / Passport	Signature

Date : _____

Place : _____

DIRECTOR ADDRESSES

Please fill this section in if you are ADDING NEW DIRECTORS to your company or CC.

NAME OF DIRECTOR : _____

RESIDENTIAL ADDRESS WITH AREA CODE :

POSTAL ADDRESS WITH AREA CODE :

EMAIL ADDRESS _____ CELL NUMBER _____

NAME OF DIRECTOR : _____

RESIDENTIAL ADDRESS WITH AREA CODE :

POSTAL ADDRESS WITH AREA CODE :

EMAIL ADDRESS _____ CELL NUMBER _____

NAME OF DIRECTOR : _____

RESIDENTIAL ADDRESS WITH AREA CODE :

POSTAL ADDRESS WITH AREA CODE :

EMAIL ADDRESS _____ CELL NUMBER _____