

TURKS AND CAICOS ISLANDS COMPANIES ORDINANCE 2017 SECTION 220 APPLICATION FOR CONTINUATION INTO THE TURKS AND CAICOS ISLANDS

COMPANY DETAILS					
RESERVATION NUMBER:	PROPOSED COMPANY NAME:				
NAME OF JURISDICTION IN WHICH COMPANY INCORPORATED, REGISTERED OR FORMED		DATE OF ORIGINAL INCORPORATION, FORMATION OR REGISTRATION			
PRO	OPOSED REGISTE	CRED AGENT DETAILS:			
REGISTERED NAME:	REGISTERED OFFICE ADDRESS:				
	STREET				
	TOWN/CITY				
	STATE/ISLAND				
	P.O. BOX				
	COUNTRY				
	TELEPHONE/FAX				
	E-MAIL				
WILL THE COMPANY'S REGISTANCE NO. 1	TERED OFFICE BE AT T	THE REGISTERED OFFICE OF THE REGISTERED AGENT:			

LOCATION OF REGISTERED OFFICE (IF DIFFERENT)	NT FROM THE REGISTERED OFFI	CE ADDRESS OF THE PROPOSED REGISTERED
STREET		
TOWN/CITY	STATE/ISLAND	
P.O. BOX	COUNTRY	
COMPANY	TYPE ON CONTINU	ATION:
 □ LIMITED BY SHARES □ UNLIMITED – AUTHORISED TO ISSUE SHARE □ UNLIMITED – NOT AUTHORISED TO ISSUE S 	ES 🗆 LIMITED BY GUARANTEI	E – AUTHORISED TO ISSUE SHARES E – <u>NOT</u> AUTHORISED TO ISSUE SHARES
	SHARE DETAILS	
WHAT IS THE TOTAL NUMBER OF SHARES THE COMPANION INDICATE THE ARTICLE NUMBER WHICH STATES THE NUMBER WHICH SECTION OF THE ORDINANCE:	IUMBER OF SHARES THE COMPANY	
SECTION OF THE ORDINANCE	ARTICLE #	
7		
13 (1) (C)		
13 (1) (D)		
220 (4) (A) (I) 220 (4) (A) (II)		
220 (4) (A) (III) 220 (4) (A) (III)		
WILL THIS BE A LAND HOLDING COMPA	ANY? YES NO	
WILL THIS COMPANY BE APPLYING FOR IF YES, PLEASE INDICATE CATEGORY		
WILL/ (HAS) THIS COMPANY BE APPL COMMISSION? □ YES □ NO	YING/ (APPLIED) FOR A LIC	EENCE FROM THE FINANCIAL SERVICES
IF YES, INDICATE LICENCE (S) APPLIED/BANKING	APPLYING FOR: TRUST	COMPANY MANAGEMENT
□ NATIONAL AND OVERSEA BANKING □ NATIONAL BANKING □ OVERSEA BANKING	□ UNRESTRICTED TRUST □ RESTRICTED TRUST	□ COMPANY MANAGER □ COMPANY AGENT

MUTUAL FUND	INVESTMEN		□ CREDIT UNION
□ MUTUAL FUND ADMINISTRAT □ MUTUAL FUND □ EXEMPT MUTUAL FUNDS	OR □ INVESTMENT AD □ INVESTMENT DE		□ MONEY TRANSMITTERS
	INSURANCE		
□ INSURANCE AGENT	□ INSURANCE SUB-AGENT	□ DOME	ESTIC LONG-TERM INSURERS
□ INSURANCE BROKER	□ CREDIT LIFE REINSURER	□ DOMI	ESTIC GENERAL INSURER
□ INSURANCE MANAGER	□ NON-CREDIT LIFE REINSURER	□ NON-l	DOMESTIC GENERAL INSURERS
□ PRINCIPAL INSURANCE REPRES	BENTATIVE	□ NON-	DOMESTIC LONG-TERM INSURERS
Т	HE FOLLOWING ARE ATTAC	HED TO	THIS FORM
□ C ERTIFIED COPY OF THE INCORPORATION)	CERTIFICATE OF INCORPORA	TION (OR	OTHER DOCUMENT EVIDENCING
□ ARTICLES OF INCORPORATION	COMPLYING WITH SECTION 220		
□ EVIDENCE OF DIRECTORS AUT	THORIZATION FOR APPLICATION TO	O CONTINUI	E
□ EVIDENCE OF APPROVAL OF A	RTICLES BY DIRECTORS		
□ EVIDENCE THAT THE LAWS OF	THE JURISDICTION IN WHICH THE	FOREIGN C	COMPANY IS REGISTERED PERMIT
IT TO CONTINUE IN THE ISLA	NDS		
$\ \square$ EVIDENCE THAT THE COMPAN	NY IS NOT DISQUALIFIED TO CONT	NUE INTO '	THE TURKS AND CAICOS
ISLANDS*(PLEASE SPECIFY)			
□ FORM 6 -NOTICE OF DIRECTOR	LS		
□ FORM 7 -NOTICE OF MEMBERS			
□ APPROVED NAME CLEARANCE	& RESERVATION FORM		
			CE UNDER SECTION 220 A DOCUMEN' HICH STATE THE PARTICULARS UNDE
REGISTERED AGENT	CONSENT		
WE,			
(AGENT NAME)			
` '	D OF COMPANIES FOR THE	CONTINII	ATION OF THE ABOVE NAMEI
			NTINUATION UNDER THE TURK
AND CAICOS ISLANDS COMP			

DETAILS OF PERSON SIC	EN1:	
NAME:		
JOB TITLE/POSITION:		
SIGNATURE:		
DATE:		
FOR OFFICIAL USE ONL	7	
DATE FILED:		
RECEIVED BY:		
FEE PAID:	YES □ NO □	
AMOUNT PAID:		
ACTION TAKEN:		
DATE ACTION TAKEN:		

NOTE:

THE REGISTRAR HAS NO DUTY EXCEPT TO THE EXTENT PROVIDED BY THE ORDINANCE TO VERIFY THAT THE ARTICLES OR OTHER DOCUMENTS COMPLY WITH THE ORDINANCE. COMPANIES ARE REMINDED OF THEIR LEGAL REQUIREMENT TO MAINTAIN PROPER AND UPDATED RECORDS. THE COMMISSION EXPECTS THAT DOCUMENTS FILED WITH THE REGISTRY WILL BE ACCURATE.