COMPANIES REGISTRY FORM 2F	TURKS AND CAICOS ISLANDS COMPANIES ORDINANCE 2017 (SCHEDULE 1 – NO. 3) APPLICATION FOR REGISTRATION BY EXISTING COMPANY							
COMPANY DETAILS								
EXISTING REGISTRATION NUMBER:	COMPANY NAME:	COMPANY NAME:						
	PROPOSED REGISTERED AGENT DETAILS							
REGISTERD NAME:		REGISTERED OFFICE ADDRESS:						
	STREET							
	TOWN/CITY							
	STATE/ISLAND							
	P.O. BOX							
	COUNTRY							
	TELEPHONE/FAX							
	E-MAIL							
WILL THE COMPANY REGISTYES □NO □	ERED OFFICE BE AT	THE REGISTERED OFFICE OF THE REGISTERED AGENT?						
REGISTERED OFFICE (IF DIFI REGISTERED AGENT)	FERENT FROM THE F	REGISTERED OFFICE ADDRESS OF THE PROPOSED						
STREET								
TOWN/CITY								
STATE/ISLAND								
P.O. BOX								
COUNTRY								

FORM 2F - APPLICATION FOR REGISTRATION BY EXISTING COMPANY - (VERSION MARCH 2018)

EX	ISTING ENTITY TYPE	
 LIMITED BY SHARES UNLIMITED – AUTHORISED TO HAVE A SHALL UNLIMITED – <u>NOT</u> AUTHORISED TO HAVE A LIMITED BY GUARANTEE – AUTHORISED TO LIMITED BY GUARANTEE – <u>NOT</u> AUTHORISE 	SHARE CAPITAL HAVE A SHARE CAPITAL	
EXEMPTED COMPANYNON-EXEMPTED (ORDINARY) COMPANY	LIMITED LIFE COMPANPROTECTED CELL COM	
TYPE OF COMPANY PROPOS	ED UNDER THE COMPAN	IES ORDINANCE 2017
 LIMITED BY SHARES LIMITED BY GUARANTEE – <u>NOT</u> AUTHORISEI LIMITED BY GUARANTEE – AUTHORISED TO UNLIMITED – AUTHORISED TO ISSUE SHARES UNLIMITED – <u>NOT</u> AUTHORISED TO ISSUE SH 	ISSUE SHARES	
□ INTERNATIONAL COMPANY □ I	DOMESTIC COMPANY	□ PROTECTED CELL COMPANY
	SHARE DETAILS	
INDICATE THE ARTICLE NUMBER WHICH SCHEDULE 1 OF THE ORDINANCE:	STIPULATES COMPLIANCE WI	TH THE FOLLOWING SECTION OF
SECTION OF SCHEDULE 1		ARTICLE #
3 (4) (A)		
3 (4) (B)		
INDICATE THE ARTICLE NUMBER (IF APPLI SECTION OF THE ORDINANCE:	CABLE) WHICH STIPULATES CO	MPLIANCE WITH THE FOLLOWING
SECTION OF ORDINANCE		ARTICLE #
7		
13 (1) (C)		
13 (1) (D)		
13 (3)		
13 (4) (A)		
13 (4) (B)		

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• IS THIS A LAND HOLDING COMP	PANY?					
• DOES THIS COMPANY HOLD A B	SUSINESS LICENCE IN A RESTR	ICTED CATEGORY?				
IF YES, PLEASE INDICATE CATE	GORY					
DOES THIS COMPANY HOLD A L IF YES, PLEASE CONFIRM LICEN		NCIAL SERVICES COMMISSON? YES NO				
BANKING	TRUST	COMPANY MANAGEMENT				
□ NATIONAL AND OVERSEA BANKING	D UNRESTRICTED TR	UST 🗆 COMPANY MANAGER				
⊐ NATIONAL BANKING	□ RESTRICTED TRUST	COMPANY AGENT				
⊐ OVERSEA BANKING						
MUTUAL FUND	INVESTMENTS	S 🗆 CREDIT UNION				
□ MUTUAL FUND ADMINISTRATOR	□ INVESTMENT AD	VISOR DI MONEY TRANSMITTERS				
⊐ MUTUAL FUND	D INVESTMENT DEA	ALER				
□ EXEMPT MUTUAL FUNDS						
	INSURANCE					
□ INSURANCE AGENT □ INS	SURANCE SUB-AGENT	DOMESTIC LONG-TERM INSURERS				
□ INSURANCE BROKER □ CR	EDIT LIFE REINSURER	DOMESTIC GENERAL INSURER				
□ INSURANCE MANAGER □ NO	ON-CREDIT LIFE REINSURER	□ NON-DOMESTIC GENERAL INSURERS				
□ PRINCIPAL INSURANCE REPRESENTAT	□ NON-DOMESTIC LONG-TERM INSURERS					
THE FOLLOWING ARE ATTACHED TO THIS FORM						

□ SPECIAL RESOLUTION BY MEMBERS – AUTHORISING APPLICATION TO REGISTER, APPOINTING REGISTERED AGENT AND APPROVING ARTICLES OF INCORPORATION

□ ARTICLES OF INCORPORATION

□ FORM 6 - NOTICE OF DIRECTORS

□ FORM 7 - NOTICE OF MEMBERS

REGISTERED AGENT CONSENT

WE,

(AGENT NAME)

APPLY TO REGISTER THE ABOVE COMPANY AS A COMPANY UNDER THE COMPANIES ORDINANCE 2017. WE FURTHER CONSENT TO ACT AS THE REGISTERED AGENT OF THE COMPANY ON ITS REGISTRATION.

FORM 2F - APPLICATION FOR REGISTRATION BY EXISTING COMPANY - (VERSION MARCH 2018)

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DETAILS OF PERSON SIGNING (ON BEHAL	F OF THE RE	GISTERED AGEN	JT:	
NAME:					
JOB TITLE/POSITION:					
SIGNATURE:					-
DATE:					-
FOR OFFICIAL USE ONLY:					
DATE FILED:				-	
RECEIVED BY:				-	
FEE PAID:	YES 🗆	NO 🗆	$N/A \square$		
AMOUNT PAID:					
ACTION TAKEN:					
DATE ACTION TAKEN:					
NEW REGISTRATION NO.					

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.

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