



COMPANIES REGISTRY
FORM 2D

**TURKS AND CAICOS ISLANDS
COMPANIES ORDINANCE 2017**

(SCHEDULE 1 – NO. 3)

**APPLICATION FOR REGISTRATION BY EXISTING
PROTECTED CELL COMPANY**

COMPANY DETAILS

EXISTING REGISTRATION
NUMBER:

COMPANY NAME:

PROPOSED REGISTERED AGENT DETAILS

REGISTERED NAME:

REGISTERED OFFICE ADDRESS:

STREET

TOWN/CITY

STATE/ISLAND

P.O. BOX

COUNTRY

TELEPHONE/FAX

E-MAIL

WILL THE COMPANY REGISTERED OFFICE BE AT THE REGISTERED OFFICE OF THE REGISTERED AGENT?
YES NO

REGISTERED OFFICE (IF DIFFERENT FROM THE REGISTERED OFFICE ADDRESS OF THE PROPOSED
REGISTERED AGENT)

STREET

TOWN/CITY

STATE/ISLAND

P.O. BOX

COUNTRY

EXISTING ENTITY TYPE

- LIMITED BY SHARES
- EXEMPTED COMPANY NON-EXEMPTED (ORDINARY) COMPANY

TYPE OF COMPANY PROPOSED UNDER THE COMPANIES ORDINANCE 2017

- LIMITED BY SHARES
- INTERNATIONAL COMPANY DOMESTIC COMPANY

SHARE DETAILS

WHAT IS THE TOTAL NUMBER OF SHARES THE COMPANY IS AUTHORISED TO ISSUE?

INDICATE THE ARTICLE NUMBER WHICH STATES THE NUMBER OF SHARES THE COMPANY IS AUTHORISED TO ISSUE:

INDICATE THE ARTICLE NUMBER WHICH STIPULATES COMPLIANCE WITH THE FOLLOWING SECTION OF SCHEDULE 1 OF THE ORDINANCE:

SECTION OF SCHEDULE 1	ARTICLE #
3 (4) (A)	
3 (4) (B)	

INDICATE THE ARTICLE NUMBER (IF APPLICABLE) WHICH STIPULATES COMPLIANCE WITH THE FOLLOWING SECTION OF THE ORDINANCE:

SECTION OF ORDINANCE	ARTICLE #
7	
13 (1) (C)	
13 (1) (D)	
13 (3)	
13 (4) (A)	
13 (4) (B)	

- IS THIS A LAND HOLDING COMPANY? YES NO
- DOES THIS COMPANY HOLD A BUSINESS LICENCE IN A RESTRICTED CATEGORY? YES NO
IF YES, PLEASE INDICATE CATEGORY
- DOES THIS COMPANY HOLD A LICENCE ISSUED BY THE FINANCIAL SERVICES COMMISSON? YES NO
IF YES, PLEASE CONFIRM LICENCE(S) HELD:

- | | | |
|---|---|--|
| BANKING | TRUST | COMPANY MANAGEMENT |
| <input type="checkbox"/> NATIONAL AND OVERSEA BANKING | <input type="checkbox"/> UNRESTRICTED TRUST | <input type="checkbox"/> COMPANY MANAGER |
| <input type="checkbox"/> NATIONAL BANKING | <input type="checkbox"/> RESTRICTED TRUST | <input type="checkbox"/> COMPANY AGENT |
| <input type="checkbox"/> OVERSEA BANKING | | |

MUTUAL FUND

- MUTUAL FUND ADMINISTRATOR
- MUTUAL FUND
- EXEMPT MUTUAL FUNDS

INVESTMENTS

- INVESTMENT ADVISOR
- INVESTMENT DEALER

CREDIT UNION

- MONEY TRANSMITTERS**

INSURANCE

- INSURANCE AGENT
- INSURANCE BROKER
- INSURANCE MANAGER
- PRINCIPAL INSURANCE REPRESENTATIVE
- INSURANCE SUB-AGENT
- CREDIT LIFE REINSURER
- NON-CREDIT LIFE REINSURER
- DOMESTIC LONG-TERM INSURERS
- DOMESTIC GENERAL INSURER
- NON-DOMESTIC GENERAL INSURERS
- 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.

DETAILS OF PERSON SIGNING ON BEHALF OF THE REGISTERED AGENT:

NAME: _____

JOB TITLE/POSITION: _____

SIGNATURE: _____

DATE: _____

FOR OFFICIAL USE ONLY:

DATE FILED: _____

RECEIVED BY: _____

FEE PAID: **YES** **NO** **N/A**

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.