

Company Order Form

Firm (If any)

Date

Contact Person

Phone

Email

Ref No.

SHELF COMPANY SERVICES AUSTRALIA PTY LTD provides a document preparation and registration service. SHELF COMPANY SERVICES AUSTRALIA PTY LTD does not provide legal or professional advice. Any person wishing to register a company should obtain advice from a legal practitioner or accountant to ensure the Company is suitable for its intended use.

Name required

(ASIC register all names in upper case only. If you wish the company register to show the name partly or wholly in lower case please indicate in 'Special instructions')

Is the proposed name identical to an existing business name? ☐ Yes ☐ No if YES, please complete number below

BN/ABN

State

BN/ABN

State

☐ I DECLARE that the owners (proprietors) of the existing business name form part of this new company registration.

Name

Signed

Company Options

- ☐ Full Documentation Hard Copy - including fully completed register, preparation of necessary ASIC lodgements, Bank Account Kit, 3 Copies of the Constitution (including Division 7a Compliant), Deluxe A4 binder, couriered to your door
- ☐ Digital Version (Free of charge if ordering a Full Documentation Hard Copy Version)
- ☐ Common seal required
- ☐ Replace standard A4 binder with A4 blue binder - proudly supporting beyondblue
- ☐ Bookkeeping service available (tick if interested to discuss with Lea)

Will this company act solely as a trustee of a regulated Superannuation Fund? ☐ Yes ☐ No

State Please change state if this company is to be registered outside of QLD.

Consents

- ☐ Consents (signed) officers/shareholders are attached. Verification of Identity (VOI) and Customer Due Diligence (CDD) checks have been performed
- ☐ I/We are holding the required consents from all proposed officers and shareholders. Verification of Identity (VOI) and Customer Due Diligence (CDD) checks have been performed

Registered office

Principal place of business ☐ as above or

Ultimate holding company (if any)

Company Name

ACN

Country of Origin

Special instructions

DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 1

Please include full names of the persons ie Greg John SMITH & if the shareholder is a company ie COMPANY PTY LTD A.C.N. 000 000 000

Name

Address

(ASIC require all location addresses to include a unit and street or lot numbers. A post office box is acceptable for shareholders only.)

Date of birth

Place of birth

Positions Held

☐ Director

☐ Secretary

☐ Public Officer

☐ Shareholder

Shareholdings

Number of ORDINARY Class Shares

Paid \$1.00 p/share or

\$

Unpaid

\$

Number of OTHER Class Shares

Class of Share

Paid \$1.00 p/share or

\$

Unpaid

\$

Are the shares beneficially held?

(This must be completed)

☐ Yes

☐ No

If no, please provide name of holder

(Optional)

Signed Consent

I hereby consent to be named in the ASIC application for registration as a company as:

1. An officer of the company in the capacities indicated above and if a Director, the Director has a Directors ID. All directors must comply with the Director ID requirements. Visit <http://www.abrs.gov.au/>

2. (if indicated above) A shareholder who has agreed to take up the shares listed above and (if the company has elected to have a constitution) who has agreed to the terms of the proposed Shelf Company Services Australia Pty Ltd standard constitution.

Date

Sign Here

Dir. ID

DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 2

Please include full names of the persons ie Greg John SMITH & if the shareholder is a company ie COMPANY PTY LTD A.C.N. 000 000 000

Name

Address

(ASIC require all location addresses to include a unit and street or lot numbers. A post office box is acceptable for shareholders only.)

Date of birth

Place of birth

Positions Held

☐ Director

☐ Secretary

☐ Public Officer

☐ Shareholder

Shareholdings

Number of ORDINARY Class Shares

Paid \$1.00 p/share or

\$

Unpaid

\$

Number of OTHER Class Shares

Class of Share

Paid \$1.00 p/share or

\$

Unpaid

\$

Are the shares beneficially held?

(This must be completed)

☐ Yes

☐ No

If no, please provide name of holder

(Optional)

Signed Consent

I hereby consent to be named in the ASIC application for registration as a company as:

1. An officer of the company in the capacities indicated above and if a Director, the director has a Directors ID. All directors must comply with the Director ID requirements. Visit <http://www.abrs.gov.au/>

2. (if indicated above) A shareholder who has agreed to take up the shares listed above and (if the company has elected to have a constitution) who has agreed to the terms of the proposed Shelf Company Services Australia Pty Ltd standard constitution.

Date

Sign Here

Dir. ID

DETAILS OF PROPOSED OFFICER AND/OR SHAREHOLDER 3

Please include full names of the persons ie Greg John SMITH & if the shareholder is a company ie COMPANY PTY LTD A.C.N. 000 000 000

Name

Address

(ASIC require all location addresses to include a unit and street or lot numbers. A post office box is acceptable for shareholders only.)

Date of birth

Place of birth

Positions Held

☐ Director

☐ Secretary

☐ Public Officer

☐ Shareholder

Shareholdings

Number of ORDINARY Class Shares

Paid \$1.00 p/share or

\$

Unpaid

\$

Number of OTHER Class Shares

Class of Share

Paid \$1.00 p/share or

\$

Unpaid

\$

Are the shares beneficially held?

(This must be completed)

☐ Yes

☐ No

If no, please provide name of holder

(Optional)

Signed Consent

I hereby consent to be named in the ASIC application for registration as a company as:

1. An officer of the company in the capacities indicated above and if a Director, the Director has a Director ID. All directors must comply with the Director ID requirements. Visit <http://www.abrs.gov.au/>

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