

**Ministry of Finance** Corporate and Personal Property Registries www.fin.gov.bc.ca/registries

## NOTICE OF CHANGE **OF ADDRESS**

FORM 2 - BC COMPANY

Sections 35 & 36 Business Corporations Act

Telephone: 250 356-8626

DO NOT MAIL THIS FORM to the Corporate and Personal Property Registries unless you are instructed to do so by registry staff. The Regulation under the Business Corporations Act requires the electronic version of this form to be filed on the Internet at www.corporateonline.gov.bc.ca

Filing Fee for paper filing: \$20.00

If you are instructed by registry staff to mail this form to the Corporate Registry, submit this form with a cheque or money order made payable to the Minister of Finance, or provide the registry with authorization to debit the fee from Your BC Online Deposit Assourt Blacco nov in Consdien

Freedom of Information and Protection of Privacy Act (FIPPA): The personal information requested on this form is made available to the public under the authority of the Business Corporations Act. Questions about how the FIPPA applies to this personal information can be directed to the Administrative Assistant of the Corporate and Personal Property Registries at 250 356-1198, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

dollars or in the equivalent amount of US funds.			
A INCORPORATION NUMBER OF COMPANY			
B NAME OF COMPANY			
C REGISTERED OFFICE ADDRESSES			
DELIVERY ADDRESS OF THE COMPANY'S REGISTER	ED OFFICE		
		PROVINCE	POSTAL CODE
		ВС	
MAILING ADDRESS OF THE COMPANY'S REGISTERE	D OFFICE		
		PROVINCE	POSTAL CODE
		ВС	
D RECORDS OFFICE ADDRESSES DELIVERY ADDRESS OF THE COMPANY'S RECORDS	OFFICE		
DELIVERY ADDRESS OF THE COMPANY S RECORDS	OFFICE	PROVINCE	POSTAL CODE
		ВС	
MAILING ADDRESS OF THE COMPANY'S RECORDS C	PFFICE		
		PROVINCE	POSTAL CODE
		ВС	
E CERTIFIED CORRECT - I have read this fo	orm and found it to be correct.		
The Notice of Change of Address takes effecthis notice is filed with the registrar.	t at the beginning of the day (12:01 a.m. Pacific Tim	ne) following t	the date on which
NAME OF AUTHORIZED SIGNING AUTHORITY FOR THE COMPANY	SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR THE COMPANY	DATE	SIGNED
			YYYY / MM / DD
	×		
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