

INFORMATION FOR FULL REINSTATEMENT OF AN EXTRAPROVINCIAL COMPANY BY THE REGISTRAR

Thank you for your request on how to reinstate an extraprovincial company under section 364.1 of the *Business Corporations Act* (the Act).

WHO CAN APPLY?

Full Reinstatements:

This information package outlines the steps for a **registrar approved full reinstatement** of the registration of a foreign entity as an extraprovincial company by a related person.

A “related person” is defined as:

- 1) in the case of a limited liability company, the limited liability company or a manager or member of the limited liability company, or
- 2) in the case of any other foreign entity, the foreign entity or a director, officer or shareholder of the foreign entity.

If the extraprovincial company owned land at the time of its cancellation **and** the extraprovincial company is no longer active in its home jurisdiction (e.g. it has been dissolved), that land escheats to the Crown under the *Escheat Act*. For additional information on Escheat Claims, contact the Escheat office at 250-356-8819.

Limited Reinstatements:

Information is also available on our website on how to reinstate an extraprovincial company for a limited period. When the limited period expires, the registration of the extraprovincial company is cancelled again.

REGISTRAR APPROVED FULL REINSTATEMENT

**Important! All steps need to be completed
in order shown.**

STEP ONE

The first step in reinstatement is to ensure the name of the foreign entity is available. As the name is no longer protected once it is cancelled, the original name may not be available for reinstatement. If that name is not available, the foreign entity may reserve and adopt an assumed name for use in B.C.

A name reservation is not required if the foreign entity is a federal corporation and Step One can be omitted.

The Name Approval Request form is attached. The fee for this form is \$30.

Please enter on the Name Approval Request form in the “Additional Information” section the word “Reinstatement”.

This information must be indicated on the Reinstatement Application in Item C.

You can apply for your name in the following ways:

OVER THE INTERNET:

Go to Name Requests Online at **www.bcregistrynames.gov.bc.ca** The fee to submit online is \$30 and a BC OnLine service fee of \$1.50.

BY SERVICE BC CENTRE:

Visit your local Service BC Centre office. For a location near you, go to **www.servicebc.gov.bc.ca**

BY ONESTOP SERVICE DELIVERY LOCATION:

Visit your local OneStop service delivery location. User fees may apply. For a location near you, go to **www.bcbusinessregistry.ca**

Note: OneStop service delivery locations are able to assist with some business start-up information. Once your business has been established, the OneStop locations are a great source for business resource materials.

BY BC ONLINE:

If you have a BC OnLine account you can submit your request electronically.

BY MAIL:

Submit your Name Approval Request form, with fee by cheque or money order payable to the Minister of Finance, to the Corporate Registry, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

For information regarding completion of your Name Approval Request form, contact the Corporate Registry at **1 877 526-1526**. Corporate Registry staff **cannot** provide legal or business advice.

The Reinstatement Application and any other reinstatement documents required by the registrar cannot be processed until the name has been approved and reserved.

Note: Once your name is approved, it is reserved for you for a period of 1 year plus 56 calendar days.

STEP TWO

Step 2(A)

The applicant for reinstatement must publish in the British Columbia Gazette, notice that an application to reinstate the registration of a foreign entity as an extraprovincial company will be made to the registrar.

For information on the gazetting process, including the publication deadline date (notices must reach the British Columbia Gazette, no later than 1:30 p.m. on the date indicated on their Insertion Schedule) and the fees required, contact Crown Publications www.crownpub.bc.ca

Sample wording for the gazette notice for a Reinstatement Application:

REINSTATEMENT APPLICATION

Take notice that a reinstatement application will be made to the registrar of companies to reinstate: **[insert company name], [insert registration number]**.

Dated at **[insert city]**, B.C., this **[insert day]** day of **[insert month]**, **[insert year]**.
– **[insert name of person applying for gazette notice], [insert relationship to company]**

A copy of the British Columbia Gazette publication containing your notice will be mailed to you by Queen's Printer.

Enter the date of publication in Item H of the Reinstatement Application you submit to the Corporate Registry (see Step Three).

Step 2(B)

The applicant for reinstatement must also mail a notice of the application for reinstatement to the last address shown as the mailing address of the registered office of the extraprovincial company or, if the mailing address is not shown, to the last address shown in the Corporate Register. This notice can be a copy of the notice placed in the British Columbia Gazette (see above). A search to determine the last registered address can be made by contacting the Corporate Registry. BC OnLine clients can obtain a search online at www.corporateonline.gov.bc.ca Enter the date you mailed this notice to the company's registered office in Item H of the Reinstatement Application you will submit to the Corporate Registry (see Step Three).

STEP THREE

The Reinstatement Application Full Reinstatement, **Form 31**, attached is to be completed and submitted to the Corporate Registry for filing. Other outstanding filings of Annual Reports, as well as the appropriate fees, must accompany the Reinstatement Application.

All filings must include the fees as follows:

Reinstatement Application	\$350.00
Each Annual Report	\$ 43.39
Priority Service (optional)	\$100.00

All filings are processed on a first-come, first-served basis unless you pay an additional priority fee. If you wish the filings to be processed on a priority basis, an additional \$100 for each service will be required. **Note: Filing on a priority basis will not waive the 21-day waiting period.**

If the filings are being submitted on a priority basis, clearly indicate on both the envelope and the filings that the submission is a priority.

A priority service is considered completed when the document is filed or the service request is completed. Turnaround is usually within 24 hours.

Send your filings, with cheque or money order payable to the Minister of Finance, to:

Mailing Address:

Corporate Registry
PO Box 9431 Stn Prov Govt
Victoria BC V8W 9V3

STEP FOUR

Once the Reinstatement Application, and any other outstanding filings such as Annual Reports, meet all requirements and have been filed, the company will be reinstated. See Item H of the Reinstatement Application for the conditions on the effective date of reinstatement.

Once the extraprovincial company is reinstated, the registrar will:

- Publish notice of the reinstatement or extension on the Queen's Printer website www.bclaws.ca
- Issue a certificate and, if requested to do so, provide a certified copy of the Reinstatement Application to the extraprovincial company.
- Issue a copy of the certificate to the applicant.

ADDITIONAL INFORMATION

For information regarding completion of your reinstatement documentation, contact the Corporate Registry at 1 877 526-1526. Corporate Registry staff cannot provide legal or business advice.

**CHECKLIST
FULL REINSTATEMENT
BY REGISTRAR**

Make sure you have everything in order before you take the final step and submit your reinstatement documents for filing.

- An approved / reserved corporate name
- Notice of Application for Reinstatement “**Notice**” has been published in the BC Gazette
- Copy of **Notice** has been mailed to the company’s address as listed with the Corporate Registry

Send the following to BC Registries and Online Services:

- Reinstatement Application Full Reinstatement, **Form 31**, completed and signed
- Annual Report, **Form 35**, completed and signed for each outstanding report.
- Cheque/money order payable to the Minister of Finance or authorization to debit your BC OnLine account for the applicable filing fees



BC Registries and Online Services

NAME REQUEST

NAME APPROVAL NUMBER **NR**

Important: Use this number on all documents and in the electronic submission of documents.

Telephone: 1 877 526-1526
www.bcregistrieservices.gov.bc.ca

Mailing Address: PO Box 9431 Stn Prov Govt
Victoria BC V8W 9V3

Courier: 200-940 Blanshard Street
Victoria BC V8W 3E6

INSTRUCTIONS:

- Please retain a copy for your records. If the request is mailed, the Name Reservation section will notify you by letter or email once your request is completed.
- Please type or print clearly.
- **SHADED AREAS ARE FOR OFFICE USE ONLY.**

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the *FOIPPA and the Societies Act* for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Manager of Registries Operations at 1 877 526-1526.
PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3

PRIORITY REQUEST – Additional fee required	
<input type="checkbox"/> YES – This is a priority request and I have enclosed an additional fee for this service.	
ROUTING SLIP NO.	DEBIT BCOL ACCOUNT NO.
FOLIO NO.	DEPOSIT ACCOUNT TRANSACTION NO.
GOVT. AGENT TRANSACTION DATE YYYY MM DD	DATE RECEIVED YYYY MM DD

APPLICANT SURNAME		FIRST NAME AND INITIALS	
ADDRESS			
CITY		PROVINCE	POSTAL CODE
APPLICANT PHONE NO.	COMPLETE THIS SECTION FOR RESULTS BY EMAIL EMAIL ADDRESS	CONTACT PERSON NAME	

Indicate what the name request is for: (In order for this request to be completed, one box must be (✓) ticked)

CORPORATION (INCLUDES A FOREIGN CORPORATION)
 PROPRIETORSHIP/PARTNERSHIP
 SOCIETY
 FINANCIAL INSTITUTION
 COOPERATIVE ASSOCIATION

Is this request for a foreign corporation incorporated in another province or country? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, ENTER THE JURISDICTION	NATURE OF BUSINESS
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ADDITIONAL INFORMATION

Name Request (first choice) PLEASE TYPE OR PRINT CLEARLY

Name Request (second choice) PLEASE TYPE OR PRINT CLEARLY

Name Request (third choice) PLEASE TYPE OR PRINT CLEARLY



Telephone: 1 877 526-1526 www.bcregistryservices.gov.bc.ca

Mailing Address: PO Box 9431 Stn Prov Govt Victoria BC V8W 9V3

Courier: 200-940 Blanshard Street Victoria BC V8W 3E6

INSTRUCTIONS:

Please type or print clearly in block letters and ensure that the form is signed and dated in ink.

- Item A The registration number is the number assigned to the foreign entity when it is registered as an extraprovincial company in BC.
Item B Enter the name of the extraprovincial company exactly as it was shown on the Certificate of Registration at the time its registration was cancelled.
Item C Enter the name reserved for the foreign entity. This name would be the foreign entity's name in its home jurisdiction OR, if that name is not available, the assumed name reserved for the foreign entity. A name reservation is not required if the foreign entity is a federal corporation.
Item D Enter the identifying number in the foreign entity's current jurisdiction.
Item E If the applicant is a corporation or firm, enter the full name of the corporation or firm.
Item I Enter the delivery address and mailing address of the head office of the foreign entity, whether or not the head office is in BC. The delivery address must be for a location that is accessible to the public between 9 a.m. and 4 p.m. on business days for the delivery of records. The delivery address must not be a post office box.

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Societies Act for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Manager of Registries Operations at 1 877 526-1526. PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3

- Item J Optional if the foreign entity's head office is in BC. An attorney may be an individual or a BC company. If the attorney is a BC company, enter the full name of the BC company.
Item K Enter the mailing and delivery address for the attorney. This delivery address must be for a location in BC that is accessible to the public between 9 a.m. and 4 p.m. on business days for the delivery of records. The delivery address must not be a post office box.
Item L If the applicant is a corporation or firm, this form must be signed by an authorized signing authority for that corporation or firm.
Filing Fee: \$350.00
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 Account. Please pay in Canadian dollars or in the equivalent amount of US funds.

★ PLEASE ENTER THE COMPANY EMAIL ADDRESS FOR CORRESPONDENCE

A REGISTRATION NUMBER IN BC

B NAME OF EXTRAPROVINCIAL COMPANY AT THE TIME THE REGISTRATION WAS CANCELLED

C NAME RESERVED FOR THE FOREIGN ENTITY

Complete section 1,2 OR 3

- 1. The name _____ being the foreign entity's own name has been reserved. The name reservation number is _____
2. The foreign entity's own name _____ is not available and, therefore, the assumed name _____ has been reserved. The name reservation number for the assumed name is _____
3. No name has been reserved because the foreign entity is a federal corporation with the name _____

D CORPORATE NUMBER IN FOREIGN ENTITY'S JURISDICTION

Corporate number assigned to the foreign entity by its current jurisdiction _____

D FULL NAME OF APPLICANT

FIRST NAME | MIDDLE NAME | LAST NAME

CORPORATION / BUSINESS NAME

E MAILING ADDRESS OF APPLICANT

MAILING ADDRESS | CITY | PROV/STATE | COUNTRY | POSTAL CODE/ZIP CODE

F RELATIONSHIP OF APPLICANT TO THE FOREIGN ENTITY - Check applicable box:

I am related to the foreign entity and I am:

the foreign entity that is to have its registration reinstated as an extraprovincial company by this application

a shareholder of the foreign entity

a director of the foreign entity

a manager if the foreign entity is a Limited Liability Company

an officer of the foreign entity

a member if the foreign entity is a Limited Liability Company

G DATE OF REINSTATEMENT

The registration of the foreign entity as an extraprovincial company will not be reinstated until 21 days after the later of the following two dates (both dates must be entered):

The date the Notice of the Application for Reinstatement was published in the BC Gazette.

YYYY/MM/DD

The date the Notice of the Application for Reinstatement was mailed to the extraprovincial company.

YYYY/MM/DD

E HEAD OFFICE ADDRESSES

DELIVERY ADDRESS OF HEAD OFFICE | CITY | PROV/STATE | COUNTRY | POSTAL CODE/ZIP CODE

MAILING ADDRESS OF HEAD OFFICE | CITY | PROV/STATE | COUNTRY | POSTAL CODE/ZIP CODE

D NAME OF ATTORNEY(S) IF ANY - Attach additional sheet if required.

FIRST NAME | MIDDLE NAME | LAST NAME

CORPORATION / BUSINESS NAME

I ATTORNEY(S) ADDRESSES

DELIVERY ADDRESS OF ATTORNEY | CITY | POSTAL CODE

Prov.
BC

MAILING ADDRESS OF ATTORNEY | CITY | POSTAL CODE

Prov.
BC**L CERTIFIED CORRECT - I have read this form and found it to be correct.**

Note: It is an offence to make a false or misleading statement in respect of a material fact in a record submitted to the Corporate Registry for filing. See section 427 of the Business Corporations Act.

NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE SIGNED
YYYY / MM / DD

X

M DELIVERY METHOD - Choose one delivery method for the company's certified documents.

Company Email Other Email
Address

Pickup (Victoria only) Contact Person Telephone

By Mail to the Company's Head Office Mailing Address

By Mail to another address. Please specify.

MAILING ADDRESS	CITY	PROV/STATE	COUNTRY	POSTAL CODE/ZIP CODE
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Telephone: 1 877 526-1526 www.bcregistryservices.gov.bc.ca

DO NOT MAIL THIS FORM to BC Registry Services 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

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Business Corporations Act for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Manager of Registries Operations at 1 877 526-1526. PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3

★ PLEASE ENTER THE COMPANY EMAIL ADDRESS FOR CORRESPONDENCE

A REGISTRATION NUMBER OF EXTRAPROVINCIAL COMPANY

B NAME OF EXTRAPROVINCIAL COMPANY

C REGISTRATION DATE IN BC YYYY/MM/DD

D DATE OF ANNUAL REPORT YYYY/MM/DD

E FOREIGN JURISDICTION INFORMATION

Extrajurisdictional company's current jurisdiction

Extrajurisdictional company's date of incorporation, continuation, amalgamation or organization in current jurisdiction YYYY/MM/DD

Extrajurisdictional company's identifying number in current jurisdiction

F COMPANY CHANGES

An extrajurisdictional company must file with the registrar a notice of any change to the information shown in the corporate register.

If there has been any change to the following:

- the extrajurisdictional company's jurisdiction, either by way of continuation, amalgamation or similar process;
• the identifying number or name of the extrajurisdictional company; or
• the mailing or delivery address of the head office of any attorney;

please visit our website at www.bcregistryservices.gov.bc.ca or phone 1 877 526-1526 for information on how to file these changes.

G CERTIFIED CORRECT - I have read this form and found it to be correct.

Note: It is an offence to make a false or misleading statement in respect of a material fact in a record submitted to the Corporate Registry for filing. See section 427 of the Business Corporations Act.

NAME OF AUTHORIZED SIGNING AUTHORITY FOR THE EXTRAPROVINCIAL COMPANY

SIGNATURE OF AUTHORIZED SIGNING AUTHORITY FOR THE EXTRAPROVINCIAL COMPANY

DATE SIGNED YYYY / MM / DD

X

