

# BC Unlimited Liability Company ALTERATION NOTICE

BUSINESS CORPORATIONS ACT, section 257(4)

Telephone: 1 877 526-1526 Mailing Address: PO Box 9431 Stn Prov Govt Courier Address: 200 – 940 Blanshard Street Victoria BC V8W 9V3 Victoria BC V8W 3E6

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.

NAME OF COMPANY			
ALTERATIONS TO THE NOTICE OF ARTICLES			
Please indicate what information on the Notice of Arti	icles is to be altered:		
("altered" means create, add to, vary or delete)			
Company name	Date of a Resolution or Court Order		
A translation of company name	(applies to special rights or restrictions only)		
Pre-existing Company Provisions	Authorized Share Structure		
ALTERATION EFFECTIVE DATE - Choose one of the	following:		
The alteration is to take effect at the time that t	this notice is filed with the registrar.		
	YYYY / MM / DD		
The alteration is to take effect at 12:01a.m. Page			
The alteration is to take effect at 12:01a.m. Pac being a date that is not more than ten days after	cific Time on		
	cific Time on		
	cific Time on er the date of the filing of this notice.		
being a date that is not more than ten days after	cific Time on er the date of the filing of this notice.  YYYY/MM/DD  a.m. or p.m. Pacific Time on		
being a date that is not more than ten days after the alteration is to take effect at being a date and time that is not more than ten	cific Time on er the date of the filing of this notice.  YYYY/MM/DD  a.m. or p.m. Pacific Time on		
being a date that is not more than ten days after the alteration is to take effect at being a date and time that is not more than ten CHANGE OF COMPANY NAME	cific Time on er the date of the filing of this notice.  YYYYY/MM/DD  a.m. or p.m. Pacific Time on days after the date of the filing of this notice.		
being a date that is not more than ten days after the alteration is to take effect at being a date and time that is not more than ten	cific Time on er the date of the filing of this notice.  YYYY/MM/DD  a.m. or p.m. Pacific Time on		
being a date that is not more than ten days after the lateration is to take effect at being a date and time that is not more than ten CHANGE OF COMPANY NAME  The company is to change its name from	cific Time on er the date of the filing of this notice.  YYYY/MM/DD  a.m. or p.m. Pacific Time on days after the date of the filing of this notice.		
The alteration is to take effect at being a date and time that is not more than ten  CHANGE OF COMPANY NAME  The company is to change its name from to (choose one of the following):	cific Time on er the date of the filing of this notice.  YYYY/MM/DD  a.m. or p.m. Pacific Time on days after the date of the filing of this notice.		

Additions: Set out every new translation of the company name that the company intends to use outside of Canada.

FORM 11 ULC (JUL 2017) Page 1

Changes: Change the follow	ing translation(s)	of the company r	name:				
PREVIOUS TRANSLATION OF THE CO	MPANY NAME	N	IEW TRANSLATIO	ON OF THE COMPANY	/ NAME		
Deletions: Remove the follo	wing translation(s	s) of the company	name:				
	9 (1	, ,					
G PRE-EXISTING COMPANY PRO Complete this item only if the				-		-	Act)
to this company.	company has reso	nved that hone of	the Fie-exist	ing Company Fit	ovisions are	ιο αμμιγ	
The company has resolv	red that the Pre-ev	isting Company P	rovisions are	no longer to an	alv to this co	mnany	
		isting Company i	TOVISIONS are	The longer to app	Diy to tilis co	пірапу.	
H AUTHORIZED SHARE STRUCT	URE						
An unlimited liability company				-	_		
The shareholders of this compa provided in section 51.3 of the			satisfy the de	bts and liabilities	of this comp	any to the ex	xtent
Set out the date of each resolu	tion or court order	altering special rig	ints or restrict	ions attached to	a class or se	ries of share	S.
TTTT/WWW/DD							
Set out the new authorized	share structure						
	Maximum numb	er of shares of this				Are there s	special rights
		ares that the company e, or indicate there is no		nd of shares of this cla or series of shares.	ass	or restriction	ons attached of this class or
		m number.		or series or shares.			f shares?
Identifying name of class or series of shares	THERE IS NO MAXIMUM	MAXIMUM NUMBER OF SHARES	WITHOUT PAR VALUE	WITH A PAR VALUE OF	Type of	YES (✔)	NO (V)
or series of shares	<b>(✔</b> )	AUTHORIZED	<b>(✓</b> )	VALUE OF (\$)	currency	(•)	()
						+	
CERTIFIED CORRECT - I have	read this form an	nd found it to be o	correct.				
NAME OF AUTHORIZED SIGNING AUTHO	DRITY	SIGNATURE OF A		NING AUTHORITY	DAT	E SIGNED	
FOR THE COMPANY		FOR THE COMPAN	VΥ			YYYY / MM	/ DD
		X					
					1		

# **NOTICE OF ARTICLES**

#### **B.C. UNLIMITED LIABILITY COMPANY STATEMENT**

The shareholders of this company are jointly and severally liable to satisfy the debts and liabilities of this company to the extent provided in section 51.3 of the *Business Corporations Act*.

### A NAME OF COMPANY

Set out the name of the company as set out in Item B or Item E of the Notice of Alteration.

### **B** TRANSLATION OF COMPANY NAME

Set out every translation of the company name that the company intends to use outside of Canada.

# C DIRECTOR NAME(S) AND ADDRESS(ES)

Set out the full name, delivery address and mailing address (if different) of every director of the company. The director may select to provide either (a) the delivery address and, if different, the mailing address for the office at which the individual can usually be served with records between 9 a.m. and 4 p.m. on business days or (b) the delivery address and, if different, the mailing address of the individual's residence. The delivery address must not be a post office box. Attach an additional sheet if more space is required.

LAST NAME	FIRST NAME		MIDDLE NAME	
DELIVERY ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
MAILING ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
LAST NAME	FIRST NAME		MIDDLE NAME	
DELIVERY ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
MAILING ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
LAST NAME	FIRST NAME		MIDDLE NAME	
DELIVERY ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
MAILING ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
LAST NAME	FIRST NAME		MIDDLE NAME	'
DELIVERY ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE
MAILING ADDRESS		PROVINCE/STATE	COUNTRY	POSTAL CODE/ZIP CODE

FORM 11 ULC (JUL 2017) Page 3

D REGISTERED OFFICE ADDRESSES		
DELIVERY ADDRESS OF THE COMPANY'S REGISTERED OFFICE		
	PROVINCE	POSTAL CODE
	ВС	
MAILING ADDRESS OF THE COMPANY'S REGISTERED OFFICE		'
	PROVINCE	POSTAL CODE
	ВС	
E RECORDS OFFICE ADDRESSES	'	
DELIVERY ADDRESS OF THE COMPANY'S RECORDS OFFICE	DDOVINGE	POSTAL CODE
	PROVINCE	POSTAL CODE
	ВС	
MAILING ADDRESS OF THE COMPANY'S RECORDS OFFICE		
	PROVINCE	POSTAL CODE
	ВС	
F AUTHORIZED SHARE STRUCTURE		

An unlimited liability company must set out on the face of each share certificate issued by it the following statement: The shareholders of this company are jointly and severally liable to satisfy the debts and liabilities of this company to the extent provided in section 51.3 of the *Business Corporations Act*.

	Maximum number of shares of this class or series of shares that the company is authorized to issue, or indicate there is no maximum number.		Kind of shares of this class or series of shares.			Are there special rights or restrictions attached to the shares of this class or series of shares?	
Identifying name of class or series of shares	THERE IS NO MAXIMUM (✔)	MAXIMUM NUMBER OF SHARES AUTHORIZED	WITHOUT PAR VALUE (✔)	WITH A PAR VALUE OF (\$)	Type of currency	YES (✔)	NO (V)

FORM 11 ULC (JUL 2017) Page 4