

New West Partnership Trade Agreement

FORM 47(N) Extraprovincial Company

APPLICATION TO CORRECT THE CORPORATE REGISTER

Telephone: 1877526-1526 Mailing Address: PO Box 9431 Stn Prov Govt Courier Address: 200 - 940 Blanshard Street Victoria BC V8W 9V3 Victoria BC V8W 3E6 Email: bcregistries@gov.bc.ca

INSTRUCTIONS:

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

If you require assistance, please contact Registries at 1 877 526-1526.

The Application to Correct the Corporate Register form is to be used to correct some types of information in a record that was filed with the registrar.

Future Effective Dates: If a record has a future effective date and an error is found before the specified date and time of the filing, the record must be withdrawn, corrected and re-filed.

Enter the name exactly as shown on the Certificate of Incorporation, Registration, Item B Amalgamation, Continuation, or Change of Name.

Item C Indicate the record to be amended and the date and time that record was filed. Enter the reason for the amendment including what the record stated at the time of filing. For example: Notice of Change of Directors, filed November 23, 2004, Director's name spelled incorrectly - John Smith should have read John Smythe. Supporting

documentation may be requested.

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 Executive Coordinator of the BC Registry Services at 1 877 526-1526, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

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Item D If the applicant is a corporation or firm, enter the full name of the corporation or firm. Item E The applicant must be an authorized signing authority for the company. If the applicant is a corporation or firm, this form must be signed by an authorized signing authority for that corporation or firm. A REGISTRATION NUMBER OF CORPORATION **B** NAME OF CORPORATION C RECORD TO BE AMENDED Name of Record to be Amended: YYYY / MM / DD Record's Original and Time | a.m. or | p.m. Pacific Time Filed Date: Reason for Amendment: **FULL NAME OF APPLICANT** LAST NAME FIRST NAME MIDDLE NAME CORPORATION OR FIRM NAME **E CERTIFIED CORRECT** – I have read this form and found it to be correct. DATE SIGNED NAME OF APPLICANT SIGNATURE OF APPLICANT YYYY / MM / DD X