COMPANIES · GOVERNANCE

Adopt a new constitution.

A new company constitution with the members' special resolution and ASIC notification.

TIME TO COMPLETE	RETURN TO	QUESTIONS
5 min	team@cosecpartners.com.au	1300 226 226

FILLING THIS FORM

Type straight into the fields in Adobe Acrobat Reader, or print and complete by pen. **Required fields** are marked with an oxblood asterisk. Tick every box that applies and skip any section that does not apply to your order.

01 The company.

COMPANY NAME *		ACN *	
MEETING ADDRESS			

02 Officeholders & members.

Up to four. Attach a schedule for more.

01 OFFICEHOLDER OR MEMBER

SURNAME OR COMPANY *	GIVEN NAMES OR ACN *

RESIDENTIAL ADDRESS *

DATE OF BIRTH	PLACE OF BIRTH *town, state, country*

☐ Director ☐ Secretary ☐ Member

02 OFFICEHOLDER OR MEMBER

SURNAME OR COMPANY	GIVEN NAMES OR ACN

RESIDENTIAL ADDRESS

DATE OF BIRTH	PLACE OF BIRTH *town, state, country*

☐ Director ☐ Secretary ☐ Member

03 OFFICEHOLDER OR MEMBER

SURNAME OR COMPANY	GIVEN NAMES OR ACN

RESIDENTIAL ADDRESS

DATE OF BIRTH	PLACE OF BIRTH *town, state, country*

☐ Director ☐ Secretary ☐ Member

04 OFFICEHOLDER OR MEMBER

SURNAME OR COMPANY	GIVEN NAMES OR ACN

RESIDENTIAL ADDRESS

DATE OF BIRTH	PLACE OF BIRTH *town, state, country*

☐ Director ☐ Secretary ☐ Member

03 Additional notes.

Anything else we should know, or instructions for this order.

NOTES AND INSTRUCTIONS	

04 Your firm.

The firm or person placing this order with CoSec Partners.

FIRM *			
INDUSTRY	☐ Accounting ☐ Legal ☐ Financial planning ☐ Other		
CONTACT NAME *		PHONE *	
EMAIL *		PO NUMBER *if any*	
STREET ADDRESS			
SUBURB		STATE	POSTCODE
DOCUMENTS	☐ PDF by email ☐ PDF plus printed, bound and delivered		

05 Declarations & signature.

BY SIGNING BELOW **I/we confirm each of the following.**

01 ☐ The information in this form is true and correct at the time of signing.

02 ☐ Every person named in this form has consented to their details being given to CoSec Partners, and to ASIC, the ATO or a solicitor where needed to complete this order.

03 ☐ **Appointment of agent.** To CoSec Partners: You are appointed to act as our agent to procure a constitution and ancillary legal documentation from a solicitor, on the particulars set out in this form, and to lodge the required forms with ASIC on our behalf. We will pay you the amounts agreed.

04 ☐ **No advice.** We understand CoSec Partners does not provide legal, accounting, financial or stamp duty advice and takes no responsibility for taxation, legal or other liabilities arising from work done on our instructions. We have obtained our own advice on this transaction.

SIGNATURE OF AUTHORISED PERSON | FULL NAME | DATE

06 Payment & submission.

PAYMENT

We invoice on receipt. We review your order, send an itemised invoice with a secure card payment link, and proceed on settlement. EFT is also available: **ANZ, BSB 015-056, Account 225 324 305**, reference: company name. Please do not write card details on this form. Current pricing is at cosecpartners.com.au.

Three ways to *return this form.*

EMAIL
team@cosecpartners.com.au

PORTAL
cosecpartners.com.au/portal

PHONE
1300 226 226