Directorate of Investment and Company Administration

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Form A-4 | Application for incorporation as an unlimited company

Section 6, Myanmar Companies Law 2017

Note

If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.

1. Proposed name of company

Propo	sed name	e of compa	any in E	nglish (required))
Note:	must have	"Unlimited	" as the	last word	d of its naı	ne.

Proposed name of company in Myanmar language (optional)

If the proposed name of company is identical to, or closely resembles, the name of a company which is already registered, the name can only be used if the other company is in the course of being dissolved and a copy of the dissolving company's consent is attached to this Application, if applicable.

2. Upon incorporation the company will be a foreign company:

A "foreign company" means a company incorporated in the Union in which an overseas corporation or other foreign person (or combination of them) owns or controls, directly or indirectly, an ownership interest of more than thirty-five per cent.

Yes

3. Name and address of applicant

The applicant is the person or entity applying to register the company and does not need to be a shareholder or director of the company.

name in Myanmar language (opt	ional)	
· · · · · ·		
ionality	N.R.C (Myanmar citizen	s) / Passport No. (foreign citizens only
lress for applicant in English		
Street number and street name		
Unit, level, etc. (if applicable)		
Quarter/City/Township		
State/Region	Country	Postcode (optional)
	nail is required to receive notifications)	

No

4. Name, address and other information for each director

By signing this Application, the Applicant affirms that the persons named below are the initial directors of the company. The Applicant attests that each person named as a director has consented in writing to act in this capacity.

Notes 1) The company must hold evidence of each director's written consent with the company records.

- 2) At least one director must be ordinarily resident in the Union.
- 3) You <u>must</u> provide the name and address for each director in English. You <u>may</u> also provide the name in Myanmar language.
- 4) If there are more than 3 initial directors please submit additional pages with this Application that contain the required information.
- 5) A copy of each director's national registration card (N.R.C) for Myanmar citizens and passport for foreign citizens must be attached to this Application.

A. First director

Full name in English (required)

Former name of this person, if applicable, in English

Full name in Myanmar (optional)

Former name of this person, if applicable, in Myanmar language (optional)

Nationality	N.R.C. (for Myanmar citizens) / Passport (for foreign citizens only)

Other nationalities, if applicable

Business occupation, if any

Female

Gender

Date of birth

	Male

/

Usual residential address for this director in English (required)

Street number and street name Unit, level, etc. (if applicable) Quarter/City/Township State/Region Country Postcode (optional) Email address (optional, but an email is required to receive notifications)

/

B. Second director

Former name of this person, if applicable, in English	
-ull name in Myanmar (optional)	
Former name of this person, if applicable, in Myanmar language (optional)	
Nationality N.R.C. (for Myanmar citizens) / Passport (for foreign citizens only)	
Other nationalities, if applicable	
Business occupation, if any	
Gender Date of birth	
Male Female / /	
Jsual residential address for this director in English (required) Street number and street name	
List lovel etc. (if applicable)	
Unit, level, etc. (if applicable)	
Quarter/City/Township	
State/Region Country Postcode (optional)	
Email address (optional, but an email is required to receive notifications)	
Phone Number (optional, but a phone number is required to receive notifications)	

C. Third director

Full name in English (required)	
Former name of this person, if applicable, in En	ıglish
Full name in Myanmar (optional)	
Former name of this person, if applicable, in My	yanmar language (optional)
Nationality	N.R.C. (for Myanmar citizens) / Passport (for foreign citizens only)
Other nationalities, if applicable	
Business occupation, if any	
Gender Date of birth Male Female	/
Usual residential address for this director i Street number and street name	in English (required)
Unit, level, etc. (if applicable)	
Quarter/City/Township	
State/Region	Country Postcode (optional)
Empil address (aptional but an empili	
Email address (optional, but an email i	
Phone Number (optional, but a phone	number is required to receive notifications)

5. Name, address and other information for secretary, if applicable

A company may have a secretary, but this is not required.

By signing this Application, the Applicant affirms that the person named below is the initial secretary of the company. The Applicant attests that the person named as secretary has consented in writing to act in this capacity.

Note: 1) The company must hold evidence of the secretary's written consent with the company records.
2) A copy of the secretary's national registration card (N.R.C) for Myanmar citizens and passport for foreign citizens <u>must</u> be attached to this Application.

Full name in English (required)	
Former name of this person, if applicable	e, in English
	· •
Full name in Myanmar (optional)	
Former name of this person, if applicable	e, in Myanmar language (optional)
Nationality	N.R.C. (for Myanmar citizens) / Passport (for foreign citizens only)
Other nationalities, if applicable	
Business occupation, if any	
Gender Date of birt	;h
Male Female	/ /
Usual residential address in English (Street number and street name	
Unit, level, etc. (if applicable)	
Quarter/City/Township	
State/Region	Country Postcode (optional)
Email address	
Phone Number	

6. Registered office address in English

Street number and street name

Unit, level, etc. (if applicable)

Quarter/City/Township	
State/Region	Postcode (optional)

7. Address of principal place of business in the Union in English (if different to registered office)

St	treet number and street name		
U	nit, level, etc. (if applicable)		
	uarter/City/Township		
Ĺ	dater ery rownship		
St	tate/Region		Postcode (optional)
8. Share	capital		
A. Total nu	umber of shares of all classes to be issued by the company:		
B. The cur (MMK or U	rency in which the company's share capital is to be denominated: JSD)		
C. Does th	e company have an ultimate holding company? Yes	No	

This question only applies if the company has a member which is a corporate entity. "Ultimate holding company", in relation to a body corporate, means a body corporate that is a holding company of the first-mentioned body corporate and is itself not a subsidiary of any body corporate.

Name of ultimate holding company	
Registration number (if applicable)	Jurisdiction of incorporation

D. Share capital structure

Share class code	Full title of class if not listed in the share class code table below	Total number of shares	Total amount paid on these shares (if applicable)	Total amount unpaid on these shares (if applicable)

The following are standard share codes that may be used to complete the table above. If the company will have a class of shares that does not appear in this table below please enter the full title of the class in the space provided above.

Share class code	Full title of share class	
ORD	Ordinary	
A	Class A shares	

В	Class B shares
С	Class C shares
EMP	Employee's shares
MGM	Management shares
RED	Redeemable shares
PRF	Preference shares
REDP	Redeemable-Preference shares

9. Members

Instructions for completing member information

If there is insufficient space please attach additional pages with this Application containing the required information.

By signing this Application, the Applicant attests that each person named as a member has consented in writing to act in this capacity and subscribe for the shares to be allotted to them.

A. Members that are natural persons

i) First member that is a natural person

Full name in English (required)		
ull name in Myanmar language (optional)		
lationality	N.R.C. (for Myanmar citizens) / Pas	ssport (for foreign citizens only)
ther nationalities, if applicable] L	
ender Date of birth Male Female /	/	
Address in English (required) Street number and street name		
Unit, level, etc. (if applicable)		
Quarter/City/Township		
State/Region	Country	Postcode (optional)

Shareholding details

Share class code	Full title of class if not listed in the share class code table	Total number of shares	Total amount paid on these shares (if applicable)	Total amount unpaid on these shares (if applicable)

Seco	ond member tha	t is a natural person				
		-				
ll nan	ne in English (require	ed)				
ıll nan	ne in Myanmar langu	uage (optional)				
ationa	lity		N.R.C. (for M	yanmar citizens) /	Passport (for foreign ci	tizens only)
ther n	ationalities, if applic	able				
Gende	r	Date of birth				
	ale 🗌 Female					
		/	/			
Add	ress in English (requ					
	Street number and	street name				
	Unit, level, etc. (if a	applicable)				
	Quarter/City/Towr	nship				
	State/Region		Country		Post	code (optional)

Shareholding details

Share class code	Full title of class if not listed in the share class code table	Total number of shares	Total amount paid on these shares (if applicable)	Total amount unpaid on these shares (if applicable)

B. Members that are corporate entities

Name of company

Registration number Jurisdiction of incorporation

Address in English in home jurisdiction (for entities not registered in the Union)

Street number and street name

Unit, level, etc. (if applicable)		
Quarter/City/Township		
State/Region	Country	Postcode (optional)

Shareholding details

Share class code	Full title of class if not listed in the share class code table	Total number of shares	Total amount paid on these shares (if applicable)	Total amount unpaid on these shares (if applicable)

10. Constitution

The Company must attach a copy of its constitution certified by the Applicant to this Application.

By signing this Application, the Applicant hereby certifies that the company has attached a true and correct copy of its constitution certified by the Applicant to this form.

11. Signed by Applicant

I certify that the information in this form and any document attached to this form are true and correct.

Signature: ______

Full name in English (required)

12. Lodged by

Name:		
Address:		

Telephone:		

Email:

13. Checklist:

The following must accompany this application form-

 \Box Any additional pages required to supply the information required by this application.

A copy of the N.R.C (for Myanmar citizens) or passport (for foreign citizens) for each director and secretary (if any).

 \Box A copy of the constitution certified by the Applicant.

If the proposed company name is already in use, attach the dissolving company's consent to this application.

The prescribed filing fee.