



## Company Incorporation Full Service Order Form

### What you are required to do to order your Company:

1. Complete all relevant fields in BLOCK LETTERS
2. Fax this form to Topdocs at (03) 8256 0108; or email this form to Topdocs at [orders@topdocs.com.au](mailto:orders@topdocs.com.au)

### SECTION A (I): PERSON / ADVISOR ORDERING DETAILS

|   |  |            |   |                  |                          |    |                          |
|---|--|------------|---|------------------|--------------------------|----|--------------------------|
| <b>YOUR NAME</b>  |  |            |   | <b>Signature</b> |                          |    |                          |
| <b>YOUR COMPANY NAME</b>  |  |            |   |                  |                          |    |                          |
| <b>YOUR POSTAL ADDRESS</b>  |  |            |   |                  |                          |    |                          |
| <b>DATE OF ORDER</b>  |  |            | / | /                | <b>Your Ref.</b>         |    |                          |
| <b>Phone</b>  |  | <b>Fax</b> |   | <b>Email</b>     |                          |    |                          |
| Would you like to order a Company Seal for the Company, for an additional \$44? |  |            |   | YES              | <input type="checkbox"/> | NO | <input type="checkbox"/> |

### SECTION A (II): PAYMENT DETAILS

Enclosed is Payment for a COMPANY INCORPORATION for the sum of \$

Direct Debit\*  Visa Card  MasterCard  Cheque

|                    |   |                                  |   |
|--------------------|---|----------------------------------|---|
| Card Holder Name   |   |                                  |   |
| Credit Card Number | - | -                                | - |
| Expiry Date        | / | <b>Authorised Card Signature</b> |   |

\*To pay by Direct Debit you must have a current Direct Debit arrangement with Topdocs Pty Ltd.

If you would like to arrange for Direct Debit for future purchases please contact Topdocs Pty Ltd on 1300 65 92 42.

### SECTION B: COMPANY DETAILS

|  |     |                          |                             |
|--|-----|--------------------------|-----------------------------|
| <b>PREFERRED COMPANY NAME 1</b>                                  |     |                          |                             |
| <b>PREFERRED COMPANY NAME 2</b>                                  |     |                          |                             |
| <b>PREFERRED COMPANY NAME 3</b>                                  |     |                          |                             |
| Is this a Sole Purpose SMSF Trustee Company?                     | YES | <input type="checkbox"/> | NO <input type="checkbox"/> |
| Has the Company name already been reserved with ASIC?            | YES | <input type="checkbox"/> | NO <input type="checkbox"/> |
| If yes, Name Reservation Number:                                 |     |                          |                             |
| Is the proposed Company identical to a Registered Business Name? | YES | <input type="checkbox"/> | NO <input type="checkbox"/> |
| If yes, Registered Business Number:                              |     |                          | <i>State/s of issue</i>     |

|  |     |                          |    |                          |
|--|-----|--------------------------|----|--------------------------|
| State of Registration                                  |     |                          |    |                          |
| Registered Office of Company                           |     |                          |    |                          |
| Will the Company occupy this office?                   | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| If no, what is the name of the occupier of the office? |     |                          |    |                          |
| Principal place of business of the Company             |     |                          |    |                          |
| Price of Shares in the Company                         | \$  |                          |    |                          |

### SECTION C (I): CONDITIONS OF APPOINTING INDIVIDUALS AS A DIRECTOR, SECRETARY OR PUBLIC OFFICER

- All Company officers must consent to their appointment as either a Director, a Secretary or a Public Officer. If the Officeholders have granted the advisor completing this form permission to do so, the advisor may consent on behalf of the Officeholders.
- The Public Officer must be a Director of the Company.

By checking this box, the Officeholders listed within this order form consent to their appointments under section 117(5) of the Corporations Act and agree to appoint Topdocs to sign the Company application as agent on their behalf.

### SECTION C (II): DETAILS OF COMPANY DIRECTORS

|  |  |
|--|--|
| WHICH DIRECTOR WILL CHAIR THE MEETINGS OF THE COMPANY?                           |  |
| WHICH DIRECTOR WILL ACT AS PUBLIC OFFICER FOR THE COMPANY (IF NON-SOLE PURPOSE)? |  |

|   |           |  |    |                          |
|---|-----------|--|----|--------------------------|
| <b>DIRECTOR 1</b>   | Full name |  |    |                          |
| Address   |           |  |    |                          |
| Town/City of Birth  |           | State/ Country of Birth                |    |                          |
| Date of Birth   | / /       | Number of shares allocated to Director |    |                          |
| Class of shares   |           |  |    |                          |
| Will these shares be held in Trust for another Party?               | YES       | <input type="checkbox"/>               | NO | <input type="checkbox"/> |
| If yes, the name of the entity the shares will be held in Trust for |           |  |    |                          |

|   |           |                                 |    |                          |
|---|-----------|---------------------------------|----|--------------------------|
| <b>DIRECTOR 2</b>   | Full name |                                 |    |                          |
| Address   |           |                                 |    |                          |
| Town/City of Birth  |           | State/ Country of Birth         |    |                          |
| Date of Birth   | / /       | Number of allocated to Director |    |                          |
| Class of shares   |           |                                 |    |                          |
| Will these shares be held in Trust for another Party?               | YES       | <input type="checkbox"/>        | NO | <input type="checkbox"/> |
| If yes, the name of the entity the shares will be held in Trust for |           |                                 |    |                          |

|  |           |  |                             |
|--|-----------|--|-----------------------------|
| <b>DIRECTOR 3</b>  | Full name |  |                             |
| Address  |           |  |                             |
| Town/City of Birth   |           | State/ Country of Birth                |                             |
| Date of Birth  | / /       | Number of shares allocated to Director |                             |
| Class of shares  |           |  |                             |
| Will these shares be held in Trust for another Party?              | YES       | <input type="checkbox"/>               | NO <input type="checkbox"/> |
| If yes, the name of the Party the shares will be held in Trust for |           |  |                             |

|   |           |  |                             |
|---|-----------|--|-----------------------------|
| <b>DIRECTOR 4</b>   | Full name |  |                             |
| Address   |           |  |                             |
| Town/City of Birth  |           | State/ Country of Birth                |                             |
| Date of Birth   | / /       | Number of shares allocated to Director |                             |
| Class of shares   |           |  |                             |
| Will these shares be held in Trust for another Party?               | YES       | <input type="checkbox"/>               | NO <input type="checkbox"/> |
| If yes, the name of the entity the shares will be held in Trust for |           |  |                             |

|   |           |  |                             |
|---|-----------|--|-----------------------------|
| <b>DIRECTOR 5</b>   | Full name |  |                             |
| Address   |           |  |                             |
| Town/City of Birth  |           | State/ Country of Birth                |                             |
| Date of Birth   | / /       | Number of shares allocated to Director |                             |
| Class of shares   |           |  |                             |
| Will these shares be held in Trust for another Party?               | YES       | <input type="checkbox"/>               | NO <input type="checkbox"/> |
| If yes, the name of the entity the shares will be held in Trust for |           |  |                             |

*If you would like to nominate additional Directors please record their details on a separate sheet of paper and attach it to this form.*

### SECTION C (III): DETAILS OF THE COMPANY SECRETARY

If you would like to nominate a Secretary for the Company, enter their details here. Otherwise continue to Section D.

|                    |           |                        |  |
|--------------------|-----------|------------------------|--|
| <b>SECRETARY</b>   | Full name |                        |  |
| Address            |           |                        |  |
| Town/City of Birth |           | State/Country of Birth |  |
| Date of Birth      | / /       |                        |  |

## SECTION D): DETAILS OF ADDITIONAL MEMBERS

| ADDITIONAL MEMBER 1  |            |                          |                 |                          |               |                          |
|--|------------|--------------------------|-----------------|--------------------------|---------------|--------------------------|
| Entity Type  | Individual | <input type="checkbox"/> | Company         | <input type="checkbox"/> | Joint Holders | <input type="checkbox"/> |
| Full name of Member:   |            |                          |                 |                          | ACN:          | - -                      |
| Names of two directors (if a Company)                              |            |                          |                 |                          |               |                          |
| Address  |            |                          |                 |                          |               |                          |
| Joint Member Name:   |            |                          |                 |                          | ACN:          | - -                      |
| Names of two directors (if a Company)                              |            |                          |                 |                          |               |                          |
| Address  |            |                          |                 |                          |               |                          |
| Number of Shares to be allocated to Member                         |            |                          | Class of shares |                          |               |                          |
| Will these shares be held in Trust for another Party?              |            |                          | YES             | <input type="checkbox"/> | NO            | <input type="checkbox"/> |
| If yes, the name of the Party the shares will be held in Trust for |            |                          |                 |                          |               |                          |

| ADDITIONAL MEMBER 2  |            |                          |                 |                          |               |                          |
|--|------------|--------------------------|-----------------|--------------------------|---------------|--------------------------|
| Entity Type  | Individual | <input type="checkbox"/> | Company         | <input type="checkbox"/> | Joint Holders | <input type="checkbox"/> |
| Full name of Member:   |            |                          |                 |                          | ACN:          | - -                      |
| Names of two directors (if a Company)                              |            |                          |                 |                          |               |                          |
| Address  |            |                          |                 |                          |               |                          |
| Joint Member Name:   |            |                          |                 |                          | ACN:          | - -                      |
| Names of two directors (if a Company)                              |            |                          |                 |                          |               |                          |
| Address  |            |                          |                 |                          |               |                          |
| Number of Shares to be allocated to Member                         |            |                          | Class of shares |                          |               |                          |
| Will these shares be held in Trust for another Party?              |            |                          | YES             | <input type="checkbox"/> | NO            | <input type="checkbox"/> |
| If yes, the name of the Party the shares will be held in Trust for |            |                          |                 |                          |               |                          |

| ADDITIONAL MEMBER 3  |  |            |                          |                 |                          |               |                          |
|--|--|------------|--------------------------|-----------------|--------------------------|---------------|--------------------------|
| Entity Type  |  | Individual | <input type="checkbox"/> | Company         | <input type="checkbox"/> | Joint Holders | <input type="checkbox"/> |
| Full name of Member:   |  |            |                          |                 | ACN:                     | - -           |                          |
| Names of two directors (if a Company)                              |  |            |                          |                 |                          |               |                          |
| Address  |  |            |                          |                 |                          |               |                          |
| Joint Member Name:   |  |            |                          |                 | ACN:                     | - -           |                          |
| Names of two directors (if a Company)                              |  |            |                          |                 |                          |               |                          |
| Address  |  |            |                          |                 |                          |               |                          |
| Number of Shares to be allocated to Member                         |  |            |                          | Class of shares |                          |               |                          |
| Will these shares be held in Trust for another Party?              |  |            |                          | YES             | <input type="checkbox"/> | NO            | <input type="checkbox"/> |
| If yes, the name of the Party the shares will be held in Trust for |  |            |                          |                 |                          |               |                          |

| ADDITIONAL MEMBER 4  |  |            |                          |                 |                          |               |                          |
|--|--|------------|--------------------------|-----------------|--------------------------|---------------|--------------------------|
| Entity Type  |  | Individual | <input type="checkbox"/> | Company         | <input type="checkbox"/> | Joint Holders | <input type="checkbox"/> |
| Full name of Member:   |  |            |                          |                 | ACN:                     | - -           |                          |
| Names of two directors (if a Company)                              |  |            |                          |                 |                          |               |                          |
| Address  |  |            |                          |                 |                          |               |                          |
| Joint Member Name:   |  |            |                          |                 | ACN:                     | - -           |                          |
| Names of two directors (if a Company)                              |  |            |                          |                 |                          |               |                          |
| Address  |  |            |                          |                 |                          |               |                          |
| Number of Shares to be allocated to Member                         |  |            |                          | Class of shares |                          |               |                          |
| Will these shares be held in Trust for another Party?              |  |            |                          | YES             | <input type="checkbox"/> | NO            | <input type="checkbox"/> |
| If yes, the name of the Party the shares will be held in Trust for |  |            |                          |                 |                          |               |                          |

**TOPDOCS SHARE CLASSES – COMPANY INCORPORATION**

The Topdocs Company Constitution allows for any of the following types of Shares when establishing your Company. On your Full Service Order Form, please select the Share Class applicable for each Director's / Additional Member's Shareholding.

| SHARE CLASS   | RIGHTS ASSOCIATED WITH THE SHARE CLASS  |
|---|---|
| <p style="text-align: center;"><b>ORD<br/>A<br/>B</b></p>     | <ul style="list-style-type: none"> <li>• the right to vote at meetings of Members; and</li> <li>• the right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• the right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul> |
| <p style="text-align: center;"><b>C<br/>D<br/>E<br/>F</b></p> | <ul style="list-style-type: none"> <li>• no right vote at meetings of Members; and</li> <li>• the right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• the right to participate in any division of any surplus assets or profits of the Company.</li> </ul>  |
| <p style="text-align: center;"><b>G<br/>H<br/>I<br/>J</b></p> | <ul style="list-style-type: none"> <li>• no right vote at meetings of Members; and</li> <li>• the right to receive Dividends from the Company; and</li> <li>• no right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• no right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul>       |
| <p style="text-align: center;"><b>K</b></p>                   | <ul style="list-style-type: none"> <li>• the right to vote at meetings of Members; and</li> <li>• no right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• the right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul>  |
| <p style="text-align: center;"><b>L</b></p>                   | <ul style="list-style-type: none"> <li>• no right to vote at meetings of Members; and</li> <li>• the right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• no right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul>   |
|   |   |

|   |  |
|---|--|
| <p style="text-align: center;"><b>M</b></p>                                     | <ul style="list-style-type: none"> <li>• the right to vote at meetings of Members; and</li> <li>• no right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• no right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul>  |
|   |  |
| <p style="text-align: center;"><b>N</b></p>                                     | <ul style="list-style-type: none"> <li>• the right to vote at meetings of Members; and</li> <li>• no right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• the right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul>   |
|   |  |
| <p style="text-align: center;"><b>O CLASS<br/>REDEEMABLE<br/>PREFERENCE</b></p> | <ul style="list-style-type: none"> <li>• the right to vote at meetings of Members; and</li> <li>• no right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• no right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul> <p>The company may at any time redeem all or redeem any one or more O class Redeemable Preference shares. If the company elects to do so:</p> <ul style="list-style-type: none"> <li>• the Company will give the holder of the shares to be redeemed seven days written notice of the redemption;</li> <li>• the notice will be delivered or posted to the Notice Address for the holder of those shares with a cheque for the amount paid up in respect of those shares; and</li> <li>• any redemption under this Rule will be effective immediately upon the expiry of seven days from the delivery or posting of the notice of redemption.</li> </ul> |
|   |  |
| <p style="text-align: center;"><b>P CLASS<br/>REDEEMABLE<br/>PREFERENCE</b></p> | <ul style="list-style-type: none"> <li>• no right to vote at meetings of Members; and</li> <li>• the right to receive Dividends from the Company; and</li> <li>• the right to participate in the distribution of assets pursuant to clauses 156 to 158 hereof on winding up of the Company.</li> <li>• no right to participate in any division of any surplus assets or profits of the Company equally with all other members having similar rights.</li> </ul> <p>The company may at any time redeem all or redeem any one or more P class Redeemable Preference shares. If the company elects to do so:</p> <ul style="list-style-type: none"> <li>• the Company will give the holder of the shares to be redeemed seven days written notice of the redemption;</li> <li>• the notice will be delivered or posted to the Notice Address for the holder of those shares with a cheque for the amount paid up in respect of those shares; and</li> <li>• any redemption under this Rule will be effective immediately upon the expiry of seven days from the delivery or posting of the notice of redemption.</li> </ul> |