

Change of Business Name Director(s), Shareholder(s) or Authorized Person(s)

更改商號名稱、董事、股東或獲授權人士

To: Suncorp Securi	ties Limited							
致:新確證券有	育限公司							
•	otify you of changing our business name:							
吾等謹此通知]貴公司更改吾等之商號名稱:							
	English 英文							
New Business N 新商號名稱	ame Chinese 中文							
	Please attach a certified true copy of new Certificate of Incorporation and Business Registration Certificate (if applicable) by practicing solicitor or CPA together with a revised resolution showing new specimen company chop. 請附上經執業律師或註冊會計師核實之新公司註冊證書及商業登記證(如適用)副本及附有新公司印鑑式樣之董事決議案。							
	otify you of changing our director(s):]貴公司更改吾等之董事:							
Please attach a certified true copy of new Register of Directors by practicing solicitor or CPA, certified true copies of ID or Passport by practicing solicitor or CPA and current 3-month residential address proof of new directors. New directors should sign a personal guarantee. 請附上經執業律師或註冊會計師核實之新董事資料副本、新董事之身份證或護照副本及最近三個月內之住址證明。新董事需要簽妥個人擔保書。								
□ We hereby notify you of changing our shareholder(s): 吾等謹此通知貴公司更改吾等之股東:								
Please attach a certified true copy of new Register of Members by practicing solicitor or CPA. 請附上經執業律師或註冊會計師核實之新股東資料副本。 Please attach a new Ownership Chart with director's declaration indicating the ultimate individual beneficial owners 請附上顯示最終實益擁有人之公司擁有權的最新圖表連同有關董事聲明。								
— 吾等謹此通知	otify you of changing our authorized person(s): 1貴公司更改吾等之獲授權人士:							
Please attach a revised resolution, a completed and signed new list of authorized signatories with specimen signatures and certified true copies of ID or Passport of the new authorized persons by practicing solicitor or CPA. 請附上更新之董事決議案,已填妥及簽署的獲授權簽署人士之新名單與簽名式樣及經執業律師或註冊會計師核實之新獲授權人士身份證或護照副本。								
Client Signature(s) 客戶簽署	★□ Please use the signature(s) field with our company 請用留存本公司之印鑑式樣	Account No. 戶口號碼						
Client Name 客戶名稱		Date 日期	day 日 / month 月 / year 年					
客戶名稱 		日期 						

Please fax to Suncorp Securities Limited 請傳真至新確證券有限公司 info@suncorpsecurities.com.hk

For official use only 僅供職員填寫										
☐ Original ☐ Face to face	Handled by	Verified by	Approved by	Input by / scanned by	Checked by	CDD Level Unchanged / Low / Normal / High	☐ PEP YES / NO			

Fax: (852) 3899 1888

傳真: (852) 3899 1888



New List of Authorized Signatories and Specimen Signatories

獲授權簽署人士之新名單與簽名式樣

Full Name of Sigr 簽署人英文姓名	natory in English			Passport No. 證/護照號碼			Specimen 簽名式樣	Signature	
双白ハハヘルロ			タル・	起/ 吃///////////////////////////////////			双コンル		
			<u> </u>						
			1						
			1						
			 						
			1						
			1						
			 						
			1						
			1						
			1						
			<u> </u>						
			 						
l			1						
l			1						
			 						
l			1						
l			1						
Signing Instruction				Specimen Company Chop 公司印鑑式樣					
簽署指示					公川川遍川派				
Any #signature(s) shall be valid. 任何#									
TT 1 IH	XX. ITWA 1172								
ľ									
				For official use on					
☐ \riginal ☐ Face to face	Handled by	Verified by		Approved by	Input by / scanned by	Check	ced by	CDD Level Unchanged / Low / Normal / High	PEP YES / NO